NHPCO Project ECHO 2023

Equity Where It Matters

Topic: Intentional Inclusivity in the Workplace

Date: Thursday, August 17, 2023
NHPCO Project ECHO Team

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Disclosure
The faculty and planners for this educational event have no relevant financial relationship(s) with ineligible companies to disclose.

Data Collection
In order to support the growth of the ECHO® movement, Project ECHO® collects participation data for each ECHO® program. Data allows Project ECHO® to measure, analyze, and report on the movement’s reach. Data is used in reports, on maps and visualizations, for research, for communications and surveys, for data quality assurance activities, and for decision-making related to new initiatives.

Evaluation
You will be receiving an email with a link to complete a short survey about this session. Please complete the survey within 48 hours. We ask all participants to take the survey as it will help us to improve future sessions.
Ground Rules and Video Teleconferencing Etiquette

• This is an all share-all learn format; judging is not appropriate
• Respect one another – it is ok to disagree but please do so respectfully
• Participants – introduce yourself prior to speaking
• One person speaks at a time
• Disregard rank/status
• Remain on mute unless speaking and eliminate or reduce environmental distractions to improve sound/video quality
• Use video whenever possible; make eye contact with the camera when you are speaking
• Do not disclose protected health information (PHI) or personally identifiable information (PII)
Today’s Agenda

- Introduction of Faculty – NHPCO Team
- Didactic Presentation – Faculty
- Case Study Presentation – Faculty
- Discussion – Session Participants, Faculty, and NHPCO Team
- Key Takeaways – Faculty and NHPCO Team
- Closing Remarks – NHPCO Team
Session Faculty

Altonia Garrett, MBA, MHA, RN
Executive Director, AccentCare, Washington, DC
Founding Executive Director, Capital Caring’s Center for Equity, Inclusion and Diversity Member, ACHE

Wayman Scott, MS, MTS, LGPC
Associate Director of Diversity, Equity, Inclusion and Community Relations, Gilcrest, MD
Didactic Presentation
Intentional inclusivity in the workplace: Definitions

**Inclusion** is:
- the process of creating a working culture and environment that recognizes, appreciates, and effectively utilizes the talents, skills, and perspectives of every employee, so that every employee feels valued for their unique qualities and experience a sense of belonging

**Inclusive** is:
- embracing all people; making all people feel valued and they belong in their organization

**Inclusion initiatives** are:
- efforts to help all people feel that they are valued and belong in their organization.

“Inclusion unleashes the power of diversity.”
Intentional inclusivity in the workplace: Why does it matter?

Sentiments on Diversity
52% Positive

Sentiments on Inclusion
69% Negative

Inclusion is essential for engaging and retaining today's workforce

- 80% of respondents say inclusion is important when choosing an employer
- 39% of respondents reported that they would leave their current organization for a more inclusive one
- 23% of respondents indicated they have already left
Intentional inclusivity in the workplace: Recommendations

Reinforce tone at the top
- Evaluation and performance
- Inclusive leadership, walk the talk

Embed inclusion into the organizational culture
- Education and awareness
- Articulate and reinforce through employee life cycle
- Raise levels of awareness and education around unconscious biases

Focus on the experience of how an inclusive culture feels
- Employee engagement
- Employee Resource Group or Affinity
- Awareness and understanding of intersectionality.

71% of respondents valued working for an organization with leadership that consistently demonstrates inclusive behaviors over one with mixed quantity or quality of inclusion initiatives offered — as opposed to working for an organization with high-quality inclusion programming, but inconsistent inclusive leadership behaviors.
Intentional inclusivity in the workplace: Examples

- Active mentorship, sponsorship, and development programs
- Create more inclusive policies (ex. Gender neutral parental leave, caregiver leave, religious holidays, etc.) and workplace accommodation.
- Promote and sponsor Employee Resource Groups and/or councils
- Honor and acknowledge cultural and religious holidays.
  - Providing a conducive space in the office for Muslim employees to pray undisturbed during the month of Ramadan and celebrate
- Researching and educating yourself in order to be more supportive and understanding towards colleagues that are neurodivergent (having a brain that works differently than a “neurotypical person”) ex. ADHD or Autism
- Correcting colleagues when they hear the wrong pronouns being used for a coworker (even in the absence of the coworker).
- Acknowledge the individual
- Foster psychological safety
- Utilize listening sessions for employees
Intentional inclusivity in the workplace: Key Considerations

Success in creating an inclusive workplace will come from taking necessary measures to understand your team, listen to their needs, and adapt work/the work environment in unique ways. Inclusion begins with all of us.

- Build a strategic plan and goal for focus
  - Follow the strategic plan with strategic action
- Understand diversity metrics with the lens the intersectionality and inclusion
- Center voices of underrepresented talent in decision making processes
- Analyze the impact for those most affected when creating initiatives
- Ensure accountability and ownership when intent and impact are not aligned
- Diversity and Inclusion work should be integrated throughout the work system and not isolated in HR Department
Didactic Presentation Q&A
Case Study Presentation: Internal and External Impact of Employee Resource Groups
A patient came from a nursing home into the hospice inpatient unit. Patient was named “Ms. R” and presented as male. Ms. R was non-verbal when she came to hospice.
Staff member: The Chaplain involved in the story is a member of the Greater PRIDE, LGBTQ+ employee resource group at Gilchrist and Greater Baltimore Medical Center.

Greater PRIDE sponsored learnings on pronoun use and gender identity which the chaplain attended. The chaplain continued to learn to better serve the hospice patients, families, and staff.

Patient: Ms. R had long hair and a full, thick facial beard. She had transitioned from male to female earlier in her life. She came from a nursing home to hospice, and when we received her, she could not communicate. The chaplain later learned from her medical chart and her daughter that Ms. R had transitioned from male to female many years ago. She had not had gender confirmation surgery and was unable to continue hormone therapy once placed in the nursing home. She did not have money to pay for it, and hormone therapy was not on the list of approved medications for nursing home patients.
The chaplain utilized learnings sponsored by Greater PRIDE. She is a member of the LGBTQ+ community who worked to further her knowledge of the needs of the LGBTQ+ Community.

During a situation when Ms. R arrived the chaplain used her education, experience and lens to provide a better outcome.

Chaplain called the daughter K

Chaplain: I said, “My name is A. I am a chaplain for hospice. Is this an OK time to talk about Ms. R?”

Daughter: “Yes. He’s, my Dad.”
Assessment

• Chaplain: “K, from your dad’s medical history, we are aware that your dad transitioned from male to female. We want you to know that our staff is aware of this. We don’t want you to feel like you need to explain anything, and I am available if you would like to talk with me.”

• Daughter thanked chaplain for candor. K said that Ms. R was still her dad and that she and her mom understood, but her brother had always struggled with it.

• Daughter: “I am glad you know, It will make his stay there easier for me.”

• Chaplain: “If your dad were able to speak to us, would he want to present as a woman or a man? We can honor his life and let him die looking as much like Ms. R as possible—or leave his beard and dress him like a man.”

• Daughter “I know Ms. R would want to be seen as a woman.”
Assessment

• Following the conversation with the daughter the chaplain went to the nurse and doctor, who were so grateful that the chaplain had talked with K.

• We told the nursing assistants that the patient was Ms. R and identifies as a woman. The aide shaved Ms. R’s beard. That was a very difficult task because the beard had at least two years of growth. The aides bathed her, washed and brushed her hair, and applied lotions. Finally, Ms. R looked like herself.

• Daughter: “I know she is Ms. R, but he will always be Dad to me.”
• K expressed gratitude for our ability to not judge Ms. R but to care for her.
Discussion and Recommendations
Discussion and Recommendations

What could the hospice program have done differently?
Were there assumptions made? Was the record and social history reviewed?
Why did the nursing home not recognize Ms. R’s gender identity?
What can be done to ensure that providers do this upon enrollment?
Key Takeaways

• Inclusion is not a static idea. It is an active pursuit.
• Focusing Diversity without inclusion is not as effective.
• Inclusion in the workplace has positive impacts both internal and external (patient, family, community).
• The future workforce is focused on a work environment that fosters a culture of belonging that is and feels inclusive.
• Employee Resource Groups are a tool to empower staff by creating a safe space for staff members and allies who are part of that community.
• Listening sessions are a tool to better understand the needs of employees and communities.
References


References


Session Evaluation and Certificate of Completion

• Your feedback is valuable as we plan upcoming sessions!

• Project ECHO sessions are not accredited for continuing education, but we are able to offer a confirmation of completion for each session. To receive confirmation of completion, please complete the following Project ECHO Session Evaluation and Knowledge Check following each session.
NHPCO Health Equity Certificate

• Would you like to demonstrate your commitment to delivering culturally competent care across the continuum of serious illness in an equitable, inclusive, and person-centered manner?
  • NHPCO is pleased to offer a Health Equity Certificate for individuals who participate in at least 17 sessions in the *Equity Where It Matters* series

• Participants interested in earning the Health Equity Certificate must complete the [Project ECHO Session Evaluation and Knowledge Check](#) following each session.

• Effective July 20, the Session Evaluation and Knowledge Check can be completed using one link for each session.

• Session Evaluation and Knowledge Check links are unique for each Project ECHO session and do not expire. Links for each 2023 session can be found on the [NHPCO Project ECHO webpage](#).
Upcoming Sessions

Date: September 7
Topic: Best Practices for Inclusive Metrics in End-of-Life Care

Date: September 21
Topic: Supporting Hispanic Patients at the End of Life
Additional Information

NHPCO Project ECHO webpage:
https://www.nhpco.org/regulatory-and-quality/quality/projectecho/

NHPCO Project ECHO session recordings and Key Takeaways:
https://www.nhpco.org/regulatory-and-quality/quality/projectecho/2023-project-echo-session-recordings/

NHPCO Project ECHO Registration Link:
https://nhpco.zoom.us/meeting/register/tZEsfu-trz4oGtQeKFw41UEIYNwjSli8QCBF

For more information:
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