

# Southern Illinois University School of Medicine

## Policy and Plan For Diversity and Inclusion

### BACKGROUND

The Southern Illinois University (SIU) School of Medicine's long-standing mission is "to assist the people of central and southern Illinois in meeting their health care needs through education, patient care, research, and service to the community."<sup>1</sup> SIU's medical school was established for these purposes and is internationally known for its success in the region. It continues that focus to this day.

Complementing this community emphasis is an institutional commitment to diversity and inclusion throughout the medical school. In this context, diversity is "the broad field of issues related to difference ... (and how) people of different kinds (backgrounds) are participating in a particular organization or society"; inclusion is "the ability of people to feel fully integrated into the cultural dynamics, leadership and decision-making structures of the organization."<sup>2</sup> The School's commitment to these principles is reflected in its long term vision when it calls for "diversity and inclusion" throughout the medical school's programs as well as in its unifying principles stating that "individuals of varying backgrounds and interests will be sought and encouraged to grow alongside one another in a secure, nurturing and professional atmosphere" and that "the medical school will seek, appreciate, and respect individual diversity, and will mirror the community in which it exists."<sup>3</sup>

The importance of this commitment to diversity and inclusion arises from its relevance to academic medicine and patient care. The American Council on Education suggests that diversity is important to fulfilling the primary educational mission of institutions of higher education; that it "enriches the educational experience, ... promotes personal growth and a healthy society, ... strengthens communities and the workplace, ... (and) that it enhances America's economic competitiveness."<sup>4</sup> The main institutional accreditation agency for medical education, the Liaison Committee on Medical Education, states that "aspiring future physicians will be best prepared for medical practice in a diverse society if they learn in an environment characterized by, and supportive of, diversity and inclusion."<sup>5</sup> Jordan Cohen et al, in their article, *The Case for Diversity in the Health Care Workforce*, point out that a "diverse health care workforce will help to expand health care access for the underserved, foster research in neglected areas of societal need, and enrich the pool of managers and policymakers meeting the needs of a diverse populace."<sup>6</sup> This reflects the

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<sup>1</sup> SIU School of Medicine, *Strategic Plan* (2013), 1.

<sup>2</sup> Howard J. Ross, *Reinventing Diversity: Transforming Organizational Community to Strengthen People, Purpose, and Performance*. (Lanham, Maryland: Rowman and Littlefield, 2011).

<sup>3</sup> SIU School of Medicine. *Strategic Plan* (2013), 2-3.

<sup>4</sup> American Council on Education, *On the Importance of Diversity in Higher Education*. (ACE, 2012).

<sup>5</sup> Liaison Committee on Medical Education, *Functions and Structure of a Medical School - Standards for Accreditation of Medical Education Programs Leading to the M.D. Degree*. (LCME, 2013), Institutional Setting Standard IS-16.

<sup>6</sup> Jordan J. Cohen, Barbara A. Gabriel, and Charles Terrell, *The Case for Diversity in the Health Care Workforce*. *Health Affairs*, 21, no. 5. (2002): 90-102.

reality that patient populations and their communities are increasingly diverse and that health care professionals must fully appreciate and address the needs of a diverse society.

Diversity and inclusion are also necessary strategies for the continuing success of the SIU School of Medicine in meeting its mission. According to the U.S. Department of Health and Human Services, the “most compelling argument for a more diverse health professions workforce is that it will lead to improvements in public health.”<sup>7</sup> Findings from research suggest that greater diversity among health professionals leads to more effective patient-practitioner relationships, better communications and trust between patients and health professionals, and improved access to care for underserved populations.<sup>8</sup> This has led the School to state that it must “systematically attract and retain students, faculty members, staff members, and others in the medical school community from demographically diverse backgrounds”<sup>9</sup> as it contributes to the preparation of the physician workforce needed for the future. Diversity and inclusion are, as Nivet suggests, “strategic imperatives.”<sup>10</sup>

### **POLICY STATEMENT**

The SIU School of Medicine is committed to cultivating a diverse campus population for the well-being of its learners and workforce. Diversity coupled with inclusion brings about a nurturing educational environment ideal for learners at all levels, the faculty who teach, and the staff who support. To that end, the School will recruit, retain, and advance a student body, faculty, and staff reflective of the diversity of the region served by the medical school.

In this context, a diverse student body includes students born and raised in rural areas and small towns of Illinois; all levels of family wealth and educational advantage; and those from groups traditionally underrepresented in medicine.<sup>11</sup> A diverse faculty includes individuals from these traditionally underrepresented in medicine groups as well as women, while diversity in the staff may include other minority groups in the local community. SIU School of Medicine’s goal is to have its learners and workforce reflect the rich diversity found in central and southern Illinois so as to advance the School’s mission of improving the health and welfare of the entire region.

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<sup>7</sup> U.S. Department of Health and Human Services – Health Resources and Service Administration – Bureau of Health Professions, *The Rationale for Diversity in the Health Professions: A Review of the Evidence*. (HRSA, 2006), 2-4.

<sup>8</sup> US DHHS-HRSA, 2.

<sup>9</sup> SIU School of Medicine (2013). *Strategic Plan* (2013), 3.

<sup>10</sup> Marc A. Nivet, *Commentary: Diversity 3.0: A Necessary Systems Upgrade*. *Academic Medicine*. Vol 86, No 12. pg 1488.

<sup>11</sup> Traditionally Underrepresented in Medicine groups include the following: African-Americans, Hispanics, Native-Americans, Alaskan-Natives, Native Hawaiians, and other Pacific Islanders.

## ACTION PLAN

This action plan advances SIU School of Medicine's commitment to diversity and inclusion as outlined in the above-noted policy. The plan includes the School's objectives for diversity and inclusion, lists of diversity categories, and general strategies designed to achieve a more diverse, inclusive medical school. A synopsis of the action plan is provided as Appendix 1.

### Objectives

SIU School of Medicine's objectives for diversity and inclusion are the following:

- 1) Define and publicize SIU School of Medicine's commitment to diversity and inclusion throughout the School, region, and medical profession.
- 2) Achieve diversity in the School's student population, faculty, and staff that reflects the diversity of the central and southern Illinois region.
- 3) Create an organizational culture that embraces diversity and inclusion as a means of better serving the community and the medical profession.

### Diversity Categories

The Liaison Committee on Medical Education's standard for diversity states that an accredited medical school should "articulate its expectations regarding diversity across its academic community in the context of local and national responsibilities, and regularly assess how well such expectations are being achieved ... (and that) the institution should establish focused, significant, and sustained programs to recruit and retain suitably diverse students, faculty members, (and) staff, ... ." <sup>12</sup> The LCME also recommends that medical schools determine specific "categories of diversity" upon which to focus diversity efforts and advance diversity consistent with the medical school's local and national responsibilities (mission). <sup>13</sup> (See Appendix 2 for operational detail regarding these categories.)

### Students

SIU School of Medicine's mission commits the medical school to educating a physician workforce particularly well suited to addressing the health needs of the citizens of central and southern Illinois. Integral to this commitment is the recruitment, retention, and advancement of a medical student body drawn from Illinois's rural areas and small towns, from among the broad range of economic and educational backgrounds present in it, and reflective of the region's ethnic and racial diversity. Students recruited from these diverse backgrounds will enhance the learning environment of all students, improve the students' understanding of and knowledge about the health needs of a diverse society, and

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<sup>12</sup> LCME Standard IS-16.

<sup>13</sup> Liaison Committee on Medical Education, LCME/CACME Medical Education Database 2014-2015 (2013). Institutional Setting Standard IS-16.

encourage the students to help address problems of health access and equity once in practice.

The students' categories are designed for these purposes:

- Category 1: Students - Rural/Small Town Students. Medical students from areas designated by the U.S. Census Bureau as rural or from small towns of 25,000 or less in population.
- Category 2: Students - Economically/Educationally Disadvantaged Students. Medical students from economically or educationally disadvantaged backgrounds, including lower family income.
- Category 3: Students - Traditionally Underrepresented in Medicine Students. Medical students from one or more of the following ethnic or racial groups, traditionally underrepresented in medicine: African-Americans, Hispanics, Native-Americans, Alaskan-Natives, Native Hawaiians, and other Pacific Islanders.

## Faculty and Staff

As a national leader in medical education, the School also is committed to advancing diversity within the medical profession and within the patient care systems of the central and southern Illinois region. By training medical students in a diverse educational environment, SIU's physician graduates will be well prepared to care for patients from any background as well as to help address health inequities in society. A diverse faculty and staff is achieved through the employment of faculty and staff who reflect the rich diversity of the communities served by the medical school.

Faculty and staff categories are the following:

- Category 4: Faculty - Traditionally Underrepresented in Medicine Faculty and Females. Faculty members drawn from the ethnic and racial categories traditionally underrepresented in medicine (see above) and females.
- Category 5: Staff - Diverse Staff. Medical school staff from minority and international backgrounds. In this context, minority and international backgrounds include the traditionally underrepresented in medicine groups noted above as well as other non-white backgrounds.

## Strategies

Achieving SIU School of Medicine's objectives for diversity and inclusion will require the concerted, ongoing, and positive actions of the entire medical school community. Faculty, staff, students, and leadership of the medical school should seek opportunities to advance diversity and inclusion in their normal activities. As an institution, the medical school will pursue the following strategies.

### *Medical Students*

1. *Scholarships for students from rural/small towns, economically/educationally disadvantaged backgrounds, and traditionally underrepresented in medicine backgrounds.*

The medical school currently offers needs-based scholarships and advises all medical students on the availability of other scholarships and loan programs. These efforts will continue. In addition, the medical school will explore additional scholarship resources for which members of the diversity category groups may qualify.<sup>14</sup>

2. *Recruitment visits to downstate Illinois universities/colleges and Chicago-area and Metro East St. Louis-area universities/colleges.*

The School will continue making recruitment visits to Illinois universities and colleges with relatively high numbers of undergraduate students in the diversity categories. When possible, the medical school's representatives will include individuals from similar backgrounds.

3. *Selection criteria preference for rural/small town residents, economically/educationally disadvantaged backgrounds, and traditionally underrepresented in medicine backgrounds.*

The School will continue the selection criteria preferences in its admissions process for students from central and southern Illinois, those from rural, inner-city or disadvantaged backgrounds.<sup>15</sup>

4. *Hispanic student recruitment plan developed/implemented.*

The Student Affairs and Diversity offices will develop and implement a specific plan for increasing recruitment of students from Hispanic backgrounds. This plan will be reviewed and approved by the School's Dean and Provost, with input from the Executive Committee, before it is implemented.

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<sup>14</sup> Scholarships funded by the University may not be limited to students in the diversity categories noted here; instead, they will be available to all students meeting the scholarships' qualification criteria.

<sup>15</sup> SIU School of Medicine, *Catalog 2011-2013* (2011).

5. *Intensive academic advising/remediation activities for students.*

The faculty and staff of the medical school provide intensive academic advising and remediation for students needing help in progressing through the medical school's curriculum. These efforts will continue. Funding for additional personnel and resources to aid in these activities will be sought from the State of Illinois.

6. *Course/clerkship content addressing health topics associated with diverse cultures/belief systems, cultural biases, and health disparities among population groups.*

The undergraduate medical education program includes numerous opportunities for educating the medical students regarding health topics associated with diverse populations and communities. These are integrated in existing courses and clerkships, and are continuously reviewed for improvement as part of the School's ongoing curriculum review activities.

7. *Continue leadership offices (Student Affairs, Diversity Office).*

The medical school has established the Office of Student Affairs and the Office of Diversity to lead diversity and inclusion efforts. These offices have faculty and staff well trained and experienced in student support, particularly as it relates to the needs of a diverse student body. These offices will continue in their work.

8. *Continue MEDPREP and P<sup>4</sup> programs.*

The School has two main educational pipeline programs which reflect the medical school's diversity policy and objectives. The Medical/Dental Education Preparatory Program (MEDPREP) was established in 1972 to assist students from economically/ educationally disadvantaged backgrounds, many of whom are also from traditionally underrepresented in medicine backgrounds, to prepare for success in medical professions schools. The P<sup>4</sup> program is a relatively new educational pipeline program. Implemented in 2009 in collaboration with the Springfield Public School district, the Physician Pipeline Preparatory Program (P<sup>4</sup>) encourages Springfield high school students to train to be physicians; many P<sup>4</sup> students are from minority backgrounds. These programs will be continued.

## *Faculty*

1. *Minority Faculty Recruitment Plan implemented (include education for search committee members).*

The Minority Faculty Recruitment Plan was developed and implemented in 2007, but knowledge of it among faculty and chairs of the academic departments is lacking. This plan provides useful advice for departments to use in advertising faculty recruitments, organizing search committees, and hosting applicants. This plan will be fully implemented, including efforts to promote it among department chairs and with search committee members.

2. *Mentorship program formalized/developed.*

Mentorship activities for faculty are informal and vary significantly among the School's academic departments. A formal mentorship program will be developed and offered to all faculty members, including those from traditionally underrepresented in medicine backgrounds.

3. *Educational programs celebrating diversity.*

The medical school will continue educational programs for faculty, staff, and community members addressing diversity topics.

*Staff*

1. *Minority Staff Recruitment Plan developed/ implemented.*

A Minority Staff Recruitment Plan similar in concept to that used for faculty will be developed and implemented. This plan will include concerted outreach efforts to the local minority communities and exploration of ways to more fully open employment opportunities to minority applicants.

2. *Recruitment visits in diverse minority communities (Springfield, Metro East St. Louis).*

The medical school will continue recruitment visits (e.g., fairs) to area communities with a high percentage of minority citizens and other individuals from diverse backgrounds. This will be part of the concerted outreach efforts to the local minority communities noted above. Also consider performing these recruitment visits in conjunction with SIU's other health professions programs, including those in dental medicine, nursing, and pharmacy.

3. *Mentorship program formalized/developed.*

As with faculty, mentorship activities for staff are informal and vary significantly among departments and units of the medical school. A formal staff mentorship program will be developed and offered to all staff, including those from minority, diverse backgrounds.

4. *Educational programs celebrating diversity.*

The medical school will continue educational programs for faculty, staff, and community members addressing diversity topics.

5. *Tuition reimbursement program.*

The School has an employee tuition reimbursement program which provides funding for approved college coursework for employees. As possible, funding for this program will be increased. The program will be marketed during recruitment visits to minority communities.

See Appendix 1 for a summary of this action plan, including performance measures and benchmarks. Appendix 3 displays these strategies according to the LCME IS-16 standards reporting categories.



Appendix 1

SIU School of Medicine  
Diversity and Inclusion: Summary of the Action Plan

Groups	Diversity Categories	Recruitment, Retention, and Advancement Strategies	Measures			
			Activity/Effort Measure		Outcome Measure	
			Metric	Benchmark	Metric	Benchmark
Medical Students	Category 1: Rural/Small Town Students	<ul style="list-style-type: none"> <li>• Scholarships for students from rural/small towns</li> <li>• Recruitment visits to downstate Illinois universities/colleges</li> <li>• Selection criteria preference for rural/small town residents</li> <li>• Intensive academic advising/remediation activities for students</li> <li>• Course/clerkship content addressing health topics associated with diverse cultures/belief systems, cultural biases, and health disparities among population groups</li> <li>• Continue leadership offices (Student Affairs, Diversity Office)</li> <li>• Continue MEDPREP and P<sup>4</sup> programs</li> </ul>	<ul style="list-style-type: none"> <li>• Scholarship funding amount</li> <li>• Recruitment visits</li> <li>• Retention rates</li> <li>• Offers Made/ Declined/ Accepted</li> </ul>	Recent trends in measure	%Students from R/STs	Recent trends in measure  AAMC Percentile: Rural Practice, In-State Practice
	Category 2: Economically/ Educationally Disadvantaged Students	<ul style="list-style-type: none"> <li>• Scholarships for students from economically/ educationally disadvantaged backgrounds</li> <li>• Recruitment visits to downstate Illinois universities/colleges</li> <li>• Selection criteria preference for economically/ educationally disadvantaged students</li> <li>• Intensive academic advising/remediation activities for students</li> <li>• Course/clerkship content addressing health topics associated with diverse cultures/belief systems, cultural biases, and health disparities among population groups</li> <li>• Continue leadership offices (Student Affairs, Diversity Office)</li> <li>• Continue MEDPREP and P<sup>4</sup> programs</li> </ul>	<ul style="list-style-type: none"> <li>• Scholarship funding amount</li> <li>• Recruitment visits</li> <li>• Retention rates</li> <li>• Offers Made/ Declined/ Accepted</li> </ul>	Recent trends in measure	%Students from EEDs	Recent trends in measure  AAMC Percentile: Underserved Area Practice
	Category 3: Traditionally Underrepresented in Medicine Students (AA/ Black, Hispanic, Native American/ Alaska Native, Native Hawaiian/	<ul style="list-style-type: none"> <li>• Scholarships for students from minority backgrounds</li> <li>• Recruitment visits to Chicago-area and Metro East St. Louis-area universities/colleges (SIUE)</li> <li>• Selection criteria for traditionally underrepresented students</li> <li>• Hispanic student recruitment plan developed/ implemented</li> <li>• Intensive academic advising/remediation activities for</li> </ul>	<ul style="list-style-type: none"> <li>• Scholarship funding amount</li> <li>• Recruitment visits</li> <li>• Retention rates</li> <li>• Offers Made/ Declined/ Accepted</li> </ul>	Recent trends in measure	%Students from TURM (& elements)	Recent trends in measure  Central/ South. IL census

Appendix 1

SIU School of Medicine  
Diversity and Inclusion: Summary of the Action Plan

SIU School of Medicine Diversity and Inclusion: Summary of the Action Plan						
Groups	Diversity Categories	Recruitment, Retention, and Advancement Strategies	Measures			
			Activity/Effort Measure		Outcome Measure	
			Metric	Benchmark	Metric	Benchmark
	Other Pacific Islanders)	students <ul style="list-style-type: none"> <li>• Course/clerkship content addressing health topics associated with diverse cultures/belief systems, cultural biases, and health disparities among population groups</li> <li>• Continue leadership offices (Student Affairs, Diversity Office)</li> <li>• Continue MEDPREP and P4 programs</li> </ul>				AAMC Percentile: Graduates from TURM categories
Faculty	Category 4: Traditionally Underrepresented in Medicine Faculty (AA/ Black, Hispanic, Native American /Alaska Native, Native Hawaiian/ Other Pacific Islanders); Female	<ul style="list-style-type: none"> <li>• Minority Faculty Recruitment Plan implemented (include education for search committee members)</li> <li>• Mentorship program formalized/developed</li> <li>• Educational programs celebrating diversity</li> </ul>	<ul style="list-style-type: none"> <li>• Search Committee</li> <li>• Mentors</li> <li>• Targeted advertisement</li> <li>• Offers Made/ Declined/ Accepted</li> </ul>	1 minority member/ committee  Recent trends in measure	%Faculty from TURM (&elements)	Recent trends in measure  Central/ Southern IL census  AAMC Percentile: Full-Time Faculty from TURM categories, females
Staff	Category 5: Diverse Staff (AA/ Black, Hispanic, Native American /Alaska Native, Native Hawaiian/ Other Pacific Islanders, Asian)	<ul style="list-style-type: none"> <li>• Minority Staff Recruitment Plan developed/ implemented</li> <li>• Recruitment visits in minority communities (Springfield, Metro East St. Louis)</li> <li>• Mentorship program formalized/developed</li> <li>• Educational programs celebrating diversity</li> <li>• Tuition reimbursement program</li> </ul>	<ul style="list-style-type: none"> <li>• Recruitment visits</li> <li>• Mentors</li> <li>• Tuition reimb. program spending</li> <li>• Offers Made/ Declined/ Accepted</li> </ul>	Recent trends in measure	%Staff from Minority Groups (&elements)	Recent trends in measure  Central/ Southern IL census
TURM=Traditionally Underrepresented in Medicine. R/ST = rural/small town. E/E/D = economically/educationally disadvantaged.  Scholarships funded by the University may not be limited to students in the diversity categories noted here; instead, they will be available to all students meeting the scholarships' qualification criteria.						

## Appendix 2

### SIU School of Medicine Diversity and Inclusion

#### Technical Notes

Traditionally Underrepresented in Medicine (TURM): includes individuals self-described as from one or more of the following backgrounds: Hispanic, Black/African-American, Native American/Alaska Native, Native Hawaiian/Other Pacific Islander.

#### Diversity Categories

Students - Sources: Applicant data from the American Medical College Application Service (AMCAS) system. Enrollment data from SIUSOM's Student Information System.

- Category 1: Students - Rural/Small Town Students.
  - Rural: student's hometown is not in a US Census Urban Area or a US Census Urban Cluster with a population greater than 10,000 (Source: US Census 2010).
  - Small Town: student's hometown is 25,000 or less in population. (Source: US Census 2010).
- Category 2: Students - Economically/Educationally Disadvantaged Students.
  - Economically/Educationally Disadvantaged: student self-describes her/himself as disadvantaged (Disadvantage = "Y" on AMCAS record) or household annual income is below 150%-200% of the Federal Poverty Level (\$50,000 per year for a typical five-person household, 2013<sup>16</sup>).
- Category 3: Students - Traditionally Underrepresented in Medicine Students.
  - Individuals from TURM backgrounds.

Faculty/Staff - Sources: Applicant data from SIUSOM's Hire Touch system (December 2012 and after) and SIUSOM Applications System (prior to December 2012); Employee data from SIU Administrative Information Systems/Human Resources Management System.

- Category 4: Faculty - Traditionally Underrepresented in Medicine Faculty and Females.
  - Individuals from TURM backgrounds and Females.
- Category 5: Staff - Diverse Staff.
  - Individuals from diverse, minority (non-white) ethnicity and racial backgrounds (i.e., TURM plus Asian).

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<sup>16</sup> Families USA – The Voice for Health Care Consumers, *2013 Federal Poverty Guidelines* (2013), <http://www.familiesusa.org/resources/tools-for-advocates/guides/federal-poverty-guidelines.html> , August, 7, 2013.

## Appendix 3

### SIU School of Medicine Diversity and Inclusion

#### Diversity and Inclusion Activities by LCME Standard IS-16 Reporting Category

SIU School of Medicine performs numerous activities which advance diversity at the medical school. These may be categorized within the groupings outlined by the LCME in their reporting requirements for the IS-16 diversity standard.<sup>17</sup> These include:

Student Recruitment, Selection, and Retention. Strategies in this grouping include the application of selection criteria preferences for students from rural areas/small towns, economically/educationally disadvantaged or traditionally underrepresented in medicine backgrounds; recruitment visits to universities and colleges with high numbers of undergraduate students in these categories; pipeline programs such as the Medical/Dental Education Preparatory Program (MEDPREP); intensive academic advising and remediation activities available to all enrolled medical students; and the leadership of the School's Student Affairs and Diversity offices in efforts to recruit and retain a diverse student body.

Financial Aid. Scholarships are available to students in the student categories (as well as any students from any background) and students in these groups also receive financial advisement services throughout their years in medical school. (Scholarships funded by the University may not be limited to students in the diversity categories noted here; instead, they will be available to all students meeting the scholarships' qualification criteria.)

Educational Program. Educational programs are designed to improve understanding of diversity issues. For medical students, this includes extensive content in the curriculum designed to address health topics associated with diverse cultures/belief systems, cultural biases, and health disparities among population groups. Educational programs for faculty and staff address the importance of diversity to health care organizations and patient care.

Faculty/Staff Recruitment, Employment, and Retention. The medical school's faculty recruitment plan provides suggestions for encouraging recruitment of faculty members from traditionally underrepresented in medicine backgrounds. A similar plan will be developed to aid recruitment of staff from diverse minority backgrounds. Also included in this category are tuition waivers to staff.

Faculty and Staff Development. Mentoring activities for faculty and staff members from the faculty and staff categories are informal but will be formalized and expanded.

Liaison Activities with Community Organizations. Medical students, faculty, and staff are active in community programs, many of which deal with health and social issues within rural, small town, and minority communities. Examples include the "adopt-a-school"

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<sup>17</sup> Liaison Committee on Medical Education, *LCME/CACMS Medical Education Database 2014-2015* (2013), Institutional Setting Standard IS-16.

partnership with Enos School, a Springfield public school with a sizeable economic/ educationally disadvantaged student body; the homeless clinic organized by the medical students; and the Physician Pipeline Preparatory Program (P<sup>4</sup>), an educational pipeline program for Springfield high school students interested in medical careers, many of whom are from minority backgrounds.

Approved by the SIU School of Medicine Executive Committee on September 9, 2013.