



A Workforce Reflecting the Diversity of the Community: The Role of Leaders in Advancing the Vision

2021 CHI & EXPO - Orlando, FL

August 23, 2021

THE NACHC MISSION

America's Voice for Community Health Care

The National Association of Community Health Centers (NACHC) was founded in 1971 to promote efficient, high quality, comprehensive health care that is accessible, culturally and linguistically competent, community directed, and patient centered for all.





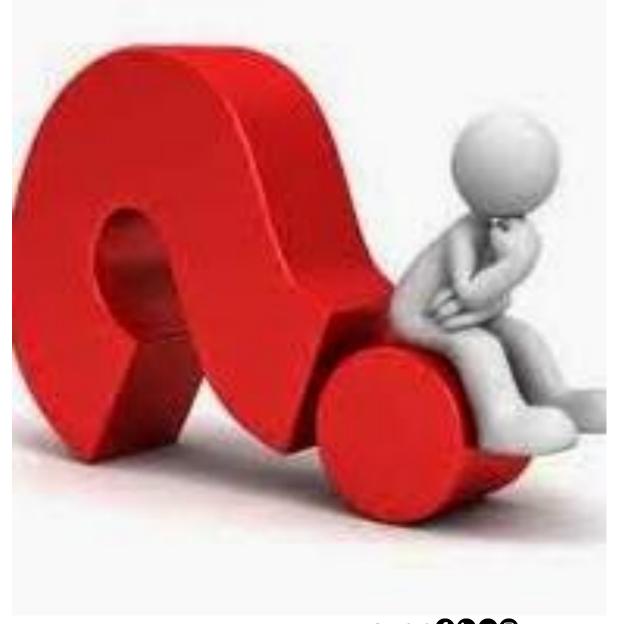
Why are we here today?

'The events of the past 18 months have altered our shared perceptions of our mission and priorities. The NACHC staff and the board of directors . . . began a bottom-up and regional planning effort to guide the movement into the next 5 years.

Principal changes that you will see in the new statements include:

 A heightened commitment to social justice and racial equity in health care and health'

--May 25, 2021 Memo from Lathran Woodard & Tom Van Coverden







NACHC Strategic Pillar 3

Develop a highly skilled, adaptive, and mission-driven workforce that reflects communities served.

Developing a diverse, high-performing, and committed workforce will require effective recruitment and retention strategies to recognize, attract, and cultivate the staff and boards that will lead and serve the CHC movement and NACHC into the future. NACHC and its members will work to ensure competitive compensation and benefits; deliver relevant and future-facing training; create a pipeline of candidates through programs, residencies, and teaching health centers; identify career pathways for employees at all levels; create succession planning and training to enhance organizational stability and heightened performance; and assure equity and diversity.



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Objectives

- Gain knowledge of NACHC's Strategic Pillar #3.
- Understand definitions of a workforce that is representative of the community(ies) served by health centers.
- Identify an approach for benchmarking current workforce representation and ensuring leadership accountability for success.

AGENDA

Local, State, and National Approaches to Achieving the Vision of a Diverse Workforce



Tool for Tracking Diversity in the Workforce



Questions & Answers



Poll Question

How would you rate your organization's overall effectiveness reflecting the community's diversity in your workforce?

- a. We have received awards/recognition for our work in this area.
- b. Our self assessments give evidence that we are making good progress.
- c. We are just beginning to act with intention in this area.
- d. We are 'diversity-curious' when it comes to our workforce.



Live Content Slide

When playing as a slideshow, this slide will display live content

Poll: How would you rate your organization's overall effectiveness reflecting the community's diversity in your workforce?

Poll Question

How would you rate your organization's overall effectiveness reflecting the community's diversity among senior leaders?

- a. We have received awards/recognition for our work in this area.
- b. Our self assessments give evidence that we are making good progress.
- c. We are just beginning to act with intention in this area.
- d. We are 'diversity-curious' when it comes to our leadership.



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Poll: How would you rate your organization's overall effectiveness reflecting the community's diversity among senior leaders?



Our Featured Speakers



Nancy Johnson, RN, MSN, MS, PhD
Chief Executive Officer
El Rio Health (AZ)



Karoline Oliveira, EdD
Chief of Diversity, Equity and Inclusion
Community Health Center, Inc. (CT)

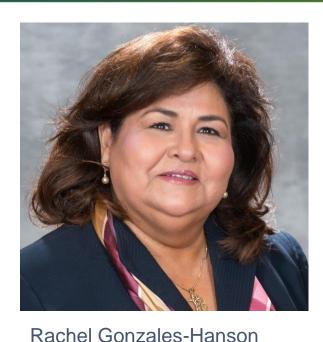
WWW.NACHC.ORG TWITTER: @NACHC



Our Featured Speakers



Michael Curry, Esq
President & CEO
Massachusetts League of
Community Health Centers



Senior Vice President for Western Operations

National Association of Community Health Centers



Toyese Oyeyemi, MPH, MBA
Executive Director, Beyond
Flexner Alliance/Sr. Atlantic
Fellow for Health Equity,
Fitzhugh Mullan Institute for
Health Workforce Equity

The George Washington University

WWW.NACHC.ORG TWITTER: @NACHC





Nancy Johnson, RN, MSN, MS, PhD, Chief Executive Officer El Rio Health (AZ)

Nancy Johnson is the CEO for El Rio Health, one of the largest FQHCs in the country. She is a registered nurse with a BSN from Illinois Wesleyan University. Dr Johnson also holds masters' degrees in nursing, from the University of Illinois, and marketing and business from the University of Arizona Eller College. Her doctoral research, for which she was awarded a PhD in Health Care Administration, was on provider perspectives in caring for the uninsured population.

Nancy spent over 15 years with the Tucson Medical Center Healthcare System, building community health and wellness programs, acquiring and managing medical practices for the TMC system, and expanding community networks. Dr. Johnson coauthored a textbook with her husband entitled "The Care of the Uninsured in America". She also serves as an adjunct clinical professor for the University of Arizona College of Medicine.





Karoline Oliveira, EdD Chief of Diversity, Equity, and Inclusion Community Health Center, Inc. (CT)

Dr. Karoline Oliveira serves as the Chief Diversity, Equity and Inclusion Officer and CDO at Community Health Center, Inc. (CHC). She brings nearly 20 years of experience working with/for people from underserved and marginalized groups. In her role at CHC, Inc., Dr. Oliveira works across the organization to support, align and advance CHC's culture with its DEI vision and strategic goals.

Prior to coming to CHC, Dr. Oliveira worked in higher education, most recently, as the founding executive director of the Office of Diversity, Equity and Inclusion and CDO at Life University in Marietta GA.

Her research interests and work focus on internal organizational culture and climate and creating a sense of belonging for marginalized persons. She is particularly committed to research which examines the lived experiences of those from underrepresented and marginalized populations within educational and medical environments.

Her pronouns are she, her and hers.





Michael Curry President and Chief Executive Officer Massachusetts League of Community Health Centers

Michael Curry, Esq. is President & CEO of the Massachusetts League of Community Health Centers, which represents 52 health centers, serving over 1 million patients. He previously served as Deputy CEO & General Counsel. Prior to the League, Michael worked for Blue Cross and Blue Shield of Massachusetts, including in the role of Senior Policy Advisor in the Corporate Affairs Division, which included government, public, internal and community affairs.

Mr. Curry is the past president of the Boston NAACP (2011-2016) and currently serves on the National NAACP's Board of Directors and chairs the board's Advocacy & Policy Committee. He serves on the City of Boston's COVID-19 Health Inequities Task Force (HITF), the Governor Baker COVID-19 Vaccine Working Group, and Co-Chairs the Massachusetts Legislature's Health Equity Task Force (HETF). He was recently recruited to join the national Bipartisan Policy Center's "Public Health Forward: Modernizing the U.S. Public Health System" coalition.



Massachusetts League of Community Health Centers

Where We've Been, Where We Are, Where We're Going ...

Michael Curry, Esq.

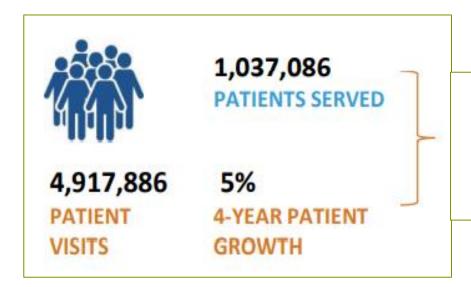
President & CEO



Where We've Been...

Mirroring the Population We Serve

Caring for Vulnerable Populations



74% of patients identify as an ETHNIC OR RACIAL MINORITY

- 52 FQHC and hospitallicensed health center members
- Over 1,000,000 patients served
- Countless languages and cultures celebrated
- Identified need: Our workforce must better reflect the populations we serve

Diversifying the Workforce: Student Loan Repayment Programming





- > 173 Awardees
- > 57 Linguistically Diverse Providers
- > 26 Different Languages
- > 33% of Awardees

American Sign Language	14.	Khmer
Arabic	15.	Lithuanian
Armenian	16.	Mandarin Chinese
Bengali	17.	Polish
Bosnian	18.	Portuguese
Cape Verdean Creole	19.	Romanian
Catalan	20.	Russian
Croatian	21.	Serbian
Dutch	22.	Spanish
French	23.	Swahili
German	24.	Swedish
Haitian Creole	25.	Swiss-German
	Arabic Armenian Bengali Bosnian Cape Verdean Creole Catalan Croatian Dutch French German	Arabic 15. Armenian 16. Bengali 17. Bosnian 18. Cape Verdean Creole 19. Catalan 20. Croatian 21. Dutch 22. French 23. German 24.



26. Ukrainian

13. Italian



Where We Are...

Focus on Equitable Care Through Programming

Equitable Care Collaborative







Program

- > 8 Interns
- > \$15,000 Stipend
- **→** 6 Learning Communities

Languages

Braille

Gujarati

Hmong

Japanese

Mandarin

Spanish

Race/Ethnicities

Asian/Hispanic

Asian/Taiwanese

Hmong

LatinX

South Asian

White



Investments in the Health Center Workforce

Listening to, Comprehending, and Acting on "I Can't Breathe" through Liberation Medicine in Tele-Health Exam Room

 Use of Liberation Medicine techniques to act on the trauma patients experience as a result of systemic racism.

Adopting the Culturally and Linguistically Appropriate Services Framework

Supporting recruitment and retention of a diverse workforce.





Investing in a Diverse Workforce



- **➤ Suffolk University Partnership**
- **➤** Community Health Worker Programming
- **➢ Building COVID-19 Vaccine Confidence**

www.nachc.org

➤ Workforce Investments



Increased Marketing of Opportunities

- Amplify LatinX
- Asian Women for Health
- Greater Boston Association of Black Social Workers
- NAACP Massachusetts Chapter



Where We're Going...

The work doesn't stop here.

Diversity, Inclusion & Belonging



Life Ties to Racism

Black History Month

What Discrimination Looks Like

The Story of Black Hair

Racial Disparities in the Medical System

Historical Literacy Training & Allyship



- Equitable Care Collaborative: <u>Behavioral</u>
 <u>Health Internship Pipeline Program</u>
- Equitable Care Collaborative: <u>Behavioral</u>
 <u>Health Capacity Building Using Data to</u>
 <u>Advance Health Equity</u>
- Data Collection







Rachel Gonzales-Hanson Sr. Vice President for Western Operations National Association of Community Health Centers

Rachel joined the staff of the National Association of Community Health Centers (NACHC) in January 2020 as the Senior Vice-President for Western Operations. Prior to joining NACHC, she served as CEO of Community Health Development, Inc. (CHDI). Rachel's involvement with CHDI began while serving as one of its founding board members in 1983. In 1984, she accepted the position of Executive Secretary and in 1986, was appointed CEO.

In addition to overseeing CHDI's operations and significant growth, Rachel focused on improving access to affordable, quality health care for people from all walks of life, including those from rural areas, agricultural workers and veterans. Rachel has served as a board member for the Texas Association of Community Health Centers and was elected as Chair of the Board of Directors at NACHC, with the distinct honor of being the first Hispanic female to serve in that position.





Toyese Oyeyemi, MPH, MBA, MCHES Executive Director, Beyond Flexner Alliance/Sr. Atlantic Fellow for Health Equity-Fitzhugh Mullan Institute for Health Workforce Equity The George Washington University

Toyese Oyeyemi (he/him) is Executive Director of the Beyond Flexner Alliance based at the George Washington University. His research, teaching, and practice have focused on equitable health workforce development, social and structural determinants of health, and community-driven interventions and research. Mr. Oyeyemi is a Master Certified Health Education Specialist (MCHES), certified project management associate, and maintains a faculty lecture title and teaching responsibilities in population health at the University of New Mexico.

He studied community health (BA) at New Mexico State University, public health (MPH) at the University of New Mexico, and business management (MBA) at the University of Arizona. He is also a Senior Fellow for Health Equity at the Atlantic Institute and co-director of the Health Workforce Diversity Initiative at the Fitzhugh Mullan Institute for Health Workforce Equity. His experience in community health program development and evaluation underscore his interest in equitable distribution of social resources.





Tracking Diversity in the Health Workforce

Toyese Oyeyemi, Executive Director

Beyond Flexner Alliance | GW Mullan Institute for Health Workforce Equity



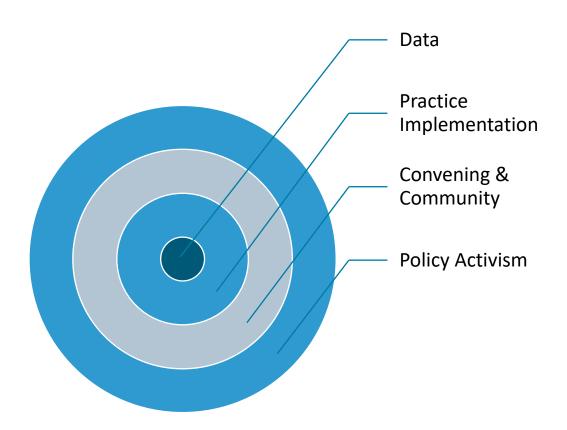
What is Social Mission?

the contribution of health profession schools in its mission, programs, and the performance of its graduates, faculty and leadership in advancing health equity and addressing the health disparities of the society in which it exists.





Core Functions









The Mullan Institute Health Workforce Diversity Tracker

- The GW Mullan Institute is committed to encouraging a more equitable health care system through health workforce policies and programs supported by research and data
- The Health Workforce Diversity Tracker will publish regular reports presenting data on diversity of the existing workforce and the educational pipeline
- The goal is to promote accountability and transparency by professions, states and institutions
- Initial support has been provided by The California Endowment and the Josiah Macy Jr. Foundation



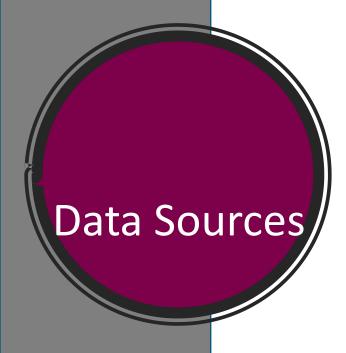




Health Workforce Diversity Tracker

- (1) the collection and analysis of data on the diversity of the health workforce with a focus on the educational pipeline;
- (2) dissemination of the data and findings, including "report cards" for states, professions, and institutions, publications, and interactive website;
- (3) support for research on the impact of interventions/strategies to increase diversity;
- (4) advocacy through targeted distribution of the findings and convening of organizations and groups supportive of the goal of more racial and ethnic parity in the health workforce.





Integrated Postsecondary Education System (IPEDS)

- Degree completions 2010-2012
- Degree completions 2017-2019

American Community Survey

- Diversity of graduate-age (20-35) population
- ACS 5-year file for 2015-19
- ACS 5-year file for 2008-12



The key metric measuring extent of diversity of graduates compared to the diversity of the population where students and graduates are likely to come from

<u>Diversity of graduates</u> Diversity of college-age pop where students from

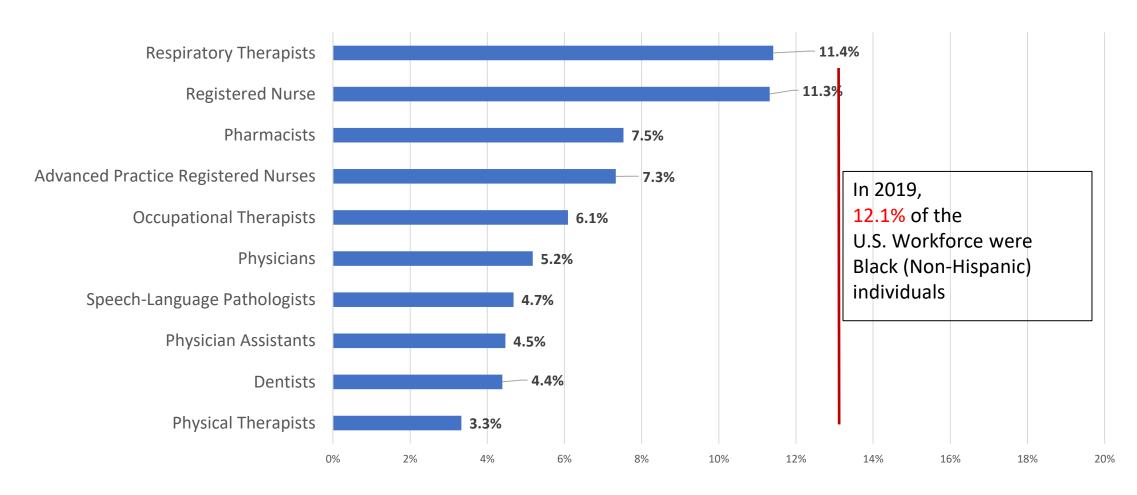
Location makes a difference; of 20 to 35 year olds:

- California: 43.5% Hispanic individuals
- West Virginia: 2.1% Hispanic individuals





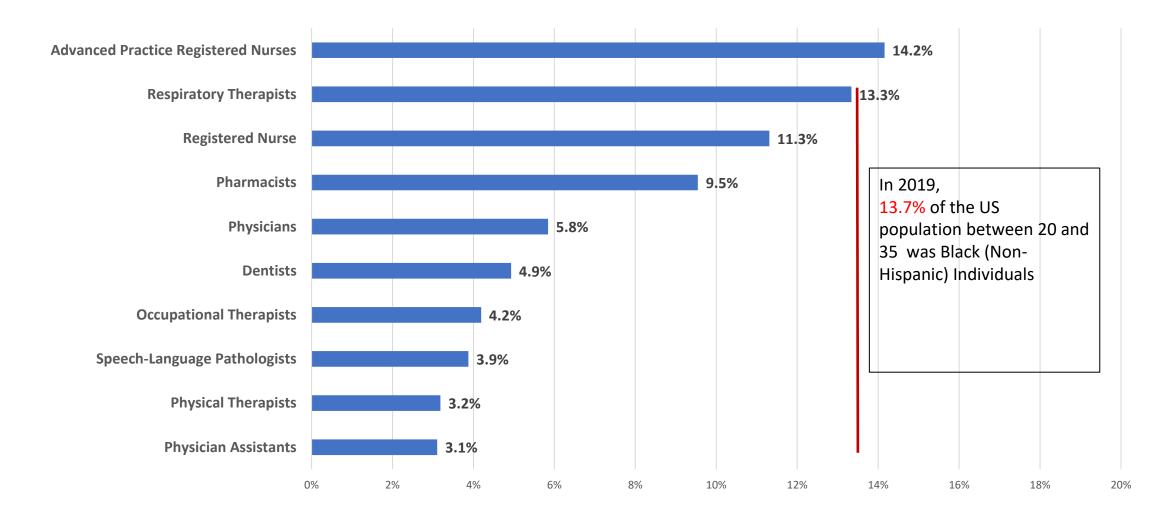
Percent Black Persons in the Health Workforce by Profession







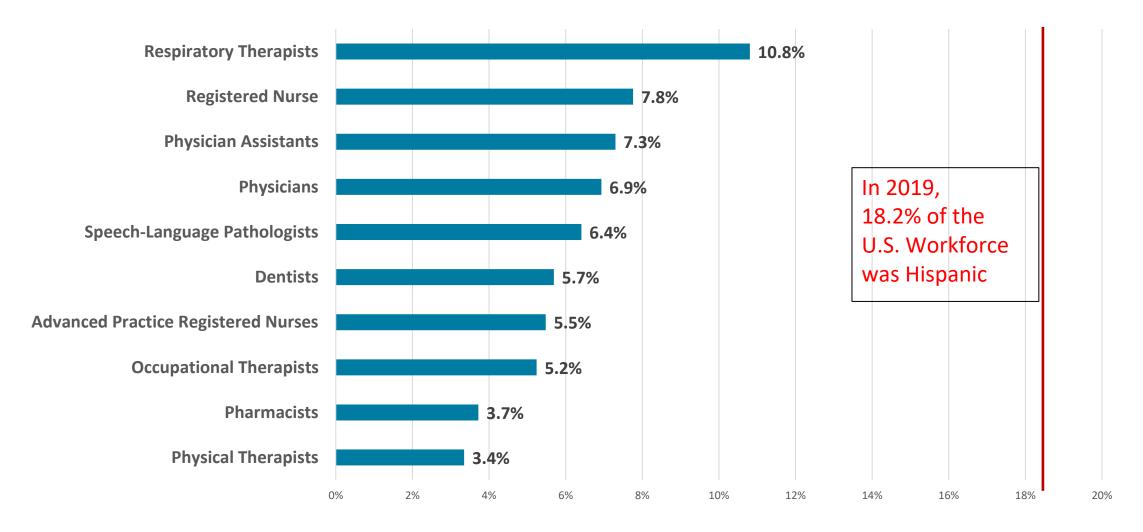
Percent of Graduates (the Pipeline) That Were Black Persons, 2019







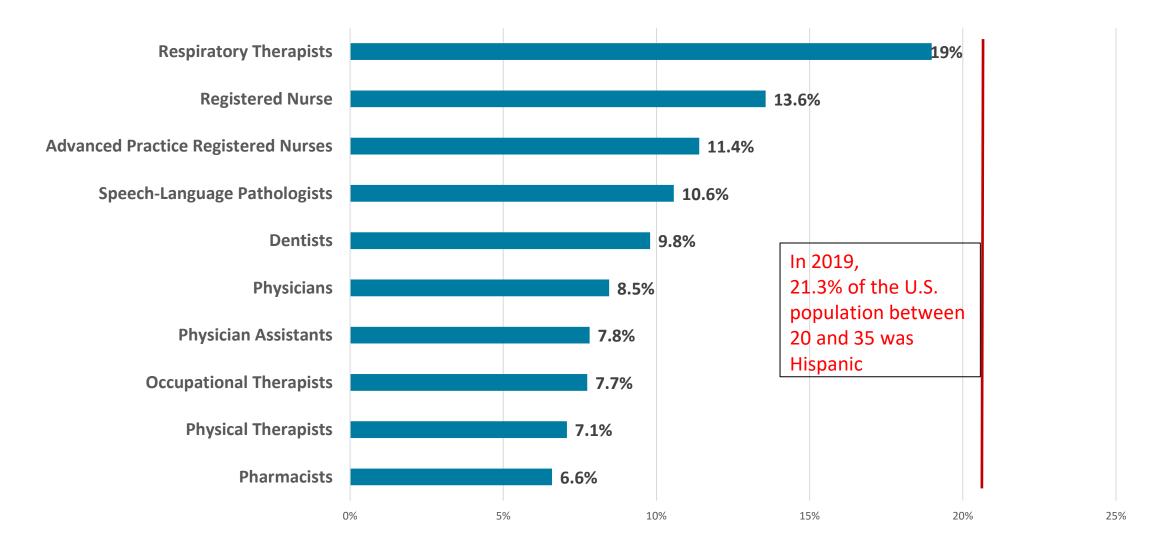
Percent Hispanic Persons in the Health Workforce by Profession







Percent of **Graduates** that were Hispanic by profession, 2019







Comparison of Workforce and Pipeline Diversity Index 2019

	Black/African American			Hispanic/Latinx		
	Workforce	Pipeline	Change	Workforce	Pipeline	Change
APRNs	0.61	1.03	0.42	0.30	0.53	0.23
Dentists	0.36	0.36	0.00	0.31	0.46	0.15
Pharmacists	0.62	0.70	0.07	0.20	0.31	0.10
Physicians	0.43	0.43	0.00	0.38	0.40	0.02
PAs	0.37	0.23	-0.14	0.40	0.37	-0.03
OTs	0.50	0.31	-0.20	0.29	0.36	0.07
PTs	0.28	0.23	-0.04	0.18	0.33	0.15
RTs	0.94	0.97	0.03	0.60	0.89	0.30
SLPs	0.39	0.28	-0.11	0.35	0.50	0.14
RNs	0.94	0.82	-0.11	0.43	0.64	0.21

Note: APRN = Advanced Practice Registered Nurse; PA = Physician Assistant, OT = Occupational Therapist; PT = Physical Therapist; RT = Respiratory Therapist; SLP = Speech-Language Pathologist; RN = Registered Nurse.

For each occupation, the HWDI for the *workforce* is the percentage of practitioners in a given racial/ethnic group (using 2019 ACS data) divided by that group's representation in the general workforce aged 20 to 65 (e.g., % Black APRNs / % Black in the general workforce).

For each occupation category, the HWDI for the *pipeline* is the percentage of recent graduates in a given racial/ethnic group (using 2019 IPEDs data) divided by that group's representation in the general population aged 20 to 35 (e.g., % Asian PA graduates / % Asian in the population aged 20 to 35). The *change* indicates the respective increase or decrease in the HWDI for the pipeline (relative to the workforce) for each occupation.



Implications & Opportunities

- Pipeline is improving, but still lagging behind projected demographic trends.
- The needs of the workforce influence how academic institutions invest in diversity efforts.
- Two major challenges are the lack of data on the diversity of the staff, including at the occupational level, and a lack of adequate funding for this work.



https://www.gwhwi.org/diversitytracker.html

Research Team:

Edward Salsberg, MPA, FAAN Maria Portela, MD Toyese Oyeyemi, MPH, MCHES Erin Brantley, PhD Sara Westergaard, MD, MPH
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The Mullan Institute Health Workforce Diversity Tracker

THE GEORGE WASHINGTON UNIVERSITY WASHINGTON, DC

https://www.gwhwi.org/diversitytracker.html





Thank you

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This session is also supported by a grant from Johnson and Johnson Foundation.



ATTENTION HEALTH CENTER STAFF!!

National Training and Technical Assistance
Needs Assessment
Available through October 1, 2021!
Make your voice and needs known!

Point of Contact: KaRon Campbell, kcampbell@nachc.org

https://bit.ly/health-center-needs-assessment

The National Training and Technical Assistance Needs Assessment was designed in collaboration with HRSA funded National Training and Technical Assistance Partners (NTTAPs).







COVID-19 Resources Found at nachc.org/coronavirus/



Centers for Disease Control Coronavirus (COVID-19) resources page – includes strategies for optimizing the <u>supply of PPE</u>



Health Resources and Services Administration (HRSA) Health Center Program COVID-19 Frequently Asked Questions (FAQ) – includes Federal Torts Claim Act (FTCA) updates



Centers for Medicare and Medicaid Services (CMS) FAQs – includes information on diagnostic lab services and hospital services



NACHC's Coronavirus webpage – information, event postings, and resources for health centers; NACHC also manages the resources below



NACHC's Elevate learning forum – evidence-based practices, tools and protocols for the health center response to COVID-19

Health centers sign up @ bit.ly/2020ElevateCHC

PCAs, HCCNs, and NCAs sign up @ bit.ly/2020ElevatePCA-HCCN-NCA



Health Center Resource Clearinghouse Priority Page COVID-19 –training events and tailored materials for serving special populations <u>healthcenterinfo.org</u>



Consolidates information from many sources in an easily-searchable format; enables health centers, PCAs, and HCCNs to share info and questions

To join, contact Susan Hansen at shansen@nachc.org.

TWITTER: @NACHC

ARE YOU LOOKING FOR RESOURCES?

Please visit our website www.healthcenterinfo.org





Have more questions, effective actions or challenges to share?

Email us at

<u>Trainings@NACHC.org</u>

We want to hear from you!

WWW.NACHC.ORG TWITTER: @NACHC