The Center for Advancing Racial Equity

Implementing the Change Agenda

2023

Atrium Health
Wake Forest Baptist

Wake Forest University
School of Medicine
ABOUT THE CENTER FOR ADVANCING RACIAL EQUITY (CARE)

Mission
CARE provides leadership to ensure the institution remains committed to the implementation of the Change Agenda for Racial Equity.

This leadership includes convening and facilitating organizational change work that advances racial equity throughout Atrium Health Wake Forest Baptist and the Wake Forest University School of Medicine (both campuses) in collaboration with other units.

CARE Functions
- Accountability
- Assessment
- Programming
- Convening
- Messaging
- Center Administration

Vision
CARE envisions an institution where we strive for racial equity as an everyday reality reflected in our policies, practices and lived experiences.

Together, we can build an institution where everyone feels valued and respected and has the opportunity to thrive.

Leadership Award
Annually CARE, in partnership with the Office of Justice, Equity, Diversity and Inclusion (JEDI) and the Office of Diversity, Equity and Inclusion (ODEI) will present the Leadership Award to highlight visionary leadership, dedication, and commitment to leading change and advancing racial equity.

The 2023 Leadership Award was presented to Dr. David McIntosh, former AHWFB Chief Diversity Officer (2018-2021).
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Dear Colleagues,

It is with a touch of awe that we present the Center for Advancing Racial Equity’s (CARE) first annual report on institutional progress on the Change Agenda for Racial Equity.

This past year has been about listening, learning, and understanding. We have diligently engaged with academic departments, gathering data, facilitating conversations, acting as your voice when needed and identifying areas where collectively we can bring about measurable change.

Witnessing the active participation and deep commitment of teammates across every academic department in advancing racial equity has been both humbling and inspiring. We thank every single one of you who has partnered with us in this critical work – your insights, perspectives, and collaborative spirit are the foundation of our shared accomplishments.

The achievements departments have made are remarkable considering the departments had to allocate investments from their existing budgets. As a result, many recommendations in the Change Agenda were written to emphasize the need for additional funding.

This report lays out a vision of Atrium Health Wake Forest Baptist (AHWFB) where we strive for racial equity as an everyday reality reflected in our policies, practices and lived experiences.

Unlike other institutional centers, CARE functions not through memberships or affiliations, but through the collective effort of every individual within Wake Forest University School of Medicine (WFUSM) and Atrium Health Wake Forest Baptist (AHWFB). This is a conscious choice, reflecting our belief that racial equity is not the responsibility of a few, but a shared pursuit for all. Every interaction, every decision, every policy contributes to our institutional culture.

We acknowledge the trust placed in us by CEO/CAO Dr. Julie Freischlag, Dean Dr. Ebony Boulware, and Dr. Goldie Byrd, Director of the Maya Angelou Center for Health Equity. We are grateful that they entrusted us to work across organizational structures and serve as change managers on their behalf.

Together, we can build an institution where everyone feels valued and respected and has the opportunity to thrive.

With thanks and optimism,
CARE Co-Directors
Dr. Amy McMichael and Dr. Sabina Gesell

CARE Associate Director for Strategy
Dr. Doug Easterling

CARE Research Associate
Laura McDuffee
In December 2022, Atrium Health Wake Forest Baptist’s CEO/CAO and Dean of the School of Medicine, Dr. Julie Ann Freischlag, released the Change Agenda for Racial Equity as “a roadmap for us to grow as an anti-racist organization and advance equity across all races and ethnicities.” (Change Agenda). The Change Agenda was the final product of the Racial Equity Task Force, which Dr. Freischlag convened in July 2020 and co-led with Dr. Goldie Byrd, Director of the Maya Angelou Center for Health Equity.

Based on an in-depth analysis of institutional data and the creative input from administrators, faculty, staff, students and community representatives, the Change Agenda specified 25 ambitious strategies across 6 domains:

| **Culture** | Building trust, creating a culture of accountability, creating transparency for advancement and leadership opportunities |
| **People** | Data collection, hiring practices, advancement and leadership opportunities, equity in compensation |
| **Patient Care** | Data collection and analysis, address social determinants of health (SDOH), patient-provider interactions, diversity of care teams |
| **Education** | Anti-racist and culturally appropriate curriculum, diversity, equity and inclusion (DEI) focused educator development, increase outreach to Black, Indigenous, people of color (BIPOC) learners and educators |
| **Research** | DEI plan for research, diversity in participants and researchers, health-equity focused research |
| **Community** | Partnerships, support SDOH work, pipeline strategy with community, acknowledge history of Atrium Health Wake Forest Baptist, address mental health and substance use, support anti-poverty and anti-racism efforts, expand equity focus across campuses |

Dr. Freischlag encouraged institution-wide action to implement these strategies. To support implementation, she also established the Center for Advancing Racial Equity (CARE). Additional support has come from the Office of Diversity Equity and Inclusion (ODEI), as well as the Office of Justice, Equity, Diversity and Inclusion (JEDI) which are leading change within Wake Forest University School of Medicine and Advocate Health’s academic enterprise.
This report provides a summary assessment of what was accomplished across the institution during the first year following the release of the Change Agenda. CARE produced this report to fulfill its responsibilities around Accountability and Assessment.
It is important to note that many of the activities reported by unit leaders are early-stage efforts like those below which lay the groundwork for planning and implementing more focused initiatives:

- Creating and/or expanding institution-wide units focused on DEI/JEDI
- Setting up department-level committees to focus specifically on DEI/JEDI
- Appointing and supporting departmental leaders for DEI work
- Strategic planning processes to determine which aspects of the Change Agenda to focus
- Surveys and other assessments to inform strategic planning and priority-setting
**NUMBER OF DEPARTMENTS REPORTING ACTIVITIES FOR EACH STRATEGY IN THE CHANGE AGENDA**

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Reporting Departments</th>
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<tbody>
<tr>
<td>CULTURE 1 Build trust &amp; capacity*</td>
<td>30</td>
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<td>CULTURE 2 Advancement and leadership opportunities PEOPLE 3*</td>
<td>25</td>
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<td>CULTURE 3 Create a culture of accountability</td>
<td>20</td>
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<td>PEOPLE 1 Data Collection*</td>
<td>15</td>
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<tr>
<td>PEOPLE 2 Hiring practices*</td>
<td>12</td>
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<tr>
<td>PEOPLE 2 Retention practices</td>
<td>10</td>
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<tr>
<td>PEOPLE 4 Mentoring*</td>
<td>8</td>
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<tr>
<td>PEOPLE 4 Equity in compensation</td>
<td>6</td>
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<tr>
<td>PATIENT 1 Data collection and analysis*</td>
<td>4</td>
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<tr>
<td>PATIENT 2 Address SDOH</td>
<td>3</td>
</tr>
<tr>
<td>PATIENT 3 Patient-provider interactions</td>
<td>2</td>
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<tr>
<td>PATIENT 4 Diversity of care teams</td>
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</tr>
<tr>
<td>EDUCATION 1 Anti-racist &amp; culturally appropriate curriculum</td>
<td>30</td>
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<tr>
<td>EDUCATION 2 DEI focused educator development</td>
<td>25</td>
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<td>EDUCATION 2 Pathways COMMUNITY 3*</td>
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<td>EDUCATION 3 Increase BIPOC learners &amp; educators</td>
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<tr>
<td>RESEARCH 1 DEI plan for research</td>
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<tr>
<td>RESEARCH 2 Diversity in participants</td>
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<tr>
<td>COMMUNITY 1 Community partnerships*</td>
<td>30</td>
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<td>COMMUNITY 2 Support SDOH work in community</td>
<td>25</td>
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<tr>
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<tr>
<td>COMMUNITY 5 Address mental health &amp; substance use</td>
<td>15</td>
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<tr>
<td>COMMUNITY 6 Support anti-poverty &amp; anti-racism efforts</td>
<td>10</td>
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<tr>
<td>COMMUNITY 7 Expand equity focus across campuses</td>
<td>5</td>
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</tbody>
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*indicates a prioritized area

Note: Units working together are counted individually
CULTURE

Work units in this domain by Change Agenda recommendations

*Cultural of accountability* *Advancement and leadership opportunities*
Build trust and capacity

*Activity from both Culture & People domains

Highlights of activities by Change Agenda recommendations are below

**CULTURE1 - Build trust and capacity**

**Radiology**
The Department worked to ensure that there was minority representation among their vendors.

**Orthopaedic Surgery**
Designed a comprehensive, departmental Diversity & Inclusion strategic plan.
CULTURE 2 - Advancement and leadership opportunities (Prioritized area)

**Anesthesiology**
Support Women and URM faculty and faculty working as allies of these communities to attend professional development programs like AAMC Healthcare Diversity and Inclusion Certificate Program, AAMC Minority Faculty Career Development, and AAMC Leadership Development Seminars.

CULTURE 3 - Create a culture of accountability

**Pediatrics**
Created a REDCap “professionalism reporting tool” with a QR code for residents to scan and report any professionalism concerns, including instances of bias, discrimination, racism or microaggressions.
PEOPLE

Work units in this domain by Change Agenda recommendations

![Bar chart](chart.png)

Highlights of activities by Change Agenda recommendations are below

**PEOPLE 1 - Data collection**  
*Prioritized area*

**Pediatrics**

Demographics of faculty, staff, and trainees were extracted to understand the current state of diversity within the department and to track recruitment, hiring and retention efforts.

**PEOPLE 2 - Retention practices**

**Plastic and Reconstructive Surgery**

The Department sponsors two travel scholarships for URiM, women, and allies working in those communities for students wanting to do an away rotation during the fourth year of medical school.
PEOPLE 2 - Hiring practices (Prioritized area)

Internal Medicine
The DEI Vice Chair reviewed each job description to be posted from Internal Medicine to help screen for inclusive, open language.

PEOPLE 4 - Equity in compensation

Anesthesiology
The department strives to provide equitable compensation for faculty at all levels. Base salary compensation is the same within each faculty rank. Variance in total compensation may be due to section head/vice chair stipends, additional voluntary call shift participation, and non-clinical bonus participation.

PEOPLE 4 - Mentoring (Prioritized area)

Wake Forest University School of Medicine & Office of Diversity, Equity and Inclusion
September 27, 2023, launched inaugural cohort of 15 African American/Black women mentees matched with women in manager and above roles in a 9-month structured mentoring program. WeXcel Together Mentoring Program is a mentoring program open to all.
PATIENT CARE & EXPERIENCE

Work units in this domain by Change Agenda recommendations

<table>
<thead>
<tr>
<th>Work Unit</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diversity of care teams</td>
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<tr>
<td>Data collection</td>
<td>5</td>
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<tr>
<td>Patient-provider interactions</td>
<td>10</td>
</tr>
<tr>
<td>Address SDOH</td>
<td>15</td>
</tr>
</tbody>
</table>

Highlights of activities by Change Agenda recommendations are below

PATIENT 1 - *Data collection & analysis (Prioritized area)*

**Atrium Health Wake Forest Baptist (Charlotte Campus)**

Patient experience data, examined through the lens of race/ethnicity and gender, for our inpatient services has been shared with departmental leadership. The goal for this work is to promote quality projects and internal initiatives to enhance the equity of experience of our patients.
PATIENT 2 - Address SDOH
Davie Medical Center
Develop Health-Equity Action plan and lead personnel to align with Atrium Health Wake Forest Baptist goal: Improve medication access.

PATIENT 3 - Patient-provider interactions
Orthopaedic Surgery, Atrium Health Musculoskeletal Institute
Developed and rolled out the Social Impact Best Practices Toolkit to leaders of committees, service lines and locations throughout the Institute.

PATIENT 4 - Diversity of care teams
Pediatrics (Winston-Salem Campus)
Downtown Health Plaza pediatric patient service representatives are bilingual (Spanish); two nurses are bilingual; behavioral health provider is bilingual; food care navigator, transportation navigator, charity care navigator, and general patient navigator are all bilingual; working on increasing bilingual nursing and staff.

Units reporting activities:
Atrium Health Wake Forest Baptist (Charlotte Campus) Anesthesiology Center for Advanced Practice Carolinas Medical Center Family Medicine Comprehensive Cancer Center Davie Medical Center Emergency Medicine FaithHealth JEDI Northwest Area Health Education Centers Orthopaedic Surgery Atrium Health Musculoskeletal Institute Patient & Family Relations Pediatrics Psychiatry Urology Wake Forest Claude Pepper Older Americans Independence Center and Alzheimer’s Disease Research Center
EDUCATION

Work units in this domain by Change Agenda recommendations

*Activity from both Education & Community domains

Highlights of activities by Change Agenda recommendations are below

EDUCATION 1 - Anti-racist & culturally appropriate curriculum

Office of Diversity, Equity and Inclusion

Atrium Heath White Alliance for Racial Equity (AHWARE) System Resource Group led the implementation of a pilot program of the Transforming White Privilege curriculum (TWP).

EDUCATION 2 - Pipeline & pathways (Prioritized area)

Center for Artificial Intelligence Research

To further the goal of outreach to underrepresented minorities in informatics roles, our faculty have recruited several underrepresented summer interns for our summer internship program since 2018. In 2022, five of six interns were women, and half were African American. The Center secured a National Library of Medicine (NLM) R25 R25LM014214 grant for the Culturally Augmented Learning In Biomedical Informatics Research (CALIBIR) Program. The goal of this National Library of Medicine’s (NLM) R25-funded program is to support educational activities that encourage talented undergraduate and Master’s students, including those from groups underrepresented in the biomedical and behavioral sciences, to pursue further training and careers in biomedical informatics and data science.
EDUCATION 2 - **DEI-focused educator development**

**Translational Neuroscience**
Conduct annual workshop on Mentorship for Postdocs (and Advanced Graduate Students). Training for postdoctoral fellows and research fellows who are training the summer program undergraduates and high school students.

EDUCATION 3 - **Increase Outreach to BIPOC learners and educators**

**Emergency Medicine**
In partnership with two other EM residency programs, the Wake Forest Baptist EM Residency program and the Carolinas EM Residency Program have developed and continued an outreach program with Howard University College of Medicine that provides a virtual didactic curriculum to EM-bound Howard students.
RESEARCH

Work units in this domain by Change Agenda recommendations

Highlights of activities by Change Agenda recommendations are below

RESEARCH 1 - DEI plan for research

Emergency Medicine

Social Impact Cross Functional Team has begun the Emergency Medicine Health Justice Initiative, with the following objective: Emergency Medicine aims to improve health justice for communities by developing sensitive analytic tools to detect disparities, collaborative partnerships to understand the observations, and actionable strategies to improve the experience and outcomes for patients served by the emergency department.

RESEARCH 2 - Diversity in participants

Comprehensive Cancer Center

Culturally and linguistically concordant cancer Population Health Navigation-African American, Hispanic, Rural and Uninsured patient navigators educate all patients on the role of research in cancer care and clinical trials.
RESEARCH 3 - Diversity in researchers
Orthopaedic Surgery, Atrium Health Musculoskeletal Institute
ODySSEY Program: Expose Title I middle school students to careers in orthopaedic surgery - with Wake Forest, funded by the American Academy of Orthopaedic Surgeons IDEA grant (Inspiring, Diversity, Equity and Access)
The grant focuses on: 1. Building up junior faculty from URIM backgrounds 2. Exposing trainees to diverse faculty and speakers 3. Exposing Title 1 schools students to medicine.

RESEARCH 4 - Health-equity focused research
Translational Neuroscience Department
North Carolina American Indian Adult Tobacco Projects: The Department of Social Sciences and Health Policy and the Atrium Health Wake Forest Comprehensive Cancer Center are working in an advisory capacity on these projects focused on examining perceptions of addiction and harm reduction, as well as use and prevalence of nicotine, tobacco products, and commercial tobacco within North and South Carolina tribal communities.
COMMUNITY

Work units in this domain by Change Agenda recommendations

Highlights of activities by Change Agenda recommendations are below

COMMUNITY 1 - Partnerships
Center for Addiction Research
Center for Addiction Research (CFAR) has finalized a Master Research Agreement with a nearby HBCU – NC A&T, to allow us to send pilot money to faculty there to conduct research that may lead to NIH grant applications.

Note: Community recommendation 3 is combined with the People recommendation on Pathways

COMMUNITY 4 - Acknowledge history
Atrium Health Wake Forest Baptist CEO Office, Office of Diversity, Equity and Inclusion, and Office of Justice, Equity, Diversity and Inclusion
Work has begun on a documentary acknowledging the role of race in the history of Atrium Health Wake Forest Baptist.

COMMUNITY 2 - Support SDOH work
Center for Advanced Practice
Started the FreshFood Rx and mobile health programs to address access to healthy food and medical care in underserved communities.
COMMUNITY 6 - Support anti-poverty & anti-racism efforts

AHWFB CEO Office and MACHE

Work has begun to establish Metropolitan Village, a mixed-use facility in East Winston-Salem providing affordable house, employments opportunities, community care, and AHWFB research participation experiences for community members.

CommunitY 5 - Address mental health & substance use

FaithHealth

CareNet Counseling provides spiritually integrated behavioral health counseling that addresses mental health, substance use, and many other life challenges and difficulties.

COMMUNITY 7 - Expand equity focus across campuses

Psychiatry

The department is in conversation with United Health Center about launching more comprehensive behavioral health service for their patients. UHC serves a high percentage of under and uninsured in our community most of which have little to no access to behavioral health services. Many of these patients have a co-morbid mental health condition that is not receiving treatment.
Interviews with the chairs and DEI leadership in clinical departments explored questions about the diversity of the department's faculty and residents, as well as challenges and strategies for increasing diversity and inclusion. Key findings are presented below.

**Level of Diversity**

- Departments vary considerably in the number of faculty who have a race or ethnicity under-represented in medicine (URiM).
  - URiM = Black, Hispanic/Latinx, Native American or Alaska Native or Pacific Islander.
  - The largest department (Internal Medicine) has more than 40 URiM faculty and physicians.
  - Other departments (Surgery, Community and Family Medicine, Anesthesiology) also have at least 7 URiM faculty.
  - Some smaller departments have no URiM faculty or just one or two.
- Overall at WFUSM, about 9% of faculty are URiM.
  - Most URiM faculty are Black or Hispanic.
  - The composition of URiM varies considerably across departments.
- Numbers of URiM faculty remained fairly constant across Wake Forest University School of Medicine for many years, with an increase beginning in 2023.
- Most chairs do not have access to up-to-date data on the demographics of faculty and staff, and thus don’t have a clear sense of the number of URiM faculty.

**Challenges in Recruiting and Retaining URiM Faculty**

- Small numbers of qualified URiM candidates apply for some faculty positions.
- Small numbers of URiM candidates have trained in some specialties/sub-specialties.
- Small departments hire faculty only occasionally and thus haven’t had a chance to consider qualified diverse candidates for positions.
- Winston-Salem is a small Southern city, which is not what some URiM candidates are looking for.
- Lack of critical mass of URiM faculty at Wake Forest University School of Medicine.
- Unable to offer an attractive position to the candidate's spouse/partner.
- Qualified URiM candidates have many opportunities and often end up at other competitive institutions.
Strategies for Recruiting More URiM Faculty

For specific recruitments
- Outreach with national associations and conferences where URiM candidates affiliate (e.g., National Medical Association, Society of Black Academic Surgeons).
- Social media presence emphasizing Wake Forest University School of Medicine's DEI commitment and work to date.
- Ensure that qualified URiM candidates are evaluated fully and fairly, relying on best practices for hiring.
- Ensure that URiM candidate's concerns and questions are fully addressed during visits (e.g., by offering realtors who are sensitive to racial issues and other issues relevant to diverse candidates).

Longer-term strategies
- Department chairs form personal connections to URiM associations, institutions and communities.
- Consider qualified URiM faculty for department chairs and vice chairs.
- Develop expertise and reputation in health-equity (research and/or clinical care).
- Consider qualified URiM faculty for Fellowships/Endowed Chairs.
- Recruit qualified URiM residents and retain as faculty members or bring back at a later time.

Additional Strategies for Recruiting URiM Residents
- Attend conferences of national, statewide and local associations that attract URiM medical students.
- Cultivate personal relationships with faculty at institutions that train large numbers of URiM students.
- Holistic review.
- High-touch experience for qualified URiM applicants during interviews (Second-Look opportunities, meet with URiM faculty, cluster qualified URiM applicants for shared experience).
- Personalized follow-up to qualified URiM applicants after reviewing applications.
- Scholarships targeted to URiM residents and fellows (e.g., Kennedy Hopkins) and those who advocate for these communities.
- Use institutional website and social media to highlight the diversity that does exist.
- Promotional materials and tours to demonstrate Winston-Salem as an attractive place to live.

Upstream Strategies for Encouraging More URiM Students to Choose a Specialty
- Direct and ongoing connections to Student National Medical Association chapter and other groups that attract URiM students.
- Specialty-specific special interest groups with DEI orientation.
- More explicit outreach to first and second year medical students to make them aware of the specialty (especially important for specialties not included in rotations).
- Mentoring programs with strong DEI orientation.
- Partnerships with HBCUs.
- Pipeline programs to expose URiM students (high schools and colleges) to less familiar specialties.
NEXT STEPS

01 Data Limitations - Patient Demographics
Attempts to stratify quality and performance metrics by demographic data has not been possible due to constraints in the available data.

2024 EPIC harmonization and training will improve patient demographic data collection for research and tailoring care.

In 2024, we need to plan for scalable infrastructure for data analysis to inform care:
- To detect disparities in quality of care metrics and human resources metrics
- To understand why disparities exist and how to intervene

02 Data Limitations - Employee Demographics
Attempts to stratify quality and performance metrics by demographic data has not been possible due to constraints in the available data.

2024 WorkDay will replace CoreConnect.

In 2024, CARE will work with Human Resources:
- To ensure readily available reports on departmental/unit-level demographics
- To understand why disparities exist and how to intervene

03 Data Collection - Departmental Activities
The process and authority for identifying and reporting on DEI-related activities has not been uniform.

In 2024, CARE will work with the Dean’s Office and JEDI:
- To more comprehensively capture unit level activities
- To encourage coordinated and strategic approaches

04 Hiring Practices
Our Clinical Chair interviews and Convening discussions indicate a need to use hiring best practices.

In 2024, CARE will work with HR/ODEI:
- To ensure awareness and increased use of the updated Faculty Hiring Guidelines and Inclusive Hiring Toolkit
“I believe that deep within our being is a longing for a moral compass. For those of us who are moved by the cries of our sisters and brothers, we know that, like justice, the acts of caring for the vulnerable, embracing the stranger, healing the sick, protecting workers, welcoming and being fair to all members of the human family, and educating all children should never be relegated to the margins of our social consciousness. These are not just policy issues; these are not just issues from some left versus right debate; these are the centerpieces of our deepest traditions of our faiths, of our values, of our sense of morality and righteousness.”

Rev. Dr. William J. Barber II
Forward together: A moral message for the nation
Acknowledgements

Amy McMichael, Co-Director
Sabina Gesell, Co-Director
Doug Easterling, Associate Director for Strategy
Laura McDuffee, Research Associate

We would like to express our appreciation for the ongoing support, guidance and contributions from Dr. Freischlag, Dean Boulware, Dr. Byrd, Dr. Latham-Sadler, and Dr. Opollo.

Thank you to all leaders, teammates and learners who provided information for this report and remain engaged in this work.

To be added to CARE’s listserv, email us: lmcduffe@wakehealth.edu

Visit our webpage to learn more

https://school.wakehealth.edu/research/institutes-and-centers/center-for-advancing-racial-equity