The Path Forward: **Report of the Task Force on Racial Justice** December 1, 2020 UNIVERSITY OF MIAMI MILLER SCHOOL of MEDICINE

Agenda

Welcome and Opening Remarks - Dr. Henri Ford

Summary of TFRJ Recommendations - Dr. Roderick King

> Hilarie Bass, Chair, UM Board of Trustees

> Dr. Julio Frenk, President, University of Miami

> Joseph Echevarria, Interim CEO, UHealth & Special Advisor to UM President

> Dr. Donald Spivey, Special Advisor to UM President on Racial Justice

Question and Answer

Purpose

The purpose of the Task Force on Racial Justice (TFRJ) is to **develop strategies and actions** to address issues of systemic racism within the University of Miami Miller School of Medicine in order to create **a sustainable culture of inclusion and diversity** that supports racial justice.

Task Force Infrastructure:

The Task Force on Racial Justice (TFRJ) is composed of seven subcommittees that are focused on the key areas of:

- > Admissions
- Student Affairs
- > Curriculum
- Residents/Fellows

- Faculty Affairs
- > Research
- > Community Engagement

Scope of Work & Timeline

- Task Force subcommittees initiated work in July 2020
- Subcommittees completed work by October 1, 2020
- A complete report with proposed strategies/actions was presented to the Dean on October 7, 2020
- Summary report created November 2020

Key Deliverables:

- Brief summary of root cause analysis for each of the problem areas for each subcommittee
- List of best practices that guide the work
- List of UMMSOM strategies and actions that align with each problem area for each subcommittee
- Timelines and suggestions on implementation of strategies and actions
- Cost estimates and financial plan required for implementation

Admissions Subcommittee Co-Chairs: Dr. K. Bosire & Dr. R. Weisman

Charge:

• To identify and eliminate racial bias in the admissions process. To develop a pipeline of qualified students underrepresented in medicine (URM), especially Blacks, who will not only be competitive for admission but will ultimately matriculate at UMMSOM.

Root Causes:

- Absence of an established pipeline to recruit, mentor, sponsor, and successfully matriculate URM students at UMMSOM
- Inadequate funding to offer competitive scholarships

Admissions Recommendations

Short term (1-2 years):

Establish stronger online presence of ODICE on the Admissions Website

Evaluate the Structure/Methodology of the Admission Process: Assuring diversity and inclusion

Intermediate term (3-5 years):

Improve institutional outreach - untapped talent

- Establish an articulation agreement with Historically Black Colleges and Universities (HBCU's) in Florida
- Establish a relationship with the NIH-funded Post-baccalaureate Research Education Program
- Establish a post baccalaureate program Masters in Med Science
- Increase local outreach by ODICE

Admissions Recommendations

Long term (> 5 years):

- Develop a program that provides the most substantial return on investment and embodies the UMMSOM commitment to URM students
- Establishment of the "Forever Miami" program
 - For select URM applicants who would like to train in medical school, residency, fellowship and spend at least the first 4 years of professional career at UM/Jackson

Student Affairs Subcommittee Co-Chairs: Dr. H. Mechaber & Dr. M. Gervais

Charge:

To ensure that our diverse students feel welcomed on the medical campus & the topic of racism is included in wellness programming.

Root Causes:

- Lack of understanding of school resources and support services
- Lack of mentorship for URMs
- The role and scope of support by ODICE and Student Services/Affairs not clearly identified or communicated

Student Affairs Recommendations - Well Being

Short term (1-2 years):

> Appoint an additional ombudsperson from an URM background

- Establish a committee to review medical campus financial aid opportunities for URM students and make recommendations for improving equity.
- Maintain telehealth options at the counseling center to ensure that students continue to have access to URM clinicians.

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Student Affairs Recommendations - Well Being

Intermediate term (3-5 years):

Restructure and increase support to expand the Academic Enrichment office

Create an office for Graduate Student Financial Aid on the medical campus or expand the current office with additional staff to support graduate students.

Work with current student leaders to establish liaisons between medical and graduate medical student organizations.

Conduct a survey of URM students on the medical campus in conjunction with other Task Force for Racial Justice subcommittees.

Short term (1-2 years):

- Create a formal mentoring program for URM students
- >Establish small group mentoring sessions since we have few URM faculty
- Schedule regular monthly meetings with URM students and faculty
- Improve individualized mentoring to include not only URM faculty mentors, but also allies who participate in faculty development to ensure culturally sensitive mentorship, free of bias

Short term (1-2 years):

- Organize monthly or quarterly meetings with URM students and faculty, in collaboration with ODICE, Diversity Council, Student Services, SNMA and other student groups
- Build a list of opportunities and career resources specifically designed for URM students.

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Medium term (3-5 years):

Develop a robust Allyship program

Build a more robust pool of URM alumni mentors

Task each department to partner with SNMA, ODICE and Student Affairs to specifically increase and designate URM specialty mentors

Recognize the legacy of URM physicians on campus by naming spaces in their honor

Expand CANEWATCH to enable anonymous reporting

Medium term (3-5 years) :

- Help identify allies in each department
- Consider revisions to the Physicianship Incident Report system to include reporting of unprofessional behavior due to racism, micro/macroaggressions.
- Protect students who, in good faith, report violations and microaggressions, from retaliation with the University Whistleblower Statement

Long term (> 5 years):

Establishing a pre-matriculation, summer preparatory program to expand current academic enhancement offerings for targeted students, including URM.

Curriculum Subcommittee

Co-Chairs: Dr. T. Monteith & Dr. B. Issenberg

Charge:

To identify and eliminate racial bias, and promote racial justice and equity in the curriculum, while educating our students to effectively serve diverse communities.

Root Causes:

- Institutional
- ➤ Structural
- Programmatic/Content
- ➢ Faculty

Curriculum Subcommittee

Root Causes:

Institutional

>Racial justice and equity have **not been proactive goals** for the UMMSOM

- Lack of assessment and mechanism designed to change institutional culture, leadership attitudes, and knowledge
- Lack of research/best practices in this area

Structural

- >Lack of **integration** of student curricular reform
- >Lack of racial inclusivity in the representation of patients in curriculum

Curriculum Subcommittee

Root Causes:

Programmatic/Content

- >Race is misrepresented as a biologic and genetic construct
- Disconnect between what is taught and what is demonstrated by faculty in clinical setting

Faculty

- >Institutional **"ignorance"** of historical factors leading to current issue
- Lack of understanding and commitment to the issues of wellness, burnout, and retention

Curriculum Recommendations

Short term:

>Adopt core competencies related to anti-racism.

- Establish Institutional Oversight and Continuous Quality Improvement committees across all phases of the NextGenMD curriculum.
- Eliminate racism in patient presentations across all phases of NextGenMD and at all sites.
- Integrate anti-racism in the basic science curriculum as well as in the clinical and social sciences curricula.

Curriculum Recommendations

Medium term:

Multiculturalism and racial equity must be the standard in every course taught at UM.

Eliminate race as a biologic predictor/risk factor in curricular materials.

Translate Racial Justice curriculum to clerkships and hidden curriculum.

Grow and expand our institutional values with regard to scholarly effort around racism.

> Equip our students to effectively serve diverse communities.

Resident and Fellows Subcommittee (GME) Co-Chairs: Dr. Y. Diaz & Dr. S. McLeod Bryant

Charge:

To increase the number of underrepresented minority (especially Black) residents and fellows and create an inclusive, welcoming environment on the medical campus.

Root Causes:

- Lack of diversity
- Lack of inclusion and welcoming environment

Resident and Fellows Subcommittee (GME)

Root Cause: *Lack of diversity*

- Pre-interview No structured approach to expose URM medical students within/outside Miami to our residency programs (SNMA, LMSA, outreach to HBCUs, residency fairs)
- Interview Lack of exposure to URM resident and faculty during interview day
- Post-Interview Financial support for socioeconomically disadvantaged groups for moving
- Pipeline Lack of focused recruitment efforts and outreach
- Perception & Communication Lack of structured support to navigate microaggressions experienced

Resident and Fellows Subcommittee (GME)

Root Cause: Lack of Inclusive and Welcoming Environment

Societal Factors

• Not accepted by the general population at large, unlike others (e.g. VA)

Environmental Factors

- Predominantly white male/elitist culture in Miami
- Environment at UM is sexist, white male-dominated, and elitist, and not part of the URM pipeline
- Discomfort with the ethnic mix of attendings and residents in the institution

Resident and Fellows Recommendations

Short term:

- Develop a structured approach to expose URM medical students within/outside Miami to our residency programs.
- Work with program directors to diversify selection committee and ensure that qualified URM candidates are recruited and ranked within the top tier.
- Educate faculty about how interns feel when they begin residency: "we have to be on point," "we have to perform," "we have no room for error."
- >Ensure **residents have their voices heard** early in training.

Resident and Fellows Recommendations

Short term:

- Increase numbers of Black chief residents and fellows.
- Ensure curriculum in residency includes talks on inclusivity, cultural sensitivity.
- Community outreach to Black/brown areas of Palm Beach Countyhealth fairs. Develop pipeline programs with high-school students using Black residents as mentors.
- Hospitals should make it clear where they stand on issues, including police brutality.
- Assigning Black faculty to see Black patients should not be the default practice.

Resident and Fellows Recommendations

Long term:

Increase number of Black faculty.

- Increase numbers of Black mentors in fields of potential interest (subspecialties).
- Provide ongoing education of faculty regarding differences among Black residents: "we are not all from the same backgrounds."
- Address the culture at the VA: microaggressions from patients, for example, staring at the name tags.

Faculty Affairs Subcommittee Co-Chairs: Dr. G. Thomas & Dr. J. St. Onge

Charge:

- To create a diverse medical faculty and medical school leadership by improving recruitment, mentoring, promotion, and retention.
- To eliminate racism and microaggressions between faculty and learners.

Root Causes:

- ➢ Recruitment
- Mentoring
- Career Development
- Promotion
- Retention

Faculty Affairs Root Causes

Recruitment:

- Efforts to recruit Black faculty are not viewed as a priority at the chair, center, and institute director levels.
- Search committees have not included participation of Black faculty, fellows, and residents.
- Starting salaries and start up packages are not competitive to attract excellent candidates.
- There is no cohesive plan or assistance regarding best practices for recruitment of Black faculty.

Faculty Affairs Root Causes

Mentoring:

- Lack of mentoring of Black faculty
- **Environment:** Black faculty report perceptions of
 - Invisibility
 - Marginalization
 - Hypervisibility related to issues of diversity
 - Lack of respect from colleagues, staff members, or students

Faculty Affairs Root Causes (cont'd)

Career Development:

Black faculty are assigned service-oriented roles with low-perceived value by administrators or other faculty colleagues.

➢It is difficult to determine whether subtle discrimination was race- or gender-based.

 Black faculty forced to focus on choice of clothing, hairstyle, manner of speech as well as strategies to address racial micro-aggressions.

Faculty Affairs Root Causes (cont'd)

Promotion:

Lack of competitive salaries and career guidance for Black faculty.

Lack of support for promotion and leadership opportunities, which contribute to low morale amongst Black faculty.

Faculty Affairs Root Causes (cont'd)

Retention:

Black faculty experience overt racism and discrimination as well as macro and micro-aggressions, and there is a lack of processes to report, and commitment to address these experiences.

During the last 5 years, 18 Black faculty have left the Miller School. Of the current faculty, at least 15 have considered leaving the University within the last two years. These numbers are reflective of the root causes stated above.

Short term:

- The Office of Diversity, Inclusion and Community Engagement and the Office of Faculty Affairs should develop a package to assist department chairs, center and institute directors, and Search Committees in the recruitment of Black faculty.
- Offer start up packages that have competitive salaries and other components (e.g. AAMC Median Salary guaranteed for three years with an appropriate research/support package).
- Hire 10 Black clinician investigators and 2 Black basic science faculty researchers in the next 12 months.

Short term:

Establish a Vice Chair for Diversity (VCD) in each department responsible for education of all faculty on implicit bias and microaggressions, identifying opportunities for development of existing Black faculty and monitoring and reporting metrics for the proposed chair's Diversity Score Card

Create a Society of Black Faculty at the Miller School

- Improve dissemination of information regarding opportunities for career development
- Improve the working and learning environment

Medium term:

Hire 50 Black clinician investigators and 10 Black basic science faculty researchers in the next 5 years

Increase Black faculty on the Appointment, Promotion and Tenure (APT) Committee and the Academic Personnel Board

Develop a Diversity Score Card for department chairs, center and institute directors assess success in recruitment, mentoring, promotion, retention and leadership development of Black faculty. These results should be tied to their annual performance evaluation.

Long term:

Ensure appropriate representation of Black clinicians and researchers on the Miller School faculty in 10 years (at least 13% of the faculty).
Research Subcommittee Co-Chairs: Dr. C. Schulman & Dr. G. Zhai

CO-Chans. Dr. C. Schuman & Dr. C. Z

Charge:

To create a diverse research workforce that provides mentoring and support for the next generation of researchers while creating an inclusive environment for underrepresented minority (URM) researchers. And enhance opportunities for research to address health inequalities and racial justice.

Research Subcommittee: Root Causes *Faculty*

Recruitment challenges:

- Underrepresentation of Black candidates in applicant pool (extramural)
- Lack of recruitment and retention efforts from within UMMSOM
- Paucity of identifiable mentors and limited number of Blacks on the faculty
- Lack of incentives for retention of minority and female faculty

Research Subcommittee: Root Causes *Faculty*

Recruitment challenges:

- Perception that URM trainees (particularly Black graduate students and post-docs) are being held back to serve as part of the workforce rather than being considered for promotion to faculty (i.e., lack of recruitment from within)
- Lack of support for faculty identified as potential role models for recruitment
- Lack of infrastructure to support recruitment

Research Subcommittee: Root Causes

Faculty

- Challenges to advancement, promotion and retention of existing Black faculty and non-faculty scientists:
 - Contracts are vague; lack of standardization, resulting in great inconsistency across departments/institutes.
 - Faculty are unaware of the central role of the office of Faculty Affairs in rectifying issues.
 - Fear of retribution should the faculty seek such assistance.
 - No clear process to address inconsistencies.

Research Subcommittee: Root Causes

Research and Support Staff

Lack of accessible data regarding the ethnic and racial make-up of the research staff

- Recruitment resources are targeted through national websites such as CareerBuilder/Broadbean
- Retention of qualified URM staff is a challenge

Research Subcommittee: Root Causes

Students and Trainees

- Socioeconomic and cultural factors, and the lack of diversity create barriers to recruitment
- Lack of oversight of the admissions process
- Lack of a recruitment plan or strategy
- Racial discrimination, microaggressions, and implicit bias affect retention
- Lack of a training or mentorship plan

Faculty:

- Conduct detailed survey of existing non-tenure track scientists
- Conduct formal review of all existing faculty for possible advancement
- Consider some form of restitution process for those who have been held "in limbo"
- URM faculty, especially Black faculty, must be represented equally on the APT, Faculty Council leadership, and in other key research leadership positions
- ➢ Formal training must be required for all leadership positions, and all future candidates for leadership positions (e.g. Division/Section Chief or above, and ALL administrative leaders)

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Faculty (cont'd):

- Convene a Microaggressions Committee through the Dean's Office and Faculty Affairs
- Collect baseline data for institutional faculty and internal faculty applicant pool (including physician scientist, basic science graduate students, and post-docs)
 - Detailed survey of existing tenure-track URM faculty (Black and non-Black) to identify and create a robust pool of candidates
- Survey basic science trainees (year 2 and above) for perceived obstacles to retention at UM as junior faculty
- Faculty Council: institute formal criteria for retention and promotion of relevant and qualified trainees to ensure objectivity in the process

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Research and Support Staff:

Target the recruitment of URM and Black research staff & provide resources for hiring managers to assess diversity within the specific department.

- Improve UM and interdepartmental exit interviews to assess reasons for departure,
- **Build a sense of community** through staff networking events.

Research and Support Staff (cont'd):

- Implement University "self-checks" for URM and Black research staff; survey to assess employee perception regarding diversity, inclusion, and racial justice.
- Develop and implement career development and growth opportunities, mentoring programs for new and current research staff and managers and develop and a certificate program and/or Master's program in research.

Students and Trainees:

- Recruitment Establish a formal, multi-year recruitment, admittance, hiring and diversification strategic plan
- Financial Assistance program Invest in financial assistance programs for URM, especially Black, students and trainees (seed money)
- Racial Bias and Sensitivity Training Create a mandatory, annual university-wide diversity, social justice, and cultural sensitivity training program

Students and Trainees:

- Racial Bias/Discrimination Reporting Define/refine policies regarding how to report and handle racial/discriminatory behaviors.
- Re-evaluate demographics and racial climate on an annual basis to assess trends
- Utilize annual racial climate survey as well as exit survey data to perform comparative analysis in order to determine if there is a downward trend in racial discrimination and non-inclusive behavior
 - **Goal:** Percentage of URM, particularly Black, students/trainees to reflect or exceed the demographics of Miami.

Community Engagement Subcommittee

Co-Chairs: Dr. A. Henderson, Dr. S. Taldone, & Dr. H. Tookes

Charge:

- 1) To improve security and policing to ensure equitable treatment for URM students, residents and faculty
- 2) Increase effective/supportive engagement with disenfranchised communities (e.g. Overtown, Liberty City, Allapattah, Coconut Grove, etc.) to promote health equity and wellness.

Root Causes

Community Engagement:

- Lack of acceptance of Medicaid by UHealth
- Poor communication of free healthcare resources to the community
- Lack of participatory engagement with the community (working to improve community health)

Policing:

- Lack of accountability for UM security officers
- High turnover rate of UM security officers
- Role of UM security and Miami police is unclear
- Some UM security officers exhibit discriminatory behaviors
- Reimagine public safety and increase city/county funding towards it

Community Engagement Recommendations

Policing:

Increase accountability for UM security officers

- "Town Halls" to provide input on proposed UM security policy changes
- Decrease turnover rate of UM security officers by increasing salary to living wage
- Communicate role of UM security vs. Miami police formal dialogue to include UM community
- Establish and report anti-discrimination training and implementation by UM security
- Research a new definition of public safety in neighborhoods that are traditionally over policed. And use it to reimagine city/county budgets.

Community Engagement Recommendations

Community Engagement:

Increase faculty and staff engagement

- Support 10% faculty effort for community engagement
- Appoint departmental representatives to promote engagement
- Revise promotions process to include community engagement
- Publish list of school community engagement work to promote synergy and collaborations

Improve Health of Minority Communities

Partner with community to develop strategies to increase access to care
Align university research interests with community healthcare interests to address gaps

Next Steps after the Task Force

- Work of implementation transitions to the **Dean's Diversity**Council
 - Representation from UMMSOM Departments, Offices and Institutes
 - Representatives from Student Organizations (e.g. SNMA, LMSA, SGA, etc.)

Establishment of a TFRJ dashboard to monitor our progress
Creation of a new Task Force on Racial Justice website

Task Force on Racial Justice Website









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