Family Hedicine

Appendix Table A: Crosswalk Annual Update Statements With Sullivan Commission and IOM Recommendations

Domain	Synthesized restatement of activities	Sullivan Commission	юм
Planning and evaluation	Evaluation of DEI recruiting and retention efforts	4.11 Health systems and health professions schools should use departmental evaluations as opportunities for measuring success in achieving diversity, including appropriate incentives.	Recommendation 3-1: HRSA's health professions programs should be evaluated to assess their effectiveness in increasing the numbers of URM students enrolling and graduating from HPEIs to ensure that they maximize URM participation.
	Use of data for progress monitoring and planning	6.1 Health systems and health professions schools should gather data to assess institutional progress in achieving racial and ethnic diversity among students, faculty, administration, and health services providers, as well as monitor the career patterns of graduates.	Recommendation 5-1: HPEIs should develop and regularly evaluate comprehensive strategies to improve the institutional climate for diversity. These strategies should attend not only to the structural dimensions of diversity, but also to the range of other dimensions (e.g., psychological and behavioral) that affect the success of institutional diversity efforts.
			Recommendation 4-4: Accreditation standards should include criteria to assess the number and percentage of URM candidates, students admitted and graduated, time to degree, and number and level of URM faculty.

			Recommendation 5-1: HPEIs should develop and regularly evaluate comprehensive strategies to [recruit and retain URM students and faculty through a range of academic and social supports, including but not limited to mentoring programs, academic supports, and other strategies integrated into ongoing programs].
Fulfilling ethical goals	Organizational objectives and residents should reflect the community and its needs.		Recommendation 6-1: HPEI governing bodies should develop institutional objectives consistent with community benefit principles that support the goal of increasing health-care workforce diversity including, but not limited to efforts to ease financial and nonfinancial obstacles to URM participation, increase involvement of diverse local stakeholders in key decision-making processes, and undertake initiatives that are responsive to local, regional, and societal imperatives (see Recommendation 5-4).
			Recommendation 2-2: HPEIs should establish explicit policies regarding the value and importance the institution places on the teaching and provision of culturally competent care and the role of institutional diversity in achieving this goal.
	DEI objectives are related to patient care.	See reference on pp. 3, 13 and 19-25.	Recommendation 2-2: HPEIs should establish explicit policies regarding the value and importance the institution places on the teaching and provision of culturally competent care and the role of institutional diversity in achieving this goal.
Teaching and learning	Learning support	4.7 Colleges, universities, and health professions schools should support socio-economically disadvantaged college students who express an interest in the health professions and provide these students with an array of support services, including mentoring, test-taking skills, counseling on	Recommendation 5-1: HPEIs should develop and regularly evaluate comprehensive strategies to [recruit and retain URM students and faculty through a range of academic and social supports, including but not limited to mentoring programs, academic supports, and other strategies integrated into ongoing programs].

		application procedures, and interviewing skills.	
DEI curriculum		2.1 The complementary strategies of increasing diversity and ensuring cultural competence at all levels of the health workforce should be endorsed by all in our society, with leadership from the key stakeholders in the health care system.	Recommendation 4-3: Health professions education accreditation bodies should develop standards and criteria that more effectively encourage health professions schools to recruit URM students and faculty, to develop cultural competence curricula, and to develop an institutional climate that encourages and sustains the development of a critical mass of diversity.
		2.6 Key stakeholders in the health system should promote training in diversity and cultural competence for health professions students, faculty, and providers.	
Mentorship		4.7 Colleges, universities, and health professions schools should support socio-economically disadvantaged college students who express an interest in the health professions and provide these students with an array of support services, including mentoring, test-taking skills, counseling on application procedures, and interviewing skills.	Recommendation 5-1: HPEIs should develop and regularly evaluate comprehensive strategies to [recruit and retain URM students and faculty through a range of academic and social supports, including but not limited to mentoring programs].
Recruiting diverse f	faculty	6.1 Health systems and health professions schools should gather data to assess institutional progress in achieving racial and ethnic diversity among students, faculty, administration, and health services providers.	Recommendation 4-3: Health professions education accreditation bodies should develop standards and criteria that more effectively encourage health professions schools to recruit URM students and faculty, to develop cultural competence curricula, and to develop an institutional climate that encourages and sustains the development of a critical mass of diversity.
Extracurricular acti	vities	Annual update only	

Mission	Program mission statement mentions DEI.	4.10 Diversity should be a core value in the health professions. Health professions schools should ensure that their mission statements reflect a social contract with the community and a commitment to diversity among their students, faculty, staff, and administration.	Recommendation 2-1: HPEIs should develop, disseminate, and utilize a clear statement of mission that recognizes the value of diversity in enhancing its mission and that of the relevant health-care professions.
	Sponsoring organization's mission statement mentions DEI.	6.2 Health professions schools and health systems should have strategic plans that outline specific goals, standards, policies, and accountability mechanisms to ensure institutional diversity and cultural competence.	Recommendation 2-1: HPEIs should develop, disseminate, and utilize a clear statement of mission that recognizes the value of diversity in enhancing its mission and that of the relevant health-care professions.
Organizational commitments	Training for staff, faculty, and residents on organizational DEI policy	2.6 Key stakeholders in the health system should promote training in diversity and cultural competence for health professions students, faculty, and providers.	Recommendation 5-2: HPEIs should proactively and regularly engage and train students, house staff, and faculty regarding institutional diversity-related policies and expectations, the principles that underlie these policies, and the importance of diversity to the long-term institutional mission. Faculty should be able to demonstrate specific progress toward achieving institutional diversity goals as part of the promotion and merit process.
	DEI senior officer	4.12 Health systems and health professions schools should have senior program managers who oversee: a) diversity policies and practices; b) assist in the design, implementation, and evaluation of recruitment, admissions, retention, and professional development programs and initiatives; c) assess the institutional environment for diversity; and d) provide regular training for students, faculty, and staff on key principles of diversity and cultural competence.	

	Financial assistance	5.2 To reduce the debt burden of underrepresented minority students, public and private funding organizations for health professions students should provide scholarships, loan forgiveness programs, and tuition reimbursement strategies to students and institutions, in preference to loans.	Recommendation 3-3: State and local entities, working where appropriate with HPEIs, should increase support for diversity efforts through programs such as loan forgiveness, tuition reimbursement, loan repayment, GME, and supportive affiliations with community-based providers.
	Confidential complaint reporting, ombudsman		Recommendation 5-3: HPEIs should establish an informal, confidential mediation process for students and faculty who experience barriers to institutional diversity goals (e.g., experiences of discrimination, harassment).
	DEI advocate at program level	Annual update only	
	DEI advocate other than senior officer		
	DEI Committee-program		
Outreach	Pathways, pipelines	4.1 Health professions schools, hospitals, and other organizations should partner with businesses, communities, and public-school systems to: a) provide students with classroom and other learning opportunities for academic enrichment in the sciences; and b) promote opportunities for parents and families to increase their participation in the education and learning experiences of their children.	Establish and maintain outreach programs to increase student interest in the health professions and their eligibility for admission (p. 263).
	Promotions	4.2 The U.S. Public Health Service, state health departments, colleges, and health professions schools should provide public awareness campaigns to encourage underrepresented minorities to pursue a career in one of the health professions. Such a campaign should have a significant budget, comparable to other major public health campaigns.	Recommendation 5-4: HPEIs should be encouraged to affiliate with community-based health-care facilities in order to attract and train a more diverse and culturally competent workforce and to increase access to health care.

	Recruiting efforts, campus visits	4.1 Health professions schools, hospitals, and other organizations should partner with businesses, communities, and public-school systems to provide students with classroom and other learning opportunities for academic enrichment in the sciences.		
	Recruiting efforts at conferences and meetings	Anı	Annual update only	
	Sub-I experience			
	Language, holistic (cultural competence) screening	2.4 Health systems should set measurable goals for having multilingual staff and should provide incentives for improving the language skills of all health care providers.		
Selection procedures	Holistic (cultural competence) review, merit review	4.8 The Association of American Medical Colleges, the American Association of Colleges of Nursing, the American Dental Education Association, and the Association of Academic Health Centers should promote the review and enhancement of health professions schools admissions policies and procedures to: a) enable more holistic, individualized screening processes; b) ensure a diverse student body with enhanced and cultural competency for all students; and c) develop strategies to enhance language competency and increase the pool of minority applicants.	Recommendation 2-3: Admissions should be based on a comprehensive review of each applicant, including an assessment of applicants' attributes that best support the mission of the institution (e.g., race, ethnicity, background, experience, multilingual abilities). Admissions models should balance quantitative data (i.e., prior grades and standardized test scores) with these qualitative characteristics. (See also pp. 247-248 for recommendations to acknowledge distance traveled.)	

Deemphasize standardized exams.	4.9 Dental and medical schools should reduce their dependence upon standardized tests in the admissions process, the Dental Admissions Test and the Medical College Admissions Test should be utilized, along with other criteria in the admissions process as diagnostic tools to identify areas where qualified health professions applicants may need academic enrichment and support.		
Recruiting committee composition	See references on pp. 90-91.	Recommendation 2-4: Admissions committees should include voting representation from underrepresented groups. In addition, HPEIs should provide special incentives to faculty for participation on admissions committees (e.g., by providing additional weight or consideration for service during promotion review) and provide training for committee members on the importance of diversity efforts and means to improve diversity within the committee purview.	
Blind recruiting			
Legal compliance	Annual update only		
Merit recruiting			

Abbreviations: IOM, Institute of Medicine; URM, underrepresented minorities; HPEI, health professions educational institutions; Sub-I, subinternship; GME, graduate medical education)