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The Pennsylvania State University College of Medicine and Milton S. Hershey Medical Center Progress Assessment of *A Framework to Foster Diversity at Penn State: 1998-2003*.
Revised May 10, 2002

Introduction

Organized as two corporate structures with a common mission, the College of Medicine and Milton S. Hershey Medical Center employ approximately 5899 individuals, including 562 faculty members and 365 residents pursuing graduate medical education. In addition, there are 440 medical students and 210 graduate students. Over 100 scientists are advancing their knowledge and careers through post-doctoral scholarship on our campus.

Implementing the goals of the *A Framework to Foster Diversity at Penn State: 1998-2003* has been challenging in the organization, as the period of 1998-2001 has been marked by dramatic change as the Penn State Geisinger Health System was dissolved on June 30, 2000. New leadership for the College of Medicine and MSHMC, the creation of two employers (Penn State University and the Milton S. Hershey Medical Center) on campus, and myriad changes in the financing of healthcare in the nation are indicative of the high level of organizational “change” since that date. In effect, facing the challenges of implementing the *Framework* has been accelerated on this campus as we struggle to “catch-up” with the rest of the University. In fact, it may be inappropriate to describe this document as an “update” as no specific plan to implement the *Framework* was developed for this campus in 1998. This assessment of progress identifies the progress made towards implementing the *Framework* through the addressing of seven areas of challenge even though no specific implementation plan is in place.

Challenge 1. Developing a shared and inclusive understanding of diversity

1. The College of Medicine and the Milton S. Hershey Medical Center has developed a shared and inclusive definition of diversity as “that broad array of human differences resulting from our unique backgrounds” including age, ancestry, color, disability or handicap, national origin, race, religious creed, sex, sexual orientation, or veteran status. Understanding, accepting, and appreciating human differences creates a stronger and better organization. This understanding has been demonstrated through the development of behavioral standards for diversity and through a broad-based approach to implementing these standards across the organization. While the standards are not yet in their final form, the current set exists as follows:

Commitment to Diversity

The Penn State Milton S. Hershey Medical Center healthcare team celebrates the value that diversity brings to the workplace. We define diversity as the broad array of human difference resulting from our unique backgrounds. Understanding, accepting and appreciating human differences make us a stronger and better organization.

Individual responsibilities:

Appreciate others for their abilities, skills, and contributions to the institution's mission, vision and values.

Do not judge others by their age, ancestry, color, disability, national origin, race, religious creed, sex, sexual orientation, veteran status, appearance or any other difference.

Be open to new ideas and points of view. Seek opportunities to get to know others whose ideas and feelings may be different from your own. Recognize that celebrating diversity often requires thoughtful consideration and deliberate behavioral changes.

Know what behavior is appropriate for the workplace. Accept responsibility for ensuring that our workplace is free from practices that may exclude or offend others. Address any behavior that you consider to be offensive.

Do not be overbearing in the expression of your personal beliefs or impose them on others.

Organizational responsibilities:

The organization does not tolerate overt or covert behaviors that are offensive to individuals or groups.

The organization demonstrates its commitment through compliance to affirmative action, equal opportunity, and the diversity policies.

2. The College has distributed and discussed information about the University's diversity initiatives to students through the orientation process at the beginning of each year.
3. The College has distributed and discussed information to faculty and staff about the University's diversity initiatives through on-campus communications vehicles including *The Crescent* and through public discourse in the development of our plan for the future, *The Next Generation*.
4. The Hershey campus does not have a multicultural coordinator.
5. Over the past few years, the College of Medicine and The Milton S. Hershey Medical Center had a diversity committee in the form of the Diversity Task Force. The Task Force, comprised of individuals employed by the College of Medicine as well as by MSHMC, worked to establish a comprehensive and integrated program that fosters equal access to opportunities, programs, facilities, admissions, employment, retention, and development regardless of personal characteristics not related to ability, performance or qualifications. The Diversity Task Force was useful in promoting an environment of diversity during the formative stage of diversity plan development. A permanent, standing group is needed for long term diversity plan development. To meet this need, the Dean's Council on Diversity has been created. Co-Chaired by a member of the Milton S. Hershey Medical Center professional staff and by a College of Medicine Faculty member, the Dean's Council on Diversity is comprised of individuals appointed as

representatives of functional areas in which they serve and recognized for their demonstrated support of diversity on campus. Limited to fifteen members, the Dean's Council includes a medical student, graduate student, post doctoral fellow, a College of Medicine administrator, a MSHMC administrator, the EEO/Director of Affirmative Action for the MSHMC, representatives from Nursing, Housekeeping, Laboratory Services, as well as basic science faculty, faculty physicians, and others.

Challenge 2. Creating a welcoming campus climate

1. College of Medicine and MSHMC leadership demonstrate visible support for diversity through manifest behavior in recruiting, hiring, and promoting individuals from diverse backgrounds.
2. Climate issues are identified through a campus wide employee survey completed annually. In order to assess the climate on campus for all employees, a campus-wide employee satisfaction survey was completed in late 2000. The survey revealed several areas of low satisfaction and several steps were taken to remedy these problem areas, including focus groups with work-groups and the development of a set of plans for improving workplace satisfaction. To help identify important issues relating to female faculty members, an organization, Women in Science and Medicine formed in 1999/2000. The function of the organization is to identify and advocate for changes that will enhance the career development and climate for women faculty on our campus.
3. The College and Medical Center respond to climate issues through conscientious efforts to make improvement in the climate and to demonstrate this through measurable change. Existing resources such as the ombudsman program, campus sexual harassment experts, and specific intervention provided on request for targeted intervention by diversity experts are used to ameliorate issues relate to the campus climate
4. The college wide and individual approach to enhance overall climate comes through our commitment to the shared values of respect, trust, teamwork & collaboration, and the constant pursuit of excellence in everything we do. This is not rhetoric – it is demonstrated behaviorally in our day-to-day interactions and conduct of business across all of our missions.

Challenge 3. Recruiting and retaining a diverse student body

1. The College of Medicine does not offer traditional undergraduate programs. Therefore, undergraduate students are not recruited to this campus.
2. The College of Medicine is conscientious in locating and recruiting graduate and medical students from underrepresented groups through the use of Minority Recruitment Days for Medical Students and Graduate Students. Minority faculty members participate in the interviewing process and minority students participate in recruitment activities such as having lunch with candidates or through participating in "Second Look Day" activities.

In keeping with the stated objectives of the admissions process for the College of Medicine, special emphasis is placed on the recruitment of underrepresented minorities and economically disadvantaged students. The program has had long-standing direction from Dr. Alphonse Leure-duPree, Associate Dean for Academic Achievement. He maintains continuous contact with deans, pre-professional advisors, faculty, and student organizations in colleges and universities with a significant enrollment of disadvantaged, ethnic, and under-represented minority students. Recruitment brochures are sent to a wide range of organizations and pre-professional advisors. The College of Medicine sponsors one-day visits to the campus of minority students from surrounding colleges to meet students and faculty, to discuss the curriculum, to provide information about financial aid, and to see the campus. Currently enrolled minority students play an active and vital role in the recruitment program by providing a student's perspective and answering questions not generally posed to the faculty. Representatives from the College of Medicine visit special recruitment programs sponsored by various academic institutions including the University of Washington, New York University, and Columbia, Baylor, Brown, Case Western Reserve, Harvard, Howard, Princeton, Temple, Tulane, Washington, Lincoln, and Cheney Universities. Representatives from the College of Medicine also recruit at special conferences sponsored by ASPIRA (New York and Philadelphia) and the Pennsylvania Black Conference on Higher Education.

Dr. Leure-duPree also directs a summer research program for under-represented minority students who are participating in the Summer Health Professional Program sponsored by Penn State's School of Health and Human Development (University Park). Students learn about health and medical issues, tour the campus, and interact with medical students. Members of the Student National Medical Association (SNMA) are active participants in the recruitment and retention of disadvantaged and under-represented minority students.

3. The College of Medicine does not offer traditional undergraduate programs.
4. Student support services to foster retention encompass several areas including advising, mentoring and problem resolution. Faculty members provide mentoring and students provide peer support. The Office of Student Affairs and a peer mentor from the second year class, assigned by that class, assign each student a faculty advisor. Faculty members advise no more than three students per class. Currently 191 faculty members serve as advisors.
5. No empirical studies exist to date, but there is cognizance of the need to evaluate and document which recruitment and retention strategies have been most successful. Data collection and analysis is in progress.

Challenge 4. Recruiting and retaining a diverse work force

1. The College has actively engaged in locating and recruiting faculty and staff from underrepresented groups through advertising positions in minority journals or in publications likely to have minority subscribers and through publicizing the availability of positions at minority organizations or at minority colleges, including Historically Black Colleges and Universities (HBCU). Recruitment strategies include expanding the pool of applicants by

expanding the geographic recruitment area or by networking with individuals at other organizations that are in frequent contact with potential minority applicants.

The Milton S. Hershey Medical Center has actively engaged in locating and recruiting staff from underrepresented groups through advertising positions with minority organizations and strengthening and establishing relationships with organizations of underrepresented groups. Recruitment strategies have included piloting a Minority Recruitment Program to introduce minorities and females to the organization, assist them with identifying available positions within our workforce and providing resume building and interviewing skills. A recruitment guide of minority, female, and veteran recruitment sources has been developed and will be available to assist the Human Resources staff and hiring managers in identifying appropriate recruitment sources to address underrepresented groups. Recently, networking systems have been established with community organizations that are in frequent contact with potential minority and female applicants

2. It is difficult to determine if any of the recruitment strategies have been successful in recruiting minority faculty members, although there has been some improvement between 1996 and 2001 at some ranks. In 1996, 8.5% (n=44) of the faculty members at the College of Medicine were from underrepresented minorities. By 2001, 14% (n=78) were members of underrepresented minorities, suggesting a significant change. The number of female faculty declined from 25.9% (n=134) in 1996 to 25.1% (n=141) from 1996 to 2001, the same time period.

3. Retention strategies included the implementation of HR40 for faculty so that all faculty members will have a written performance evaluation each year. In order to insure salary equity, the Penn State University Office of Affirmative Action completed a study of salaries in 1999-2000 of non-clinical faculty on the Hershey campus. As a consequence, two individuals received salary adjustments. Likewise, market analysis of salaries, as well as the HR40 review process, resulted in salary adjustment for several other individuals, effective July 1, 2001. Closer examination of the Office of Affirmative Action study resulted in questions about the integrity of the data used in the study i.e., base salary appears to have included an incentive component in some cases. Therefore, further analysis utilizing consultation with an expert in the area of gender equity and salary is needed to address the issues of equity across the campus. An external consultant with expertise in this area is being contracted to conduct a formal study of salary equity on the unified campus. Salary analysis will continue because academic health centers have unique features that should be taking not account. Previous studies did not include fixed-term faculty. These individuals constitute over 50% of the College of Medicine faculty. In addition, recruitment and retention by unit will need to be assessed.

Challenge 5. Developing a curriculum that supports the goals of the new general education plan

1. As the College of Medicine is not engaged in the education of undergraduate students, efforts to develop and implement multicultural curriculum efforts have been concentrated in the first and second year medical education curriculum and in the clinical experience for third and fourth

year medical students. A diversity workshop is included in the medical student orientation activities. This diversity training was initiated by students and implemented with their full participation. Minority student groups interact and sponsor student activities and discussion groups to enhance the educational experience related to diversity. It is notable that our student population is much more diverse than our employees, in general.

2. In the area of research, the General Clinical Research Center (GCRC) employs a nurse recruiter who is charged with recruiting minority subjects for participation in clinical trials. Teaching in the college includes problem-based learning (PBL). In recent years, PBL cases used as teaching tools were reviewed to determine if the content of cases was reflective of the diversity of the population. Changes have been made to prepare cases that are more reflective of the population at large.

3. Diversity training initiatives are integrated in the curriculum for medical students. Other venues have been used to promote the embracing of diversity with graduate students, Post-Doctoral Fellows/Scholars and faculty members. Black History Month has been used as a means for promoting greater understanding of the role of black Americans in our history. Greater participation by the faculty at the lecture featuring prominent black Americans will be encouraged. Similar learning opportunities have been created around other diverse groups including Muslims and Asian Americans. An interfaith chapel provides an opportunity for Muslims to honor their prayer customs. The Department of Pastoral Services provides space for the celebration of Ramadan.

Challenge 6. Diversifying University Leadership and Management

1. The College of Medicine has engaged in a process of leadership development of workplace management personnel and faculty. Many female faculty, staff, and members of underrepresented minorities have participated in these training workshops, which have been open to all faculty and management staff. The Center for Leadership Development at the College of Medicine and Medical Center has been created to develop the leadership and management skills of our personnel in the areas of Leadership, Communication, and Organizational Change and Diversity. Concerted efforts are underway to raise the profile of diversity related issues on the campus. Outcomes assessment is in its infancy, however, the relative visibility or invisibility of diverse groups can be a first step in moving towards more sophisticated outcomes measurement.

Challenge 7. Coordinating organizational change to support our diversity goals

1. Changes in the administration of the College of Medicine and MSHMC are examples of some of the many changes occurring within the organization. While they are significant changes in and of themselves, concomitant changes across the campus have been dramatic. For example, the MSHMC and the College of Medicine have parallel Human Resources offices to administer separate employment and benefits programs. MSHMC has a separate Affirmative Action Office charged with administering four specific AA plans, while the College of Medicine continues to operate under the centralized AA Office in University Park. This results in a total of five AA plans for the campus. Even with five AA plans, it is important to recognize that the Diversity Task Force has worked to develop one set of diversity standards for the organization as a whole.

The creation of the Dean's Council on Diversity adds the advantage of a more permanent body to guide the development and implementation of a diversity plan, which is a significant part of the long-term planning strategy of *The Next Generation* on this campus. This is essential for having a unified campus and strengthening diversity at the College of Medicine. All units and individuals must be held to the same high standards and must utilize the same equity guidelines for handling concerns and conflicts in a timely manner. To accomplish this, organizational realignments are needed to insure that the College of Medicine addresses Affirmative Action as effectively as the MSHMC. The components of a diversity program developed by the Diversity Task Force are included below:

COMPONENTS OF A DIVERSITY PROGRAM

	DEPARTMENT/UNIT AFFAIRS	HUMAN RESOURCE ACTIVITIES	STUDENT AFFAIRS	ACADEMIC AFFAIRS
RECRUITMENT	<ul style="list-style-type: none"> -Advertise in journals likely to have minority subscribers -Advertise in minority journals, organizations, and colleges -Network with groups likely to have knowledge of potential candidates 	<ul style="list-style-type: none"> -Recruit potential candidates who possess an appreciation & acceptance of workplace diversity -Expand recruitment areas and measures to gain greater diversity in the workforce 	<ul style="list-style-type: none"> -Minority Recruitment Days for Medical Students and Graduate Students -Minority Faculty participation in the interview process -Minority students participate in activities such as lunch with applicants and in second look day -Utilize SNMA, SWMA, GSA, Student Assembly, and other student groups 	<ul style="list-style-type: none"> -Actively recruit minorities incorporating what is outlined under Dept./Unit (Recruitment)
SELECTION	<ul style="list-style-type: none"> -Include minorities on search committees and house staff selection committees. -Educate people on behavioral questioning and use the process to assess the candidate's support of diversity, service, and respectful professional behavior 	<ul style="list-style-type: none"> -Incorporate search committees for key administrative and leadership positions. Include minorities on the committees -Hire managers with an effective track record for hiring minorities 	<ul style="list-style-type: none"> Include minorities on Medical School, and Graduate School Selection Committees. 	<ul style="list-style-type: none"> -Include minorities on selection committee. -Educate people on behavioral questioning and use the process to assess the candidate's support of diversity, service, and respectful professional behavior
TRAINING/ EDUCATION	<ul style="list-style-type: none"> -Assess the time commitment and content components of an effective diversity training program -Institute a diversity training program with discussion groups -Place minorities on committees that will provide experience for moving their careers forward. -Support attendance at professional development seminars 	<ul style="list-style-type: none"> -Assess the time commitment and content components of an effective diversity training program -Institute a diversity training program with discussion groups -Select effective and appropriate diversity training materials and consultants 	<ul style="list-style-type: none"> -Include diversity training in orientation and the curriculum so that there is reinforcement -Have minority student groups interact and sponsor student activities and discussion groups -Have faculty support student activities that relate to diversity such as Black History Month 	<ul style="list-style-type: none"> -Have training sessions on diversity including small groups that discuss a variety of situations and their reactions

DEVELOPMENT	<ul style="list-style-type: none"> -Initiate a mentoring program for minorities to provide support and guidance for career advancement -Support attendance at professional development seminars 	<ul style="list-style-type: none"> -Initiate a mentoring program for minorities -Support attendance at professional seminars -Establish a diversity competency and incorporate in all performance appraisals 	<ul style="list-style-type: none"> -Support SNMA, SWMA and other student groups -Have the institution support a discussion series with minority physicians and science professionals as speakers and role models -Recruit faculty as mentors and advisors who are committed to diversity 	<ul style="list-style-type: none"> -Sponsor programs on professional development and teaching. -Support mentorship programs both nationally and locally -Monitor departments to assure that they are providing appropriate mentors and professional development programs
RETENTION	<ul style="list-style-type: none"> -Keep statistics on recruitment and retention -Ensure salary equity -Have an annual performance review at all levels to understand areas of strength and areas for improvement 	<ul style="list-style-type: none"> -Keep statistics on recruitment and retention -Ensure salary equity -Periodically conduct employee focus groups to assess issues/needs with regards to the diversity climate in the institution -Determine how to have the most effective exit interview and follow-up of problems 	<ul style="list-style-type: none"> -Utilize SNMA, SWMA, GSA, Student Assembly, and other student groups to assess issues/needs with regards to the diversity climate in the institution 	<ul style="list-style-type: none"> -Monitor the departmental statistics on promotion and tenure, recruitment and retention, and on salary equity on a yearly basis -Identify and address any problems of inequity
CLIMATE	<p>Assess and address improvements in climate both in our workforce and our patient care on a regular basis.</p>	<p>-Assess and address improvements in climate both in our workforce and our patient care on a regular basis. --- Consider integrating the affirmative action functions of the college with the medical center so that they can be handled primarily on campus rather than at University Park.</p>	<p>Assess and address improvements in the climate our students experience from interactions with each other, with house staff, attendings, patients, and other medical center employees.</p>	<p>Assess and address improvements in climate both in our workforce and our patient care on a regular basis.</p>

Key: *Minorities* – refer to gender, race and ethnic groups, persons with disability
SNMA – Student National Medical Association
SWMA – Student Women’s Medical Association
GSA – Graduate Student Association