HEALTH EQUITY *and* RACIAL AND ETHNIC WORKFORCE DIVERSITY

How to Address the Shortage of Racially and Ethnically Diverse Health Professionals

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» ABSTRACT

Increasing workforce diversity is a critical step in achieving health equity. People of color make up more than 30 percent of Coloradans and 35 percent of the U.S. population, but the health care workforce does not reflect these demographics.[1] Given that communities of color experience a disproportionate burden of morbidity and mortality, increasing workforce diversity is vital to eliminating health disparities. Studies show providers of color are more likely to practice in underserved areas with larger racial and ethnic minority populations and serve patients of color who are uninsured or underinsured.[2-5]

To help health care service organizations better understand and address the shortage of racially and ethnically diverse health professionals, this paper examines a number of issues. It looks at the makeup of the health care workforce in Colorado and nationally, opportunities under the 2010 federal health care reform law to address inequities and misconceptions that stand as barriers to equity in the health care workforce. The paper also highlights how some Colorado organizations are working toward a diverse health care workforce. Finally, it provides recommendations for health service organizations from recipients of grants under the Equality in Health initiative, a seven-year effort funded by The Colorado Trust to reduce racial and ethnic health disparities in Colorado.

Although the numbers of racial and ethnic minorities are growing in Colorado and the nation, racial and ethnic minorities are strictly the minority in the health care workforce:

■ Racial and ethnic minorities are underrepresented across all health professions in Colorado with the exception of certified nurse aides.[1, 6-12]

■ Almost all (98%) local health departments' top executives in Colorado are white.[7]

■ Nationally, people of color make up 14 percent of physicians, 5 percent of dentists, 14 percent of nurses, and 17 percent of city and county public health officials.[2, 13]

■ Almost all (98%) senior managers in health care organizations across the nation are white.[2]

The 2010 Patient Protection and Affordable Care Act (ACA) presents many opportunities for health care organizations to address fundamental health inequities. The workforce diversity provisions of the ACA aim to do the following:[14-16]

■ Assess whether the current workforce meets the health care needs of individuals and increase availability and accuracy of workforce data

■ Develop strategies to increase workforce diversity

- Train the workforce on how to provide culturally and linguistically appropriate services to diverse communities
- Increase financial support for students in health profession programs
- Encourage utilization of community health workers
- Increase retention and representation of minority faculty members in health care programs.

A number of common barriers stand in the way of diversifying the workforce, however, including misperceptions such as:

- Believing that an organization does not need to focus on diversity because it is already diverse
- Expecting no qualified people of color to apply for job openings
- Assuming that a person of color will improve the organization's relationship with diverse communities
- Presuming that all people of color are culturally inclusive
- Believing everyone should be treated the same rather than equitably.

In spite of the barriers, a number of organizations in Colorado and across the nation are making strides in diversifying their health care workforce. These organizations have taken steps to make workforce diversity a priority, using strategies such as:

- Assessing the current state of the organization by examining patient and community population demographics, as well as staff demographics and capacities to serve diverse communities; reviewing staff and patient perceptions about where greater diversity may be useful; identifying areas where additional organizational policies and procedures related to workforce diversity may be needed; and assessing organizational readiness to ensure that staff clearly understand the goals of increasing staff diversity and how such goals align with the organization's mission and overall efforts to provide high-quality services to all
- Developing a plan to address an organization's specific needs related to workforce diversity such as recruitment strategies for filling vacancies or retention strategies for maintaining diverse staff
- Communicating strategies with staff and board and involving everyone in workforce diversity efforts
- Forming an advisory committee to monitor progress of the organization's workforce diversity efforts and providing recommendations for continued growth
- Expanding diversity efforts to the board of directors and volunteers so the value of diversity permeates throughout the organization.

The suggested strategies and others in this paper can provide a potential guide to health care organizations working to increase workforce diversity. Organizations can also capitalize on the workforce diversity provisions of the ACA to facilitate their efforts toward achieving health equity.

"We have a diverse staff with many diverse countries and several languages represented, and I hope that it serves as an illustration of our commitment to diversity. Even if a patient's own culture and language isn't represented among the staff, I think our team has a comfort level with accents and languages from other places, and I hope our desire to really get all of our patients' needs met is evident in the way we provide our services."

Sarah Vaine, Executive Director, Summit Community Care Clinic

» INTRODUCTION

Racial and ethnic health disparities exist in Colorado and throughout the United States. Communities of color are more likely than their white counterparts to suffer from worse health outcomes, lack health insurance, receive lower quality of care, rate their health statuses lower and die prematurely.[17-18] The causes of these inequities typically relate to various social determinants of health such as education, employment, housing and environmental justice. The 2010 Patient Protection and Affordable Care Act (ACA) and the increasing attention on health disparities present an unprecedented opportunity to address these fundamental inequities.

Although approaches to addressing racial and ethnic health disparities are broad and complex, diversifying the health care workforce has been shown to help improve access to health and health care for communities of color.[19] Developing a health care workforce that reflects the racial and ethnic composition of the population is vital to building rapport and trust with communities of color, ensuring effective communication and improving patient-centered care.[20] As Kraig Burleson, Chief Executive Officer of Denver's Inner City Health Center, says: "There is a comfort level that is almost immediately apparent when [patients] are served by someone like them. It makes a phenomenal difference."

Additionally, providers of color are more likely to practice in underserved areas with larger racial and ethnic minority populations and serve patients of color who are uninsured or underinsured.[3-5] Racial and ethnic concordance between patients and providers also has been recognized as a potential strategy for improving medical encounters, especially for patients who prefer their providers to be of their own racial or ethnic heritage.[21-22]

Increasing workforce diversity also can indirectly benefit communities of color. Working alongside providers and health researchers who share the cultural and linguistic backgrounds of underserved communities can help other individuals provide high-quality care to people of other backgrounds and work toward achieving health equity.[17, 21] Furthermore, when patients observe staff of different racial and ethnic backgrounds working collaboratively, they see that the organization is a safe place where all values and beliefs are respected and appreciated.

In addition to the improved access to care and experiences of patients, a diverse workforce can benefit employees.[19-20] People of color may feel isolated within a homogenous workplace. As organizations diversify their staff, people of color may connect that to greater satisfaction with their work.

Equality in Health Initiative

Equality in Health (EIH) was a seven-year initiative funded by The Colorado Trust (The Trust) to reduce racial and ethnic health disparities across Colorado. Twenty-six health service organizations were selected to develop their cultural competency, receiving five-year grants from 2005-2010 or 2007-2012. The grantee organizations varied in their size, geographic location, service provisions, organizational capacity and client populations, providing The Trust and a team of technical assistance providers the opportunity to assess a number of strategies for improving health equity.

By the end of the initiative, many grantees demonstrated important changes, including increased staff, board and client diversity; implementation of cultural competency policies; enhanced methods to solicit client feedback; and adaptation of services to meet the cultural and linguistic needs and preferences of diverse communities. These changes resulted in increased usage of the organizations' services by racial and ethnic minorities, which, in turn, led to further organizational development efforts tailored to the changing community demographics.

The literature and research findings described in this issue brief are complemented with EIH grantees' experiences specific to workforce diversity, gleaned from interviews with executive directors of some of the grantee organizations.

» A GLANCE AT THE CURRENT WORKFORCE

Despite compelling evidence demonstrating the benefits of a diverse workforce, many fields including health care do not have a workforce that reflects the rapidly changing racial and ethnic composition of Colorado's population. As Table 1 shows, racial and ethnic minorities are underrepresented across all health professions except for certified nurse aides. Similarly, only 8 percent of Colorado pharmacists indicated they were non-white in a 2005 survey.[12] Such discrepancies are especially stark with Hispanic and African American registered nurses, and Asian/Pacific Islander and

Native American/Alaska Native staff of local health departments.

Although public health has not traditionally been included as a key player in the health care system, the Essential Public Health Services of 1994 identified local public health system responsibilities, some related directly to the health care workforce, such as: linking people to needed personal health services and assuring the provision of health care when otherwise unavailable; assuring competent public and personal health care workforce; and evaluating effectiveness, accessibility and quality of personal and population-based health services.[23]

Table 1:	Racial and Ethnic Demographics of Colorado's Health Services Workforce Compared to Colorado Residents							
	Colorado[1]	CDPHE[6]	LHD[7]	CNA[8]	RN[9]	PA[10]	Dentists[11]	Mental Health[26]
White	69.7%	80%	90.1%	62.6%	92.7%	92%	84.9%	90.2%
Hispanic*	20.9%	11%	15.5%	23.1%	3.4%	4%	4.3%	7.9%
African American	4.3%	5%	0.8%	12.0%	0.3%	1%	1.9%	1.4%
Asian/Pacific Islander	3.1%	2%	0.5%	4.2%	2.0 %	2%	5.9%	0.9%
Native American/ Alaska Native	1.6%	1%	0.1%	4.3%	0.7%	1%	0.9%	2.8%
Two or more races	2.7%	0%	0.1%	-	0.9%	-	2.1%	-

*Hispanics are included in applicable race and ethnicity categories.

Colorado – Residents of the state of Colorado
CDPHE – Colorado Department of Public Health and Environment
LDH – Local Health Departments
CNA – Certified Nurse Aides

RN – Registered Nurses
PA – Physician Assistants
Dentists – Urban dentists
Mental Health – Mental Health Providers

The representation of racial and ethnic minorities in Colorado's health care workforce mirrors that of the United States. Nationally, people of color make up 14 percent of physicians, 5 percent of dentists, 14 percent of nurses and 17 percent of city and county public health officials.[2,13] Racial and ethnic minorities are also underrepresented among the faculty of many health and medical degree programs, with people of color making up approximately 22 percent of medical school faculty, 18 percent of nursing school faculty, 18 percent of dental school faculty and 16 percent of public health school faculty.[2,24-26]

At the leadership level, 98 percent of the local health departments' top executives in Colorado are white.[7]

Likewise, 98 percent of senior management in health care organizations across the nation are white.[2]

Although the University of Colorado Denver Anschutz Medical Campus (AMC) has been striving to increase student diversity and integrate cultural inclusivity into degree programs, AMC and other medical schools continue to have limited racial and ethnic diversity among their students. The Kaiser Family Foundation's most recent report on the distribution of medical school graduates in Colorado revealed that 86.1 percent were white, 2.1 percent were African American, 9.0 percent were Asian, 3.5 percent were Hispanic and 1.4 percent were American Indian and Alaska Native.[27]

Nationally, underrepresented minorities (i.e., African Americans, Mexican Americans, Mainland Puerto Ricans and Native Americans) make up 11.0 percent of medical school graduates, 20.0 percent of baccalaureate degree completions in nursing, 21.6 percent of master's degrees in nursing, 17.2 percent of doctoral students in nursing, 11.7 percent of pre-doctoral enrollment in dental schools, and 12.2 percent of enrollees in advanced dental education programs or dental schools.[13]

» NATIONAL EFFORTS TO IMPROVE WORKFORCE DIVERSITY

Title VII of the Public Health Services Act (PHSA) and Title VIII were created to address the shortage of racial and ethnic minority health care providers across the nation. Programs specific to workforce diversity in Title VII and Title VIII aim to increase the number of minority and disadvantaged students enrolling in health care programs and nursing programs, respectively. Aspects of these programs that complement other workforce diversity efforts include encouraging health care workers to practice in underserved areas, increasing the number of primary care providers, increasing the number of faculty in health care education and training programs, training advanced practice nurses, and improving nurse retention through career development and improved patient care systems.[4]

Through the reauthorization and expansion of Title VII, the ACA has potential to further diversify the health care workforce. Numerous ACA provisions aim to enhance the recruitment, retention and academic achievement of racial and ethnic minorities (Table 2).

Table 2: Workforce Diversity Provisions of the ACA[14-16]		
SECTION	AIM	METHODS
5101	Determine whether health care workforce can meet population needs	New National Health Care Workforce Commission will evaluate whether workforce meets individuals' health care needs, including research on supply, demand, distribution, diversity and skills of health care workforce. Commission will also recommend federal policies to address unmet needs.
5102	Develop comprehensive health care workforce development strategies	Health Resources and Services Administration will administer competitive health care workforce development grant program to encourage development of state and local strategies, such as increasing workforce diversity and training workforce on how to provide culturally and linguistically appropriate services to diverse communities.
5103	Develop information describing and analyzing health care workforce	New National Center for Health Workforce Analysis will be established to analyze information on health care workforce and related issues. Grants will be given to collect, analyze and report data on workforce to help field better understand where greater diversity may be needed.
5201-5205	Increase financial support for students in health profession programs	Public Health Services Act will be amended to increase federally supported medical student loans, increase yearly loan limits and aggregate loan amounts for nursing student loan program, establish pediatric specialty loan repayment program and increase funding for loan repayment programs. U.S. Department of Health and Human Services (HHS) will establish Allied Health Loan Forgiveness Program with goal of reducing financial barriers to enrolling in medical degree programs to help people of color pursue medical degrees.
5301	Increase diversity among primary care providers	HHS will award medical teaching facilities with grants to develop training programs in primary care (family medicine, general internal medicine, general pediatrics). Priority will go to applicants with record of training individuals from disadvantaged or underrepresented backgrounds, serving underserved populations, or providing cultural competency and health literacy trainings. Goal is for teaching facilities to diversify workforce and promote health equity.

Table 2: Workforce Diversity Provisions of the ACA[14-16] *(continued...)*		
SECTION	AIM	METHODS
5303	Increase diversity among dentists	HHS will award grants to dentistry schools, hospitals or other entities to develop and operate professional dental training programs and to provide financial aid to students pursuing careers in general, pediatric or public health dentistry. Priority will go to applicants most likely to place graduates in underserved areas. Goal is to increase student diversity by minimizing financial barriers to enrolling in medical programs and promoting placements by students of color.
5306	Increase diversity among mental health providers	Grants will be awarded to higher education institutions to recruit students for social work, psychology, behavioral and mental health services and counseling. Institutions must demonstrate diversity of individuals participating in programs, with priority given to cultural and linguistic competency. Incentives can lead to more diverse students and a more diverse workforce.
5309-5311	Increase diversity in nursing professionals	Nurse education and practice grants, loan repayment and scholarship programs, and faculty loan programs will be established to increase representation of minority populations among nurses.
5313	Increase utilization of community health workers	Centers for Disease Control and Prevention will provide grants to promote positive health behaviors and outcomes in underserved areas. Funds can help provide education and outreach in underserved communities, help enroll individuals in public health programs, refer underserved populations to community-based services and provide home visitation services for maternal health and prenatal care. Goal is to increase workforce diversity through Community Health Workers who often represent the racial or ethnic communities they serve.
5401	Increase diversity of applicant pool for health professionals	Efforts will be made to develop minority applicant pool to enhance recruitment, training and academic performance for minorities in tested career paths.
5403	Enhance workforce education programs	HHS will grant awards to medical schools to initiate and carry out health care workforce education programs, and to area health education centers to improve their effectiveness. Awards can be used to recruit and support individuals from underrepresented, minority or disadvantaged populations, provide community-based training and education to health professions students or prepare students to care for underserved areas and populations with health disparities.
	Increase retention and representation of minority faculty members	Continuing educational support will be provided for health professionals serving in underserved communities through grants for activities such as increasing minority faculty members, enhancing the practice environment, providing educational support and reducing professional isolation through dissemination of research findings. Strategies to retain diverse faculty can lead to enhanced environments for students and help increase student diversity.

» KEY SUCCESS FACTORS FOR INCREASING WORKFORCE DIVERSITY

Increasing workforce diversity in any field or organization requires a variety of strategies that align with the contexts of the given field and workforce. Some key factors, however, can enhance efforts across all organizations.

One of the most critical factors for increasing workforce diversity is leadership commitment. Although other staff can champion workforce diversity efforts, the organizational leader (i.e., executive director, chief executive officer or president) needs to make those efforts a priority for an organization to adopt the necessary practices and procedures to recruit and retain staff of color. Organizational leaders can demonstrate they value diversity not only by making it an organizational goal but also by being involved and invested in the process. Four roles can help a leader ensure an organization's success in diversifying its staff:[28]

- **Communication.** Leaders can communicate the vision for the organization's diversity efforts throughout all levels, discussing the benefits so staff members understand why the organization is taking on this work.

- **Strategy.** A strategic plan should exemplify the organization's values and philosophies around diversity and create a foundation upon which a diverse workforce can be built. The plan can include steps on training managers how to lead diverse staff, attracting diverse applicants for employment and developing a diverse pool of potential future leaders.

> **One of the most critical factors for increasing workforce diversity is leadership commitment.**

- **Support.** Leaders can provide the encouragement and resources necessary for staff to carry out the organization's commitment to diversity efforts, while promoting a safe and supportive environment for staff of color.

- **Policy.** Developing organizational policies demonstrates that the organization values workforce diversity. Policies ranging from a diversity statemen t included on job postings to linking performance assessments and compensation to the progress of diversity initiatives can support accountability.

Organizational culture is another key component that can significantly help or hinder diversity efforts. Strong organizational cultures can often create uniformity of beliefs, values or behaviors among employees and result in a sense of isolation for employees who do not share those beliefs and values or exhibit those behaviors. As such, while a strong organizational culture may be desirable in some ways, it can be a barrier to creating and capitalizing on workforce diversity. Although it is important for an organization to clearly articulate its core values, when new employees are hired based on their "fit" with the organization, this practice can limit diversity by implying that there is a homogenous workforce.[31] To enhance workforce

Sample Policy on Workforce Diversity

Located in the Cole neighborhood of Denver, Inner City Health Center provides consistent, high-quality care to underserved individuals. The following policy is included in the center's Team Member Handbook.

"Inner City Health Center strives to be a culturally competent organization that accepts and respects differences among and within different groups. Therefore, we continually assess our policies and practices regarding appreciating distinctions among people. We regularly seek to expand cultural knowledge and resources, and adapt service models in order to better meet the needs of different racial and/or ethnic groups. The Health Center deliberately endeavors to hire staff who are unbiased and that represent the racial and ethnic communities being served. We also seek the advice and counsel from our clients. We are resolutely committed to policies that enhance services to a diverse patient population."[30]

The Journey to Increasing Staff Diversity

Kids in Need of Dentistry (KIND) is a nonprofit organization founded in 1912 to provide high-quality, affordable dental care to children in need throughout Colorado. With two facilities in Denver and one in Colorado Springs, the staff of 15 works collaboratively to help thousands of children each year get the dental services they need at a cost their families can afford. Although KIND has been implementing many best practices around oral health care such as Evidence-based Dentistry within their clinics for many years, the commitment to cultural inclusivity made by Executive Director Julie Collett was the catalyst that prompted KIND to focus on increasing its workforce diversity.

KIND's patients comprise approximately 62 percent Hispanic, 19 percent Caucasian, 5 percent African American, 1 percent Asian, 0.1 percent Native American and 10.9 percent other or mixed. Collett, originally hired to serve as a dental hygienist, had experienced the challenges of a primarily Caucasian staff working to serve an increasingly diverse patient population. When promoted to executive director, she already understood the importance of increasing the staff's diversity to reflect the racial and ethnic demographics of the program's patient population. After discussing her goals with the staff, they identified the areas and programs that were most in need of bicultural* and bilingual staff, such as the front desk, and began implementing various strategies to recruit diverse staff. Those strategies included:

■ Building relationships with culture-based organizations (e.g., Asian Pacific Development Center), community leaders (e.g., the Mexican Consulate) and educational institutions (e.g., a dental assistant school in Colorado Springs)

■ Explicitly stating that bicultural candidates were preferred for specific positions

■ Sharing information about the organization's patient demographics and cultural inclusivity efforts during the hiring process.

*Julie Collett, Executive Director
Kids in Need of Dentistry*

Existing staff were given opportunities to further their knowledge and understanding of diverse communities and develop their Spanish skills to limit any sense of cultural and linguistic isolation among newly-hired bicultural and bilingual staff. While working to increase its staff diversity, KIND also adopted a cultural competency statement (posted on its website) and conveyed to patients by staff. Although Collett has encountered obstacles along the way, ranging from staff resistance and a facility with only one staff of color to a limited pool of diverse applicants and private practices offering higher pay to recruit bilingual/bicultural staff away, she has successfully led KIND in its efforts to increase workforce diversity.

Since its involvement with the EIH initiative, KIND has increased its staff diversity so that each program has one or more bicultural and bilingual staff, and Caucasian employees have become the minority,

reflecting patients' racial and ethnic composition. KIND also has shifted its organizational culture to demonstrate its value for diversity and to increase staff retention. Discussing issues related to diversity and inclusivity has become a regular part of monthly staff meetings. Staff share responsibility in furthering the organization's cultural inclusivity efforts and have a collective understanding of how the organization's diversity positively affects their patients' experiences. The leadership and emphasis on self-reflection and open dialogues have also complemented staff members' work and facilitated the development of a safe and comfortable environment for staff and patients alike.

* Bicultural: person who is comfortable and proficient with their own culture and the culture of the country or region in which they have settled.[31]

diversity, organizations can demonstrate their value for diversity and cultural competency by:

■ Creating a safe and welcoming environment for diverse staff

■ Promoting open conversations about race

■ Successfully managing diverse staff

■ Reflecting on how staff and organizational structures are perpetuating disparities

■ Capitalizing on the diverse experiences and perspectives of staff of color, especially in efforts to address racial and ethnic health disparities among the organization's patient population.

Having a homogenous staff in regard to race and ethnicity can be a barrier to increasing workforce diversity. People of color may be apprehensive about the idea of becoming the only or one of a few staff of color within an organization. Therefore, it is important for organizations with minimal staff diversity to be even more explicit about why they value diversity and how they demonstrate this value. (See *Health Equity and Leadership: The Importance of Leadership in Achieving Organizational Cultural Competency* for more on the role of leaders in developing cultural diversity and competency.)

» BARRIERS TO DIVERSIFYING THE WORKFORCE

The Equality in Health initiative team found a number of misperceptions that were common at the beginning of the program. Other cultural competency consultants shared similar experiences from their work with additional organizations. These misperceptions have

the potential to impede diversity efforts. Organizational leaders working on diversifying the staff may need to address these issues early on in the process.

■ **Believing that an organization is already diverse and does not need to focus on diversity.** Workforce diversity is an ongoing process that requires organizations to strive continuously to have a staff composition that reflects their target population. Although this critical mass may be obtained at some point, staff turnover and changes in community demographics are inevitable.

■ **Expecting there will be no qualified people of color.** For centuries, people of color have experienced numerous forms of discrimination that have prevented equal, let alone equitable, access to educational and professional development opportunities. For this reason, there are disproportionately fewer people of color with the desired educational qualifications and practical experiences, especially in rural communities, but they do exist. Today, the challenge is for nonprofit organizations to compete with private practices that can afford to pay higher salaries to qualified racial or ethnic minority individuals.

■ **Assuming that a person of color will improve the organization's relationship with diverse communities.** People of color can have varying levels of experience working with diverse communities and may vary in their sense of connection with a particular group. During the hiring process, employers often assume people of color are connected with the communities with which they share a racial or ethnic identify. But this may not be true, and even if a staff member is well connected with a certain racial or ethnic group,

the organization should not expect an individual to speak or act on behalf of an entire racial or ethnic group.

- **Presuming that all people of color are culturally inclusive.** Being culturally inclusive includes characteristics such as learning about a patient's perceptions of health and illness, understanding cultural variations in familial relationships and roles as they pertain to health-related decisionmaking, collaborating with traditional healers and other individuals from whom patients seek support, and developing awareness about one's own beliefs and values and how they may bias interactions with individuals from similar or different cultures. Organizations cannot assume that a person of color will have culturally inclusive attitudes and behaviors or support goals for furthering the organization's diversity. A variety of life experiences as well as openness to self-reflection can determine where an individual falls along the spectrum of cultural inclusivity.

- **Treating everyone the same.** In examining its recruitment and retention strategies, an organization should realize the goal is not to treat everyone the same. Rather, organizations should strive to treat employees and applicants equitably, that is, without bias or favoritism and according to their needs. Understanding the varying needs and preferences of diverse communities and adapting recruitment and retention efforts to align with the cultural nuances of that particular community can help organizations implement appropriate and effective strategies for recruiting and retaining a diverse workforce.

> **It is important for organizations to strive to have a workforce that reflects the racial and ethnic demographics of the communities they serve.**

» BEST PRACTICES FOR RECRUITING DIVERSE STAFF

It is important for organizations to strive to have a workforce that reflects the racial and ethnic demographics of the communities they serve. Therefore, the optimal racial and ethnic composition of an organization's workforce will vary based on its patient population. Health care organizations have many strategies they can use to help recruit diverse staff. EIH participants have found that paying attention to the following steps helps them bring diverse applicants to their organizations.

ONGOING WORK. Organizations have many steps they can take to recruit diverse staff after a position becomes vacant, but continuously working on diversity can help facilitate recruitment efforts.

- **Build relationships with diverse communities.** Partnerships with communities of color are beneficial not only in reaching out to diverse patients but also in disseminating job postings. Ongoing relationships with diverse communities can help organizations create a stronger presence in and rapport with those communities.

"KIND's Colorado Springs facility has partnered with the local dental assistant school to provide students with the opportunity to gain clinical hours while learning about KIND's efforts to provide culturally and linguistically appropriate services to diverse patients. KIND also benefits from this partnership. By helping train future practitioners, it can ensure they are knowledgeable about the need to address health disparities. Also, by serving as a [site where dental hygiene students can gain practical experience], KIND has been able to identify potential employees and has developed a reputation for being an organization that values diversity."

Julie Collett, Executive Director, Kids in Need of Dentistry

to communities of color. Such media may include ethnic newspapers and magazines as well as newsletters of cultural organizations and faith-based establishments.

■ **Demonstrate value for diversity throughout the organization's website.** Organizations can convey their goals and priorities for workforce diversity and illustrate the existing staff diversity on their websites to demonstrate commitment to workforce diversity and health equity.

INTERVIEW PROCESS. Assessing candidates' skills and experiences related to cultural inclusivity as they advance through the application process can help health service organizations hone in on the people most likely to advance efforts toward diversity.

■ **Consider seeking bicultural candidates.** Organizations may want to consider candidates' experience working with particular populations, their understanding of cultural nuances of those populations and their relationships with the communities, in addition to other qualifications.

■ **Assess candidates' experiences with diverse populations.** Organizations can inquire about an applicant's previous experience with diverse communities through interview questions or through a writing sample. For example, "[Organization] works with a variety of community groups representing a broad range of diverse populations. Please share with us how your background, including both your work and life experiences, has prepared you to work effectively and empathetically with diverse communities."

■ **Form partnerships with educational institutions.** The growing focus on health disparities is leading many health professions programs to integrate cultural competency curriculum into their teaching and to seek potential internship sites for their students. By serving as an internship site, organizations can contribute to development of the health care workforce while benefiting from the most recent best practices that students are exposed to in their programs. Such internship programs also allow health care organizations to develop relationships with students who are potential employees.

JOB POSTINGS. Organizations seeking to expand diversity have found that how job postings are handled and where they are posted may carry extra importance.

■ **Explicitly solicit diverse candidates.** When crafting job descriptions for vacant positions, organizations can include specific language to attract diverse candidates. For example, "The hiring process for this position will reflect [organization]'s dedication to workforce diversity and health equity. We encourage people from diverse racial and ethnic backgrounds to apply."

■ **Post in high traffic areas for communities of color.** In addition to capitalizing on existing relationships with communities of color to disseminate job descriptions to their diverse networks, organizations can benefit from posting job positions through means with a broad reach

> **Organizations may want to consider candidates' experience working with particular populations, their understanding of cultural nuances and their relationships with the communities.**

» BEST PRACTICES FOR RETAINING DIVERSE STAFF

Implementing a variety of retention strategies to maintain existing staff is as important as efforts to recruit new staff of color. As external stakeholders learn about an organization's value for diversity and how that is demonstrated throughout the organization, retention strategies also can become key recruitment tools. EIH participants shared their best practices for retaining diverse staff.

- **Develop internal pipeline programs.** Educational pipeline programs have been demonstrated to be an effective way for increasing the diversity of the health care workforce. Such programs recruit young people into training programs starting in high school or earlier and help the students follow the needed curriculum track at key transition points, such as high school to college. Similar programs within health organizations can provide opportunities for mentorship and professional development to help ensure that diversity is reflected throughout the organization and can serve as an incentive for people to stay with the organization.[33]

- **Demonstrate value for diverse staff.** Just as an organization's website or the language in a job posting can demonstrate its value for diversity to external stakeholders, it can also help to create a culture that demonstrates to staff the organization's respect for diversity.

- **Integrate diversity in new hire orientations.** Although new staff may have a sense of the organization's commitment to workforce diversity based on the application and interview processes, it can be helpful to reiterate the organization's values around diversity during orientations. Organizations also can use this time to provide more details about their overall efforts around health equity and to discuss how new employees can become involved.

- **Promote inclusive decisionmaking.** Capitalizing on the diverse experiences and perspectives of staff can be an effective way to demonstrate an organization's commitment to diversity. Including diverse staff in decisionmaking processes not only may enhance the organization's creativity and problem-solving abilities but also can convey the message that the organization recognizes the intrinsic benefits each employee has to offer. This can be done by integrating new staff into an evolving organizational culture, rather than just imposing the organization's existing culture onto new employees, and by soliciting diverse perspectives when developing programs and services.

- **Show appreciation in different ways.** How one likes to be acknowledged for his/her contributions to an organization may vary by individual. Some employees may prefer monetary compensation, while others may seek public recognition, increased responsibility, flexibility in work schedule or greater decisionmaking power. Organizations can recognize these differences and convey their appreciation for the staff accordingly.

- **Address diversity issues immediately.** Cultural misunderstandings, varying perspectives or approaches, and different work styles are inherent in any environment. Organizations may experience a variety of issues related to racial and ethnic differences, ranging from staff who resist health equity efforts to staff who demonstrate discriminatory behaviors or make inappropriate comments toward colleagues or patients of a certain race or ethnicity. How an organization addresses such issues as they arise can either validate its stated values around diversity or refute them. Organizational leaders who address issues related to diversity in a timely and innocuous manner can help staff continue to feel respected and valued.

» STRATEGIES TO RECRUIT AND RETAIN A DIVERSE WORKFORCE

Creating and keeping a diverse workforce is a long-term effort that requires knowledge and focus in addition to the best practices outlined above. The following strategies are based on the insights gained from the challenges and successes experienced by health care organizations involved in the EIH initiative.

Creating and keeping a diverse workforce is a long-term effort that requires knowledge and focus in addition to best practices.

The Pipeline Program at Summit Community Care Clinic

Summit County's Summit Community Care Clinic (Care Clinic) strives to improve the well-being of its patients by preventing illness and treating disease through its nationally recognized integrated care model. To improve its workforce diversity, the Care Clinic has developed and continues to utilize numerous strategies founded on its belief that an individual's experiences with communities of color and abilities to serve diverse patients should be considered as qualifications for people working in health settings.

■ **The natural progression.** If a person has no experience in the health care field, he/she will typically start at the front desk. The front desk is fast-paced and comes with opportunities to learn about various procedures and protocols. Individuals have the opportunity to learn about eligibility – reviewing a patient's income and placing them on a sliding-fee scale – and later may move into positions on the care team or become a patient navigator – someone who helps patients get timely care and overcome barriers to accessing services – if they are qualified. By supporting staff with on-the-job training opportunities and encouraging them to pursue higher education and clinical training opportunities, migration through the Care Clinic has occurred at all levels of the organization. Most of the managers and executive leadership of the Care Clinic started at the bottom and have moved up through the organization.

■ **Identifying a good fit.** Effectively leading a diverse organization means recognizing that each individual has a different set of skills. While the natural job ladder progression may work for most staff, it is important to understand an individual's knowledge and skills and to identify a position best suited for those traits. As Sarah Vaine, Care Clinic Executive Director, says: "We work really hard to understand what people are good at, areas that aren't their strong suit, and how we can capitalize on the things that they do well." Care Clinic leaders ask their staff, "What other interests do you have?" and then help them to develop the skills they need to be able to move up into that position. Furthermore, Care Clinic recognizes that if a staff member does not do well in a certain position, it is often more beneficial to the organization to recall what initially drew them to that person and to work to find another position that may be a good fit.

Sarah Vaine, Executive Director
Summit Community Care Clinic

■ **Opportunities for mentorship.** Care Clinic strongly believes that increasing workforce diversity benefits the team, the community and the overall organization. This requires investing much time and resources into the staff. Because clinic managers and providers believe in the importance of a diverse workforce, they are willing to mentor their colleagues and provide them with the necessary professional development opportunities to ensure the success of their pipeline program.

"You have to think about what the needs of your diverse staff are going to be. You can't just bring them into your organization and expect them to do well in an organization that hasn't been set up for them. Acknowledge that you're going to have to change some of the things that you do. You have to be willing to look at your policies, to be more flexible and to be more inclusive. Getting more culturally diverse people, whether it's ethnically or economically, or disability or sexual orientation, you have to make a place for it and be conscious of how you're doing that. You can't just bring those cultures in and expect them to do great in your system."

John Jewett, former Executive Director, Denver Indian Family Resource Center

1. Assess the current state of workforce diversity in the organization.

Examine patient and community population demographics. Prior to implementing strategies to increase workforce diversity, it is helpful for organizations to understand the racial and ethnic make-up of current patients as well as the general community where they are located. Such data can be gathered by asking patients how they self-identify racially and ethnically. Numerous data sources and analyses exist (e.g., Colorado Health Access Survey, Census), and additional sources are likely under the ACA's provisions regarding data collection and reporting.[20, 34]

Examine staff demographics and capacities to serve diverse communities. Learning which racial and ethnic groups are represented among an organization's staff across departments and hierarchical levels based on self-identification can help determine how additional or different diversity may be helpful. Comparing this information with patient demographics can help organizations identify whether or not any significant patient populations are lacking representation among staff.

Review staff and patient perceptions. Data from patient satisfaction, organizational climate surveys and staff exit surveys can help inform an organization about the perceptions patients and staff members have of the organization as it relates to diversity. In addition to the demographic data, reviewing perceptions also can provide insights on areas that need improvement.

Evaluate policies and procedures. Reviewing current policies and procedures related to workforce diversity can help organizations determine where additional efforts may be needed. Policies related to training managers on how to lead diverse staff can further an organization's diversity efforts. These policies can include such efforts as a diversity statement on job postings or a policy on how performance assessments and compensation are linked to the progress of diversity initiatives.

Cultivate organizational readiness. Developing workforce diversity requires time and financial resources. Without a full commitment, organizations not only may reduce their odds of success but also could damage relationships with diverse communities. For example, an organization may invest in recruiting diverse staff, but if its culture is not open to integrating the diverse experiences and perspectives that people of color offer, recent hires may feel their contributions are not valued, which could jeopardize the organization's reputation among communities of color. Organizations may achieve greater success by assessing their readiness to take on diversity work and ensure that staff members clearly understand the goals of increasing diversity and how such goals align with the organization's mission and overall efforts to provide high-quality services.

2. Develop strategies to address an organization's specific needs.

Once organizations determine the workforce diversity strategies most important to them, they can begin to match these priorities to what they have already learned through assessments and position vacancies. Organizations without vacancies may want to focus on internal retention efforts to create a desirable work environment for existing staff of color. Organizations looking to hire new staff might consider directing their efforts toward strengthening relationships with diverse communities and educational institutions or developing a protocol for their application and interview processes that emphasizes diversity. If all positions are filled but certain racial and ethnic groups that make up a large proportion of the patients are not represented among staff, the organization could consider recruiting volunteers or forming an advisory committee. Perspectives from those populations could then be integrated into the development of programs and services.

3. Communicate strategies with staff and board.

Whether an organization is seeking to diversify its applicants, build relationships with diverse communities or create a more inclusive work environment, all staff and board members can help or hinder the process. Clearly communicating the organization's goals around workforce diversity and articulating each individual's role in furthering each objective can contribute to the organization's success in increasing its staff diversity.

4. Form an advisory committee to monitor progress and to provide recommendations.

A committee comprising internal staff as well as external stakeholders can help guide the organization by tracking changes in patient and staff demographics and assessing the impact of the organization's diversity efforts. This committee also could be tasked with developing, conducting and analyzing patient perception and organizational climate surveys and providing recommendations for how the organization can improve its diversity work.

5. Expand diversity efforts to the board of directors and volunteers.

Once organizations begin to diversify their staff, they can also implement strategies to increase the racial and ethnic makeup of their board of directors and volunteers. Like increasing the diversity of staff, increasing the diversity of the board and volunteers may lead to improved services for patients as well as an enhanced workplace for employees.

» KEY CONSIDERATIONS FOR WORKFORCE DIVERSITY

Race and ethnicity are key determinants of health in the United States. Numerous other cultural factors, however, can lead to disparities such as sexual orientation, disabilities, socioeconomics and language. Many of the strategies recommended in this brief can be adapted to help health care organizations improve their workforce diversity in regard to other cultural identities as well. Such efforts can be critical in improving health equity for all populations.

Furthermore, there is a need for conversations about racial and ethnic inequities to take place beyond the health field. Social determinants of health such as education, housing, employment and environmental injustices affect one's health. Health organizations may want to share these strategies with all relevant partners to facilitate a system-wide shift in how inequities are addressed.

Greater workforce diversity is an element that can lead to improved patient experiences as well as reduced health disparities.

"This is a conversation that needs to be happening in workplaces across the board. It needs to be happening in corporate America; it needs to be happening in the suburbs; it needs to be happening in churches; it needs to be happening in schools. We still need to somehow address the situation [of racial and ethnic injustices]. It's not going away. I believe we can do one of two things: We can try to address the situation with our eyes wide open and wholeheartedly seek to change, or we can continue to do what we are doing and get what we're getting – a tense and fractured society. My sincere hope is that we choose the first option – that is, to strive to bridge the gaps existing between people, minimize the polarization and become a better nation. It is possible to value each person and to appreciate what makes us different. It is also possible to disagree without degradation."

Kraig Burleson, Chief Executive Officer, Inner City Health Center

⟫ CONCLUSION

Increasing the diversity of the health care workforce to better represent the general population has been highlighted as a critical step in achieving health equity. Greater workforce diversity is an element that can lead to improved patient experiences as well as reduced health disparities while also creating a more inclusive environment for staff and patients alike.

The ACA provides new opportunities for health care organizations to increase their workforce diversity. Health care organizations also can influence the progression of policy changes by requesting that the state assess and develop its workforce diversity efforts, encouraging educational institutions as well as local and state health agencies to expand their internal pipeline programs, and influencing the future direction of state and federal policies related to workforce diversity.

Increasing diversity across all health professions is an ambitious goal. Health care organizations, however, can contribute to this effort by taking incremental steps to increase their own workforce diversity. By understanding how their existing workforce compares to their patient populations, health organizations can begin to develop concrete strategies to recruit and retain staff of color. Furthermore, partnering with other organizations taking on similar efforts, as well as capitalizing on the resources made available through state and federal workforce diversity initiatives, may be valuable as well.

To help assure that the health care workforce is both diverse and culturally inclusive, organizations, regardless of size, geographic location or current staff demographics, can contribute to the efforts. The combined impact of each organization's decision on whether or not to prioritize workforce diversity can help determine whether health disparities are perpetuated or eradicated.

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