Creating a Diversity Cabinet: Enabling Partnerships Across the Medical School Continuum

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Problem/Issue

Diversity activities at Stanford University School of Medicine are widespread and integrated into medical education curriculum, graduate education and graduate medical education student activities, as well as career development opportunities for faculty. This approach, in contrast to diversity efforts managed through one central location, is based on the philosophy that diversity and inclusion should be integrated directly into each trainee and faculty community. However, the approach can also lead to challenges related to duplication of efforts, communication of activities across the spectrum, and a lack of formalized interaction with senior leadership to ensure that diversity underlies each aspect of the academic medical center. We developed an approach to an integrated communication strategy to identify opportunities to leverage diversity partnerships.

Intervention Objectives

THE APPROACH

In 2014, a Stanford Medicine Diversity Cabinet was convened to review and coordinate diversity activities across the School of Medicine continuum and to share best practices as well as lessons learned. The Cabinet was comprised of representatives from the following educational units at the School: medical student admissions, medical student affairs, medical education, graduate medical education, graduate education, postdoctoral affairs, and faculty diversity in addition to membership from other leadership groups representing the Center of Excellence for Diversity in Medical Education, LGBTQ affairs, women in academic medicine, and school-wide diversity and inclusion initiatives.

Center of Excellence for Diversity in Medical Education



Medical students

Office of MD
 Office of Medical Student Affairs
 Admissions
 Stanford University Minority Medical Alliance (SUMMA)

Office of Graduate Education and Diversity Programs



- Biomedical Association for the Interests of Minority Students (BioAIMS)
 Biosciences Diversity Advisory Council (BDAC)
- **Diversity Cabinet**

Residents/Fellows

Graduate Medical Education (GME)
 Diversity Committee

Department of Graduate Medical Education



 Stanford University Postdoctoral Association (SURPAS)

Office of Postdoctoral Affairs



Faculty Senate Diversity CommitteeDepartment Diversity Liaisons

Office of Faculty
Development and Diversity

CABINET GOALS

- 1. To advise the Dean and School leadership on diversity and inclusion issues.
- 2. To play a key role in communicating and disseminating the School's diversity and inclusion programs, initiatives, and priorities to the broader community.
- 3. To coordinate among its members the activities supporting diversity in stakeholder units.
- 4. To advocate for diversity and inclusion within the school.

The Cabinet meets monthly during the academic year and its two co-chairs discuss Cabinet matters regularly with the School's senior leadership and directly with the Dean.















Diversity Cabinet

Members



member maintains oversight over their specific unit.







Organizational Impact

In October 2016, the Cabinet developed a formal Charge, to be approved by the Dean to formalize its role. The specific duties outlined within the Charge include reviewing and recommending actions to the Dean as regards the following:

- 1. Developing and monitoring of the School of Medicine diversity strategic plan.
- 2. Contributing to the School's initiatives on diversity. Providing insight on the role of diversity across the school's broader initiatives.
- 3. Reporting to School leadership, Dean, Vice Dean and Senior Associate Deans, on issues related to diversity and inclusion. This includes recommendations of responses to crises and providing safe space.
- 4. Engaging stakeholder groups, including medical students, graduate students, postdoctoral students, residents, fellows, and faculty, through formal and informal channels to maintain continual awareness of their needs.
- 5. Disseminating, coordinating and collaborating on activities across Cabinet constituent member groups.
- 6. Assisting the Dean in developing novel approaches to highlight diversity and inclusion in the School through internal and external strategic communications.

Pitfalls to Avoid

Conclusion

decentralized they are within the organizational system. When accountability for

diversity is dispersed, it can normalize diversity to be a part of everyday activities

for relevant trainee and faculty groups in academic medicine. However, this may

come at the cost of effective communication surrounding diversity activities,

coordination of efforts across groups, and formal interaction with senior

leadership on diversity-related issues. In this type of situation, a Diversity

Cabinet, comprised of leadership from all constituent academic groups and

empowered by the Dean, may be able to serve this role while each cabinet

Institutional structures related to diversity vary as to how centralized or

- Ensure that the Cabinet has a strategic plan of action to work towards in which all constituent members play a role.
- Assess existing resources and activities of each group represented on the Cabinet in order to identify baseline activities and ongoing goals.
- Do not let the many excellent ideas of a few members dominate discussions. Productive meetings are those in which all feel comfortable sharing ideas.
- While the group was established informally, the final step has been to formalize the role, including accountability and outcomes from the school leadership. A formal role is essential to having impact within the institution.

Implications for the Field

This model may ensure diversity and inclusion activities are cohesive, aligned, and communicated across groups within an organizational system. Ongoing assessment will demonstrate the impact of the Diversity Cabinet on advancing common goals in a collaborative and impactful way.

