

## Community Briefings and Conversations

### CHAT NOTES

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**What has been your most pressing issue in addressing the duality of issues we are now addressing in healthcare – managing the ongoing COVID-19 crisis and addressing the issues of health disparities and systemic racism that we have seen brought to light though and beyond this crisis?**

Maria Rivera: Realizing that I was silent too for too long.

Stephanie McHugh: listening is our first priority, listening and really hearing what is said

Kristen Ryan: Visitation restrictions are still really taking a toll on patients, families, and staff

Heather: The idea of the 'Old local culture" (north Georgia and the stereotypes attached to that) versus how many of us are new to the area

David Garrett: We haven't really experienced anything other than the pandemic - especially in terms of visitation restrictions.

Kendra Gustafson: keeping the human element in COVID and listening to all to learn what we can do better

Gayle Novack: Although it is overwhelming, we cannot fully separate police brutality, racism, and health disparities. They are intertwined and we must address now.

Della: I feel racism is a separate issue- that has been overlooked for too long

Jaylee: That we aren't learning from these experiences and putting processes and technologies in place to plan for and prepare for the future

Heather: How are staff allowed to speak their truth on social media vs balancing being on the right side of history

Trina Skeelee: Racism extends along all cultures and especially among our Native American Indians.

Grace I.: Compassion

Jocelyn Sese: As leaders, we are in the position to lead and unify the team. As we worked side by side with our team during the pandemic, we should engage our staff to remember working as a team, with all different colors.

Deborah Sanders: My most pressing issue has been the hope leadership will move beyond demonstrations of support, while so vital to show our communities they're listening, to action

Mary Hoey: Treat everyone like the unique individual she/he is will go a long way to be successful working side-by-side with all team members.

David Garrett: Personally, I have found that it is best to stay away from social media as much as possible.

Mallory: Establishing a task force for diversity, inclusion, and belonging may be key in ensuring that practices, policies, and environmental considerations are being upheld in a safe and inclusive space.

Rob R.: Celebrate the talents that individuals bring to the table.

Lisa Danielpour: As a patient family advisor in Cleveland I want to learn strategies health systems and leaders are using to address SDOH and be an ally against racism, supporting and helping as best I can.

Heike Bens Sofia: we should take a look at what kind of care those need who are marginalized. it is a time to take risk and advocate for those who are not receiving the same care due to race or poverty. Health care leaders and all health care professionals must be very courageous and face opposition to equality.

Heike Bens Sofia: it's time to speak up and put it all on the line on a daily basis

**What do you believe the opportunities we have in healthcare to address real impact of health disparities and the systemic racism we see in healthcare today? Where can and must we focus on in taking steps to address this issue?**

stephanie hillman: transparency of data around disparities

stephanie hillman: then act

Rocío Torres Mora: Demographics of your patient experience department.

stephanie hillman: yes to reflecting community served

Liz L: I think we can be better at using data to identify disparities to separate the reality of treatment from our own perception of how we provide treatment

Kellie Wilson: I think there needs to be a more intentional focus on education about health equity and health literacy. It's often treated as a 'nice to do' rather than a 'need to do'.

stephanie hillman: engagement of community providers to partner on the full continuum of care

Natalie Perez: in addition to the data using community partnership

Sarah 2: what's being done to recruit for more diversity in med schools?

Alex: true representation/diversity in leadership and focus on hiring practices system-wide that honor mirroring the community

David Garrett: We have an outstanding senior leader who focuses on social determinants. It has always been a priority here.

Jeanne L: Recognizing that there are 'intangibles' that tell a story about perceptions and care delivery, in addition to what the data shows

Rocío Torres Mora: Bringing different voices to your patient experience department will help us understand what our patients are telling us. Starting in our own domains will help us model initiatives for other areas in healthcare

stephanie hillman: @sarah2 - there are so many diverse providers in our country who aren't allowed to transfer their credentials to the US system.

Natalie Perez: agree Stephanie not just community health providers but also community leaders who can broker to build trust

Deborah Sanders: preparation of the workforce for interpersonal care of those who do not share your experience, practicing of cultural safety, self-awareness, greater diversity in our human resources, recruiters, and leadership. Patient experience with the input of patients, especially for community education and outreach

Denise Venditti: agree with Rocio - let's start with ourselves first

Natalie Perez: yes @Deborah sanders great list

Sonya Fleming: Admit that we don't know everything - be ready to listen to learn so we can act

Sarah Krug: Greater diversity on PFACs to truly understand challenges of the communities we serve.

Heike Bens Sofia: there is so much research and data available. How can we use the information we have across the country and establish some standards for care that must be followed by legislation? We know what needs to be done and have the data, but how can we improve accountability?

Linda Soars: walking together in a cultural way and listening to the community voice is a way to align our resources and responses to the health needs in a locality

Rob R.: It's all about leaders taking care of the people under their charge, no matter where they come from.

Maria Rivera: Diverse representation in PFACs is a great opportunity.

Grace I.: Compassionate culturally competent care practiced across board.

Natalie Perez: make it part of our strategy and strategic imperatives

**What does/should a true focus on the human experience in healthcare look like? In that light, what must we all be doing to address the issues that have been elevated in the last two weeks?**

stephanie hillman: building trust through relationships

Maria Rivera: Humility - I believe it is about treating people the way THEY want to be treated - not just the way we want to be treated.

Stephania Pemberton: Jason Wolf is addressing the issue head-on when he said -'It's one thing to call it out; it's another thing to actually do something'!

Kellie Wilson: Psychological safety and a focus on encouraging important and difficult conversations.

David Garrett: Open, two-way dialogue with true empathic listening while reducing emotional reactions.

Sonya Fleming: Stephanie Hillman - I agree. Building trust through relationships

Trina Skeele: I think the first thing to do would be to put aside our differences and build trust and follow through on what is promised to the people we serve. Leave no culture behind!!

Rocío Torres Mora: Start with ourselves. We must do the work ourselves to better serve our community. Be honest, be brave. Call it "systemic racism" rather than "the issue". Our humility and honesty will be crucial to the sustainability of this movement.

Mary Hoey: Treat each patient in the same manner as the people we love, such as family....

Rob R.: We must treat everyone, including patients and each other as an individual. Listen to their concerns and try and understand, so we can take each one as unique.

Stephania Pemberton: Trainings in Implicit Bias are critical to making progress in this arena

Joyce Nazario: Human experience is not just patient experience. This includes us as the healthcare providers and stakeholders in the community. A true focus would be meeting the needs of all stakeholders. Specifically addressing equitable access of care for the patients, fair compensation and mental health support for the providers and education and engagement of the surrounding community

Heike Bens Sofia: i love what you said about appreciating each person as they are when you thought it was good enough to say "I don't see someone's colour" its all about love and caring the person as they are.

Mallory: <https://implicit.harvard.edu/implicit/>

Kerri Sechman: I said, "That very thing, I so not see color, meaning I treat everyone the same." My enlightened 30 year old kids shared w/ me my privilege as being a white person vs the black lives and what they deal with every day. I honestly was not sensitive to this plight before now. Not that I did not care, but unaware of the level of despair for blacks now. Where I live we had one black person in school etc.

Heather: The accountability and having those conversations is a muscle that not everyone exercises.

Stephania Pemberton: GREAT RESOURCE Mallory!!!!!!!

Grace I.: Compassionate culturally competent care practiced across board.

**As we not only work to identify, but address these issues impacting the human experience in healthcare, how do we ensure these are sustained conversations with lasting outcomes and not just lost in the next news cycle?**

stephanie hillman: #whitesilence - working to change

Maria Rivera: VISIT communities where the population and people look different than me. Talk to people.

stephanie hillman: dare I say - vote

Mallory: a task force or committee for diversity, inclusion, and belonging

Sonya Fleming: Individual commitment / Organization commitment / Leader to own it and not let it die

Maria Rivera: VISIT communities where people look different than me. Talk to Black people - ask them to guide my actions.

Cherie Lytle: Such a great point about hospital boards. Thank you for this excellent dialogue.

Joyce Nazario: I believe the only way to keep sustained conversations is to actually put them in the organizations KRAs and KPIs. By creating KRAs and KPIs related to important conversations, these are brought to our attention periodically and our actions can be measures

Natalie Perez: make it part of our strategic imperatives and governance

Sonya Fleming: Just because it is hard, doesn't mean we get a pass

Heike Bens Sofia: can we set national KRA's and KPI's, agreements between partners in communities, regions, geo areas and nationally?

leah abbondandolo: It can start by displaying signs and different ways of support in our local markets, local "mom & Pop" places, malls, etc...

leah abbondandolo: Displaying signs, illustrations, and different unique ways to show support will be a constant reminder of this movement and to continue to do better

leah abbondandolo: Our children are the future, so perhaps allowing our children to create illustrations and adding them to our local stores that are visited often

Maria Rivera: Marsha - thank you for spelling it out clearly. Sometimes I don't know what are the right or wrong actions. "We just need to be brave!" Love it.

Heike Bens Sofia: yes, time has passed. it's time to be brave. it is costly. it's you and me taking the risk, let the words fall out! yes!

Trina Skeelee: Between the Black communities and the Native American communities we have been suppressed for way to long, and yes it is time for change.

T H E B E R Y L  
I N S T I T U T E

David Garrett: We need to teach our children to love and respect everyone.

Courtenay Spalding: Our voices are one of the most powerful tools we have - excellently stated Marsha

Fatema Begum: Powerful closing words Marsha!

Kerri Sechman: Inspirational the both of YOU!

Marjorie Nelson: Wow. what a great perspective and excellent ideas. Thank you for this relevant and important content

Heike Bens Sofia: Beryl Institute please bring us together in a concerted effort across the country. we need your leadership to give us a voice

stephanie hillman: thank you for this conversation, guidance, and bravery. here's to each of you humans to act!

Maria Rivera: And if you speak more than one language, please dare to have these conversations in other languages as well. It's pretty inspiring!

Meg Samples: Thank you - this is moving and a great way to close

Melanie Cubbison 2: 8'46" love this! thank you both!!