

2020 Joint Accreditation Leadership Summit

"Addressing Diversity in IPCE" Chat Log

00:37:57	Teri Valls:	good morning Marcia!
00:38:26	JA - Kate Regnier:	Morning everyone!!!
00:38:53	Vicky Binder:	Good morning from Dallas Texas!
00:38:56	Tracey Simon- MedStar Health:	Hello- From the DC Metro area!
00:38:58	ACCME Communications:	Good morning from Massachusetts and happy Friday!
00:38:58	raegan:	Good morning from rainy NJ!
00:38:59	Sharrie Cranford, LICSW, PIP, MS:	Hello. This is Sharrie from Mobile, Alabama.
00:39:00	KastD:	Good Morning from Dallas, Texas
00:39:01	Fiza Scaletty:	Good morning from St. Louis, MO!
00:39:02	diana durham:	Heat wave here in Southern CA!
00:39:02	Jill Phillips:	Good morning from Indianapolis - IUSM
00:39:07	Angela Willson:	Mpls!
00:39:07	Cynthia Ballow:	Good Morning from San Diego, CA
00:39:10	Carla Jones:	Good morning from Oklahoma! TGIF!!
00:39:10	*Laura Werts - Cincinnati Children's:	Cincinnati!
00:39:11	Jan Schultz':	TGIF from Colorado
00:39:11	Leila Amir Soleimani:	Hi from Indiana, IU School of Medicine
00:39:14	Amy Bernard:	Good morning from Princeton, New Jersey. Its good to see everyone!
00:39:15	JA - Chris Kralik CDR:	Good morning from chilly Chicago!
00:39:18	walter.lewanowicz @vcuhealth.org:	Richmond, Virginia
00:39:19	Jen Demes:	morning from a smokey santa rosa, ca
00:39:20	Christopher Dennison:	Hello from chilly KY
00:39:20	Mary Grimm:	Good morning from Hudson, WI
00:39:21	Annette Donawa:	Good morning from Maryland and Philly.
00:39:21	Kim DuQue Urdialez:	Good morning from San Antonio! :)
00:39:21	cmowad:	central PA
00:39:23	Lynne Davidson :	Not so sunny South Florida
00:39:24	Lisa Bally:	Good morning from Omaha NE
00:39:24	Watkins, Melissa:	Good morning from Northwest Ohio, a beautiful fall day here!
00:39:27	NKF CME cmeinfo@kidney.org:	Good Morning from NYC!
00:39:29	Kurt Snyder:	Planet Earth
00:39:31	Concetta Phillipps:	Good morning from Chicago! It is chilly!
00:39:38	M. Jane Swartz:	Sunny in southern Indiana---fall day.

00:39:40	Heidi Keeler:	It is cold in Omaha too
00:39:47	Belinda Spatola:	Good Morning from New York
00:39:49	Mary Strong:	does that mean its heading here to New York?
00:39:51	Jay Ripley:	Good Morning from West Virginia!
00:40:02	Tricia Wilson:	Good morning from rainy Allentown, PA!
00:40:03	Tonya Fuller:	Good morning from Nashville, TN - HCA Healthcare
00:40:19	Sarah Carmody:	Good morning from Delaware
00:40:23	Traci.Bryant:	Happy Friday from Maryland!
00:40:28	JA - Melody Cohn (she/her):	Good morning! Materials are available at : jointaccreditation.org/2020-joint-accreditation-leadership-summit
00:40:43	SueAnn Macellaro:	Good Morning from NYC
00:41:00	Lisa Casler Haun (ASWB):	Hi from Virginia and ASWB!
00:41:31	diana durham:	YAAY Toni!!!
00:41:42	Rokeena Williams:	Morning from Indianapolis, IN!!!
00:42:08	Grisi:	Good morning :)
00:42:42	Sheila Hall:	Good morning from Dallas, Texas
00:42:44	JA - Marcia Martin:	**If you haven't already, you can access the worksheet for this session and open it or print it at jointaccreditation.org/2020-joint-accreditation-leadership-summit **
00:42:46	Debra Wieckert:	Good morning from Indianapolis
00:43:59	JA - Marcia Martin:	Sorry - it grabbed the asterisks – jointaccreditation.org/2020-joint-accreditation-leadership-summit
00:47:56	Vicky Binder:	link says page unfound
00:48:18	JA - Melody Cohn (she/her):	Please be sure to use this link: jointaccreditation.org/2020-joint-accreditation-leadership-summit
00:48:19	JA - Marcia Martin:	Here is the link again to the JA Summit page – jointaccreditation.org/2020-joint-accreditation-leadership-summit
00:48:25	Tamar Hosansky, JA:	www.jointaccreditation.org/2020-joint-accreditation-leadership-summit
00:49:18	JA - Melody Cohn (she/her):	Here's the worksheet link: https://jointaccreditation.org/sites/default/files/2020_10_02_JA%20Summit_Addressing%20Diversity%20in%20IPCE_Worksheet.pdf
00:49:53	Tamar Hosansky, JA:	Or go to JA homepage and look under resources tab. https://www.jointaccreditation.org/
01:02:40	JA - Melody Cohn (she/her):	Use provided prompts and share ideas/strategies based on the scenario that you identified at the start of this session: 1. Unclear about what diversity *really* means 2. Lack of institutional support &/or resources 3. Unsure how to address diversity based on our programs 4. Other
01:22:07	Lynne Davidson :	Thank you ladies in room 24
01:22:17	JA - Marcia Martin:	https://www.apa.org/about/apa/strategic-plan

01:22:23	Rokeena Williams, Stanford:	Great job team in Room 16!
01:22:33	Lisa Bally:	We think there is great opportunity in working with course directors to incorporate health disparity and IPCE at the planning stage of programs.
01:23:11	Sharrie Cranford, LICSW, PIP, MS:	Super group #17 believes we should add a checklist to our planning documents encouraging people to address diversity as well as health inequities. We would like help with creating a question to address these.
01:23:20	jeanne hosler's iPhone:	Diversity & inclusion: gender affirming care is important esp in pediatric facilities.
01:23:56	Molly Cohen:	We are curious about your thoughts on the President's executive order on diversity.
01:23:58	Lisa Casler Haun (ASWB):	A resource from social work that might be helpful to others is the National Association of Social Workers Standards and Indicators for Cultural Competence in Social Work Practice https://www.socialworkers.org/LinkClick.aspx?fileticket=7dVckZAYUmk%3d&portalid=0
01:24:20	Vicky Binder:	a couple of people in our group asked - are you looking for us to incorporate diversity into activities, or to develop activities specifically to address diversity?
01:24:26	Angela Willson:	Challenges with recruitment and communication with diverse reps on faculty, planning, and patient advisory panels. Recommendations: have a designated officer responsible, adding evaluation questions related to get feedback for faculty/planners
01:24:34	Michelle Bruns:	1. Cultural Awareness, importance of diversity in profession, planning committee and presenting faculty, as well as content development. 2. There are many medical associations for the professional diversity; collaboration with these group in development and creation of content. Collaborate for Needs Assessment and surveying, as well distribution of educational activities. 3. Include cultural awareness as well as diversity in case studies, addressing SDOH for the patient and appropriate team for delivery and management of patient.
01:24:36	Tricia Wilson:	We discussed ensuring that all topics include discussions of diversity, interprofessional team themes, health equity and social determinants of health...as these apply in every clinical area. We also talking about ways to include more diversity in our planning teams/faculty/CE committees
01:24:55	Heidi Keeler:	Can we get a copy of the chat info? It is great!
01:25:31	JA - Kate Regnier:	@Heidi you can save the chat by clicking the three dots in your chat box. Agree, great info/suggestions/questions!!!
01:25:33	Christopher Gusack:	The group I was in had a lively discussion and the other members provided great guidance as to what they and their organizations have or are developing....that discussion was very helpful to me for me and the rest of our team.
01:25:40	JA - Melody Cohn (she/her):	Yes! You'll be able to download the chat using the menu at the bottom of the chat screen.

01:25:43	JA - Marcia Martin:	@Heidi - yes! You can actually save the chat before we end by clicking on the button with the 3 dots. We will also be saving the chats and sharing the discussions after the meeting
01:25:48	Catheline Huynh-lam:	<p>We discussed about the differences of diversity to other ideas. It is not the melting pot analogy; diversity is like a salad in which each individual contributes their own flavor. We cannot generalize but celebrate the differences to what we bring.</p> <p>Diversity would start from the very beginning at the start on conception of Accreditation through a Job Aid (a document that highlights the process and requirements of JA). So that the faculty would be encouraged to include diversity into their education.</p>
01:26:11	Diana Durham:	Our group was very concerned about the recent Executive Order halting training in diversity in the Federal agencies. Concern about does that include those who hold contracts-- how do we deal with that-- put our blinders on and forge ahead and do the right thing. Discussed adding to our existing required Bias Elimination courses with small break out groups to get discussion and community building. In CA, Cultural and Linguistic Competence is required but tends to be a check box-- could build out more
01:26:11	Jessica Burkybile:	One idea from another member in group 20, which we've also covered at my organization, is a discussion amongst providers/clinicians on how to deal with discrimination that comes from patients.
01:26:11	Jodi:	Consider having an editorial function set up for specifically looking at how you craft your programming related to diversity and using a tool to eliminate implicit bias (available online). Harvard has an implicit bias questionnaire that could be a starting place. Be intentional about including diversity on your nominating committees and boards
01:26:29	Sterling North:	We are more accustomed to achieving diversity at the 10,000 foot level through the composition of the CPD oversight committees that we have established. Achieving diversity at a more granular level represents a new challenge for our CPD program.
01:28:18	Barb Anderson, UW Madison:	We currently "give credit" financially for activities are helping us meet any of the commendation criteria, including patients as planners and presenters, for example. Our approach related to inclusion is to provide guidance throughout the planning process consistently.
01:28:21	JA - Kathy Chappell:	I really like Toni's suggestion of an intentionally thoughtful approach without being prescriptive. As someone suggested, including a check box on a planning form that reminds planners to think about diversity, equity and inclusion - ex. are the individuals that I have chosen to represent planners and faculty representative of the target audience (learners, patients, families, communities, populations) we serve.
01:28:27	Jessica Burkybile:	We used to have the following question included in our CE Activity Planning Document: "What cultural needs were considered during the planning process, related either to the learner or to the patients?"

01:28:28	Tracey Simon-MedStar Health:	Group #19- Identify what barriers exist in your workplace and identify strategies; concern about worrying this is a passing fad, how do we ensure these programs remain in place moving forward; providers need to understand the Pt Pop and craft specifics on how to address, can't be a blanket approach. Embrace the topic, while it may be uncomfortable for people to address and discuss, the work must be done. Diversity can be ambiguous to people, so must create sustainable planning/and check process.
01:28:39	Mila Kostic:	We should also be evaluating inclusion and diversity across our programs. Faculty development is an important issue here.
01:28:46	JA - Chris Kralik CDR:	Geographic locales dictating what learners bring and leave with. Systemic structures and strategic plans prompting impetus for forward motion and implementation. Evaluation and feedback being limiting factors in assessing 'take aways'. (eg 'not a checkbox). Levering tech (polls) that stimulate conversation during educational sessions vs. program evals.
01:28:50	Diana Durham:	I agree with Sterling's point-- our clinicians are diverse in CA, so should be our presenters and faculty and deliberate inclusiveness
01:29:11	Carol Johnson:	Our group had a great discussion about diversity in our practice settings and how we could make change within our job roles - what we had control over, how we could alter our workplace's approaches, what we could do, be it big or small, to encourage change.
01:30:16	Lisa Casler Haun (ASWB):	Our group discussed the need for some professionals who have been in the CE field for a while to be able to attend classes created just for CE professionals to help them learn more about how to encourage and evaluate diversity and have an even better understanding themselves of all aspects of diversity as they may not have gotten this in their formal education at the time they went to school.
01:31:18	Jessica Burkybile:	We changed that to now ask a question about factors beyond clinical care. What factors (real or potential) exists beyond clinical care that affect the health of patients do you plan to address in this activity? Answers include health disparities, cultural beliefs/practices, etc.
01:32:36	JA - Toni Minniti (APA):	Please clarify how you sufficiently attend to issues of diversity in your programs (e.g., an articulated description of your process) with respect to: (a) developing content that respects and educates participants about issues related to diversity; and, (b) selecting instructors who both promote participant mastery of specific strategies and behaviors that enhance inclusion of diverse populations, including those from underserved and minority populations; and also create professional environments that promote diversity.
		The response included examples and affirmations that this was/must be attended to, but it did not articulate how this was done for content or instructor selection (such as the role of your program planning

		committee in reviewing materials, use of checklists, evaluation data, etc.). Please see our application support materials related to this criterion on our resources website (http://www.apa.org/ed/sponsor/resources/understanding-addressing-diversity).
01:34:21	Kurt Snyder:	It would be great if ACCME and JA added this to their respective commendation menu to push providers to do more in this area.
01:35:04	JA - Kate Regnier:	@Kurt definitely worth discussing. Thanks.
01:35:06	Jessica Burkybile:	Toni, I think you bring up a fantastic point as I feel we are very strong at addressing issues of diversity in the content of our programs, but I can't say that is consistently the case in our planning process (i.e. identification of speakers).
01:35:16	Jessica Burkybile:	@Kurt agreed!
01:35:20	Amy Bernard:	Our group discussed how to incorporate diversity into IPCE activities by starting with looking at "at risk" populations and barriers to care
01:35:22	Tracey Simon-MedStar Health:	Great topic, thanks Toni!
01:35:44	Diana Durham:	Toni you are awesome
01:35:47	Concetta Phillipps:	Great topic and interesting presentation. Thank you Toni!
01:37:06	Lisa Casler Haun (ASWB):	Thank you Toni!
01:37:32	Brenda Ram:	If someone is capturing the chats - would you be willing to share as I am not able to capture.
01:37:32	Jan Wong:	Thanks, Toni! Outstanding information.
01:37:36	Sheila Hall:	Great presentation and discussion....Thanks!
01:37:52	Christopher Gusack:	This was a really good and helpful group both by Toni's presentation as well as the breakout.
01:37:54	Annette Donawa:	Thanks Toni! Diversity and inclusion has to be meaningful and intentional.
01:38:44	JA - Chris Kralik CDR:	Really appreciate your resources Toni!
01:39:04	Kathleen Matikonis:	Thank you for the resources!
01:39:28	Concetta Phillipps:	These resources are super exciting. Looking forward to the development of those resources Toni!
01:39:46	Lynne Davidson :	Thank you so much Toni
01:39:47	Jessica Burkybile:	This was a fantastic session! Thank you Toni!
01:39:58	Vicky Binder:	thank you for these resources
01:40:07	JA - Toni Minniti (APA):	Thank you, everyone!
01:40:18	Tamar Hosansky, JA:	Thank you, Toni, for a thoughtful and helpful discussion!
01:40:31	JA - Kate Regnier:	So appropriate for our theme "The Transformative Value of IPCE!" Thanks, Toni and all!
01:41:09	raegan:	Thank you!