

Beth Israel Lahey Health



Beth Israel Lahey Health Diversity, Equity and Inclusion Progress Report

February 2023

A Message from Juan Fernando Lopera, Chief Diversity, Equity and Inclusion Officer

I am pleased to share the progress we have made over the past year to advance our commitment to diversity, equity and inclusion (DEI) across Beth Israel Lahey Health (BILH). In 2022, we successfully established the BILH DEI Office, including the hiring of an executive director to support system-wide DEI priorities and a health equity leadership dyad, comprised of a vice president and medical director for health equity, to focus on eradicating health disparities across our patient population.

As a system, we embrace and deliberately incorporated DEI into Blueprint 2030, our long-range strategic plan, our new BILH purpose statement and values, as well as our triennial Community Health Needs Assessment (CHNA). We set out to define BILH's purpose statement and a set of shared values with input from diverse voices from every level of our organization. Embodying this shared purpose and these values — as both individuals and as a health system — will help us be the organization we want and need to be for our patients, our workforce and the communities we serve.

We also established measurable outcomes goals for diverse leadership representation, for closing health disparities in diabetes care and for expanding contracts with diverse suppliers and vendors. We met and exceeded two of the three established goals and continue to build the necessary infrastructure and resources to accelerate our progress. We recognize that the journey towards equity is long and requires engagement from within the organization and in the community, but we are committed to making measurable progress through deliberate and relentless action. We are thankful for all of those who make an impact every day towards achieving our DEI vision to ***“Transform care delivery by dismantling barriers to equitable health outcomes and become the premier health system to attract, retain and develop diverse talent.”***

Juan Fernando Lopera

Chief Diversity, Equity and Inclusion Officer
Beth Israel Lahey Health

For questions, comments or suggestions, please email dei@bilh.org.

BILH Purpose and Values

We create healthier communities—one person at a time—through seamless care and ground-breaking science, driven by excellence, innovation and equity.



Wellbeing

We provide a health-focused workplace and support a healthy work-life balance

Empathy

We do our best to understand others' feelings, needs and perspectives

Collaboration

We work together to achieve extraordinary results

Accountability

We hold ourselves and each other to behaviors necessary to achieve our collective goals

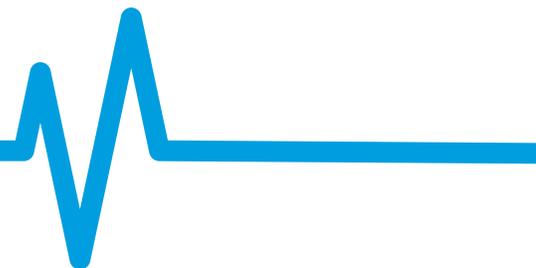
Respect

We value diversity and treat all members of our community with dignity and inclusiveness

Equity

Everyone has the opportunity to attain their full potential in our workplace and through the care we provide

We Care



Meet Our Team



Juan Fernando Lopera
Chief DEI Officer



Joseph Baylon
Executive Assistant



Leonor Fernandez, MD
Health Equity
Medical Director



Adelline Ntatin
Vice President,
Health Equity



Bethany Serota, Esq.
Executive Director,
Boston/ South, DEI



Daniele Olveczky, MD
Faculty Director,
Office of DEI, BIDMC



TBD
Executive Director,
North, DEI



Kwadwo Ofosu-Barko, MD
Director of UIM Trainee
Recruitment, LHMC



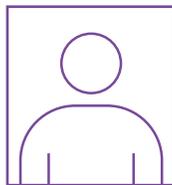
Nancy Kasen
Vice President,
CB & CR*



TBD
Project Coordinator,
DEI



TBD
Analyst,
Health Equity



TBD
Program Manager,
Health Equity



Shannon Theriault
Program Manager,
DEI, BIDMC

* Community
Benefits &
Community
Relations
Department

Center for Health Equity Research and Innovation at BIDMC and BILH

The DEI Office at BILH will collaborate with this new center to advance organizational health equity priorities.

Quality Health Equity Committee (QHEC)

Steers system-wide health equity agenda and long-term goals to eradicate disparities in health outcomes within our diverse population of patients.

DEI Advancement Board

Committee comprised of local DEI champions across the system, focusing on sharing best practices and driving collaboration towards common DEI goals.

Progress Updates

In Fiscal Year 2022 (ending September 30, 2022), we made notable progress on our three primary DEI goals.

Goal Description	FY22 Results
<p>Talent: Long-term Aim: To have a workforce that mirrors the increasing diversity in the communities that BILH serves, with a focus on representation in leadership and care delivery roles.</p> <p>FY22 Goal: Achieve a significant increase in Black, Indigenous and People of Color (BIPOC) representation among new leadership hires (directors and above) with an aim of at least 20% representation.</p>	<ul style="list-style-type: none"> • We exceeded goal by achieving 22% representation in new BIPOC hires for leadership positions, directors and above. • Overall BIPOC representation, across the approximately 1,000 directors and above, increased by 2% points or about 20 additional BIPOC leaders. • Additionally, we achieved significant gender representation with 56% female for new leadership hires.
<p>Patients: To eradicate disparities in health outcomes within our diverse population of patients.</p> <p>FY22 Goal: Conduct racial/ethnic disparity analysis (comparing racial/ethnic minorities to the white reference group) for a measure of diabetes care, with an aim to reduce the racial/ethnic gap by 20% over 2021 baseline.</p>	<ul style="list-style-type: none"> • Our analysis demonstrated modest overall improvement in Hemoglobin A1c outcomes and significant improvement for patients with missing A1c tests, among Black and Hispanic patients. • We initiated foundational health equity infrastructure that positions BILH well for increased transition to pay-for-equity, value-based public and private payer contracts. • Efforts resulted in \$2 million grant from BCBSMA and \$1 million from Point32Health; additional pay-for-equity incentives start in 2023 (\$18 million from MassHealth).
<p>Community: Long-term Aim: To expand investments in underrepresented communities to close socio-economic disparities that impact population health.</p> <p>FY22 Goal: Increase spend with diverse suppliers by 20% over FY21 baseline.</p>	<ul style="list-style-type: none"> • We surpassed the 20% FY22 goal by achieving a 28% increase in spend with minority-owned businesses (MBE)/women-owned businesses (WBE) and a 44% increase in overall supplier diversity spend, when including veteran-owned businesses. • Supplier Highlight: MBE Tronex, glove supplier, was in use only at Mt Auburn Hospital and was expanded system-wide resulting in savings of \$0.5M in FY22 and approximately \$1.6M in FY23.

In Fiscal Year 2023, we are expanding on the same three DEI areas of focus: talent, patients and community.

Our DEI goals for Fiscal Year 2023 include:	
Leadership and Clinical Hires:	Increase BIPOC representation among new leadership (directors and above) and clinical (physicians and nurses) hires with an aim of at least 25% representation.
Diabetes and Hypertension Disparities:	Achieve a 25% reduction in the racial/ethnic disparities in diabetes (HbA1c control and DM BP*) and hypertension (HTN BP control*). *HbA1c: Hemoglobin A1c blood sugar level; DM BP: Diabetes mellitus blood pressure control; HTN BP: Hypertension blood pressure control
Supplier Diversity:	Increase spend with diverse businesses by 25% over the previous fiscal year.

DEI FY23 Workplan

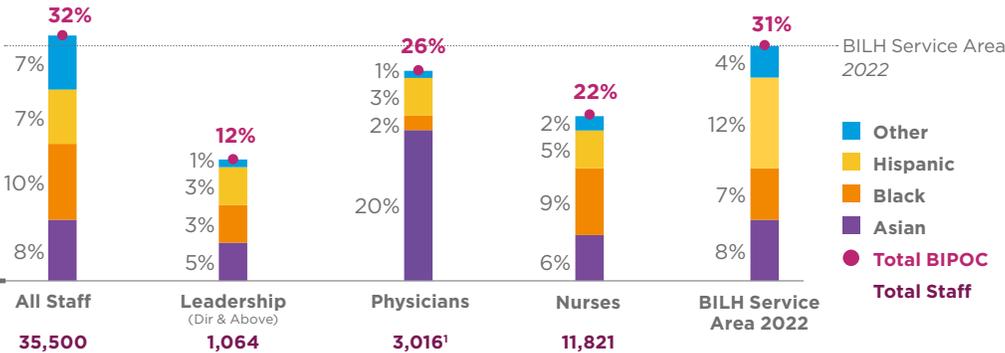
We have established a comprehensive set of priorities for Fiscal Year 2023 to support system DEI goals and have begun developing a set of measures to track progress.

Goal Description	
 <p>Talent</p> <p>Workforce DEI Indicators:</p> <ul style="list-style-type: none"> - Candidate Slates - Hires - Turnover - Promotions - Pay - Employee Engagement - Discrimination Incidents 	<ul style="list-style-type: none"> • Hiring: Deploy diverse slate policy and inclusive hiring guide. • Partnerships: Expand relationships with DEI search firms and associations focused on DEI development and pipelining for health care administrators, physicians and nurses. • Pipelining: Expand pipeline programs for underrepresented in medicine (URiM) medical students, interns, residents and fellows, as well as programs and internships for healthcare administrators. • Policies: Deploy system-wide anti-discrimination policy and code of conduct. • Survey: Incorporate DEI into system-wide culture of safety employee survey. • Learning: Expand system-wide DEI learning, in alignment with enterprise learning management solution. • Development: Establish upskilling programs for early career and leadership development for diverse talent. • Local Support: Support creation or expansion of local DEI committees/resource groups. • Observances: Deploy year-long DEI observances and cultural celebrations.
 <p>Patients</p> <p>Health Equity Indicators:</p> <ul style="list-style-type: none"> - Patient Diversity - Health Disparity Dashboard - SDoH Measures - Representation in Trials 	<ul style="list-style-type: none"> • Infrastructure: Enhance standardization and completeness of patient demographic data, particularly as part of the EPIC electronic medical record (EMR) design. • Analysis: Establish and disseminate health disparity dashboards across the system. • Interventions: Focus on diabetes and hypertension disparity reduction and track program outcomes. • CHERI: Establish the Center for Health Equity Research & Innovation. • External: Advance health equity external priorities (e.g., MassHealth, BCBSMA, Point32Health, The Joint Commission).
 <p>Community</p> <p>Supplier Diversity Indicators:</p> <ul style="list-style-type: none"> - Supplier diversity spend - % of overall supply chain spend with diverse suppliers 	<ul style="list-style-type: none"> • Infrastructure: Establish robust supplier diversity program, analytics infrastructure and dedicated resources. • Partnerships: Expand partnerships with diverse suppliers, through supplier diversity trade organizations. • Policy: Deploy system-wide policy to expand opportunities for diverse suppliers and vendors.

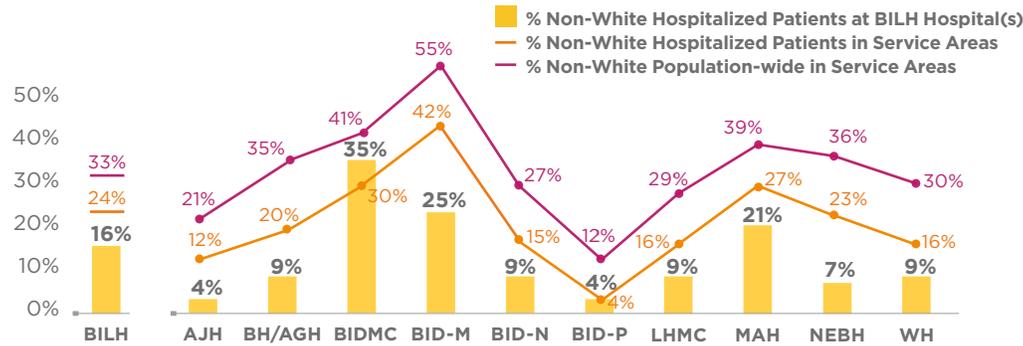
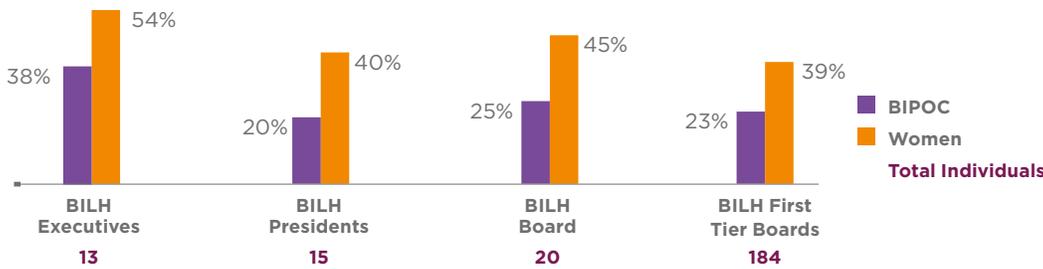


DEI Scorecard

Goal: To provide increased transparency and inform progress over time, using key DEI metrics for workforce, patients and suppliers.



Source: HR Data as of August 2022; ¹ Includes Harvard Medical Faculty Physicians



*Source: MA Center for Health Information and Analysis; 2021 Acute Hospital Inpatient Discharge Dataset; Non-White patient definition includes all races and ethnicities except White (Not Hispanic or Latino) and "Unknown" based on CHIA race/ethnicity classifications
 **BILH: Beth Israel Lahey Health; AJH: Anna Jaques Hospital; BH/AGH: Beverly Hospital and Addison Gilbert Hospital; BIDMC: Beth Israel Deaconess Medical Center; BID-M: Beth Israel Deaconess Hospital - Milton; BID-N: Beth Israel Deaconess Hospital - Needham; BID-P: Beth Israel Deaconess Hospital - Plymouth; LHMC: Lahey Hospital & Medical Center; MAH: Mount Auburn Hospital; NEBH: New England Baptist Hospital; WH: Winchester Hospital

Workforce Representation:

We want our workforce to mirror the increasing diversity in the communities we serve. Analysis shows the most opportunity to increase representation exists within our Black and Hispanic talent.

Senior Leadership and Board Representation:

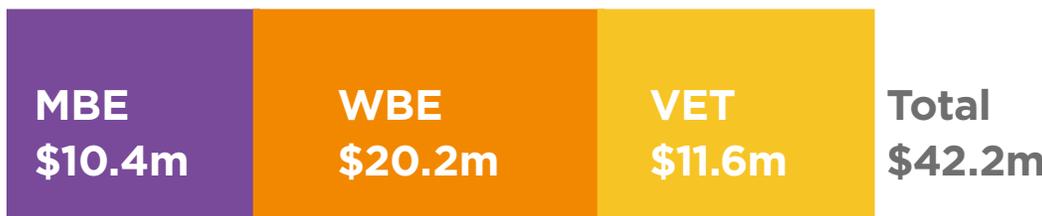
While we continue to strive for increased representation, we are pleased about the strong foundation of diverse leaders across the BILH executive team, hospital and business unit presidents, as well as our BILH and hospital Boards of Trustees.

Patient Diversity:

Based on 2021 data, 16% of patients hospitalized across BILH were racially/ethnically diverse, compared to 24% for diverse patients hospitalized in BILH's Service Area and 33% population-wide diversity in the service area.

Supplier Diversity:

Total spend with diverse suppliers for Fiscal Year 2022 was \$42.2 million, representing a 44% increase over Fiscal Year 2021 spend.

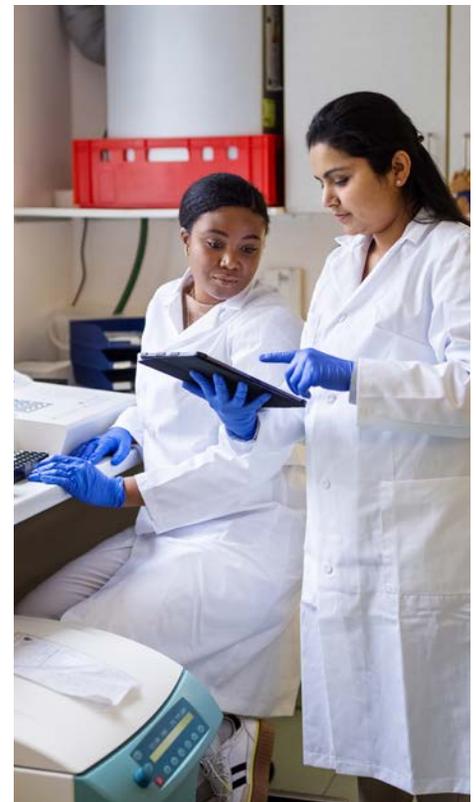


*\$s in millions; **MBE: Minority-owned Business Enterprises; WBE: Women-owned Business Enterprises; VET: Veteran-owned Business Enterprise

DEI Highlights

Recognizing that DEI efforts occur across and throughout our system, we would like to share additional highlights that demonstrate our commitment to and progress toward a culture that embraces DEI.

- Health Equity: BILH continues to build its health equity infrastructure and is actively involved in various external priorities to address health disparities. These efforts include:
 - BILH implements [MassHealth](#) 1115 Waiver Components: Massachusetts received approval for a five-year \$67.2 billion agreement from the Centers for Medicare and Medicaid Services (CMS) for the MassHealth 1115 Waiver which expands the program through December 2027. The program brings a new focus on advancing health equity, with \$2 billion towards closing disparities. The program has significant financial and program implications for BILH and is well-aligned with the system's strategic focus to eradicate health disparities. A system-wide program implementation structure is underway to manage planning and implementation of the various components of the 1115 Waiver.
 - BILH Signs Agreement with [Blue Cross Blue Shield of Massachusetts \(BCBSMA\)](#): BILH is one of four major health systems to sign an agreement with BCBSMA to incorporate health equity measures into the existing accountable care arrangement. This follows [initial grant funding](#) received by BILH, as part of BCBSMA's Equity Action Community initiative, to establish infrastructure and resources, including health navigators, to address disparities in diabetes and hypertension.
 - Participation in [Executive Office of Health and Human Services \(EOHHS\)](#) Taskforce: The Massachusetts Quality Measurement Alignment Task Force released a recommended health equity measure accountability framework and a set of data standards for use by all payers and providers across the Commonwealth in global risk-based contracts. BILH representatives served as task force members and EOHHS recommendations are part of BILH's health equity strategic plan.
 - Health Equity Priorities for [The Joint Commission \(TJC\)](#): Effective January 1, 2023, new requirements to reduce health care disparities will apply to TJC-accredited ambulatory health care organizations. Teams are working across the system to coordinate and prepare for upcoming TJC visits and align efforts with BILH health equity priorities.
- [Bowdoin Street Health Center \(BSHC\)](#): With generous support from the Yawkey Foundation, BSHC opened an on-site pharmacy to improve the overall health of the Bowdoin-Geneva community of Dorchester. Pharmacy team members all live within a 3.5 mile radius of BSHC and are bilingual, providing direct language access in Spanish, Portuguese, Cape Verdean Creole and Vietnamese, which are the primary non-English languages spoken in the BSHC service area.
- BILH Behavioral Services to Head Northeast [Certified Community Behavioral Health Centers \(CCBHC\)](#): Beginning January 2023, state-designated CBHCs will serve as an entry point for timely, high-quality and evidence-based treatment for mental health conditions and substance use disorders across the state. BILH Behavioral Services has been selected to run the Northeast Region CBHC. The program includes a grant to address mental health disparities, specifically in the majority-Hispanic Lawrence community.
- Medical Centers Focus on Underrepresented in Medicine (URiM): Our two academic medical centers, Beth Israel Deaconess Medical Center (BIDMC) and Lahey Hospital & Medical Center (LHMC), have made significant progress in recruitment of URiM individuals, particularly Black and Hispanic trainees, into medical training programs. Efforts have resulted in a significant increase in URiM applications, interviews offered and matched into training programs. In 2022, LHMC matched four URiM residents (33%) within the department of Internal Medicine and BIDMC matched 38 residents (25%) across all departments.
- URiM Internships: LHMC hosted six [Posse](#) Foundation college students for an eight-week surgical mentoring program and BIDMC conducted a [URiM Summer Research Program](#) with 10 scholars placed in various departments.
- Implementing DEI Learning: In 2022, DEI learning programs occurred throughout the BILH system, including but not limited to LHMC, BIDMC, BILH Performance Network and Anna Jaques Hospital, utilizing various vendors and formats. In 2023, we plan to expand our offerings for DEI learning through a system-level learning platform.



Beth Israel Lahey Health

529 Main Street
Charlestown, MA 02129