Dean's Advisory Committee on Diversity, Equity and Inclusion
2018- 2023 DEI Plan Evaluation

TO: Richard L. Page, M.D., Dean, Larner College of Medicine
FROM: Dean's Advisory Committee on Diversity, Equity and Inclusion
RE: Recommendations 2018-2023 DEI Strategic Action Plan
DATE: February 2022

EXECUTIVE SUMMARY

Members of the Dean's Advisory Committee on Diversity, Equity and Inclusion completed a review of progress on recommended actions outlined in the Office of Diversity, Equity and Inclusion's 2018-2023 strategic action plan. Their findings were discussed and reviewed by the entire committee. Several areas outlined in the strategic plan were not evaluated and will be subject to further review by the committee in light of these final recommendations and the response to them from the Dean of the Larner College of Medicine.

A common theme that runs throughout the review completed by the committee is that an improved system of institutional research, including data collection, organization, analysis, and reporting will be essential to evaluating and achieving the goals set out in the strategic action plan.

A second theme is clarity for how responsibility, alignment and management of the wide-ranging DEI initiatives across the institution are managed. Key areas, including diversity, equity and inclusion, medical and graduate student education, graduate medical education, faculty affairs, as well as the leadership of each academic department, will likely need additional direction on their specific responsibilities for DEI in their units to ensure that efficiency and accountability for specific initiatives is clear.

It is worth noting that there is no current position known to the committee that represents this level of leadership and accountability for Larner Med staff, and this, too, should be an area of focus.

The Committee recognizes the complexity of this challenge, particularly for Larner faculty who have roles related to their work for the University of Vermont Medical Center, the Larner College of Medicine and other colleges and partners at the University of Vermont. We believe the recent addition of DEI leadership at UVM, the UVM Medical Center and the UVM Health Network will allow for increased cross-institutional collaboration and a reduction of duplicative efforts.

The Committee, through the report below, recognizes the significant accomplishments about which the Larner College of Medicine and its leadership should be proud. These successes must be celebrated even as they exist within an expected understanding of the vast amounts of work still to be done and as progress and accomplishment reveal new challenges and gaps as the institution works to achieve the goals of equity and justice as outlined in its mission.

We look forward to your feedback and further discussion on this report.

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COMMITTEE RECOMMENDATIONS
Our recommendations fall under the following broad themes:
- Leadership accountability and transparency for DEI
- DEI institutional research capacity
- Pipeline and retention program development, oversight and support
- Financial resources to support institutional DEI
- Formalize cross-institutional collaborations for DEI

Leadership Accountability and Transparency for DEI
We recommend clear metrics for DEI goals, progress, and accountability for leadership within their areas of responsibility.

This includes:
- the creation of standardized mechanisms to monitor and track leaders' progress against individual DEI goals;
- establishing peer-to-peer leader transparency around DEI measures to motivate individuals toward action;
- creating a **consequential accountability** system that integrates DEI measures into leadership performance evaluation processes to ensure that there is mutual understanding of, and commitment to, DEI as a strategic priority. (1)

DEI Institutional Research Capacity
We recommend the creation of a dedicated DEI data stewardship function for the College, to provide stakeholders and leaders with the means to make data-driven decisions to ensure success for the initiatives outlined in the DEI plan.

This function should:
- govern the design, collection, analysis, reporting and refinement of all DEI data;
- support all pipelines, promotion, tenure, retention, recruitment, gender equity, DEI plan evaluations;
- explore opportunities for DEI data stewardship and analysis within the UVM Office of Institutional Research (OIR) and/or contribute funds to add OIR staff to support Larner Med data steward needs. (2)

Pipeline and Retention Program Development, Oversight and Support
We recommend identifying a locus of responsibility for oversight of all DEI pipeline programs, including those for medical and graduate students, faculty, and senior administrative staff. We also recommend providing appropriate staffing and funding to develop and manage all pipeline programs.

This would include:
- developing an overarching vision and objectives for all pipeline programming at the College;
- collaborating with stakeholders and partners, including departments, the university, network and community, to identify current and needed pipelines that leverage existing resources;
- creation of new and expansion of existing programs.

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Financial Resources to Support Institutional DEI

It was clear to the committee that there are inadequate human resources to achieve all objectives in the current DEI plan. There is little consistency as to how departments are supporting/funding DEI work. The Office of Diversity, Equity and Inclusion (ODEI) staffing currently stands at only 3.35 FTE distributed across four part-time faculty and two full-time staff members. Admissions has an additional .25 dedicated to pipelines and outreach. The committee feels this is inadequate to manage all DEI initiatives outlined in the plan.

This would include:
- conducting an analysis of both ODEI staffing and its budget;
- determining departmental capacity and process for supporting DEI-related initiatives (e.g., release time, FTE for departmental DEI champions, oversight of pipeline initiatives);
- identifying opportunities to leverage existing resources (e.g., university, Larner Med, UVM Office of Institutional Research);
- creating new positions to fully support DEI plan initiatives.

Formalize Cross-Institutional Collaborations for DEI

ODEI has identified the intersections between university, Larner College of Medicine and UVMMC/UVMHN for DEI and additional work is needed to capitalize on synergies between these organizations.

This would include:
- formalizing cross-institutional collaborations on DEI planning and evaluation, especially for hiring and recruitment;
- leveraging purchasing power of organizations, where appropriate, to obtain DEI related educational materials, develop recruitment and retention initiatives, DEI-related events;

![The University of Vermont - Larner College of Medicine]

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COMMITTEE WORKGROUP REVIEW

Recommended Action 1.1 - Departmental DEI Plans and Champions

Each Larner Med Department Chair will develop a Department-level Strategic Action Plan for Diversity and Inclusion, specific to Department and College needs, using a common template. (Literature based.)

Status
- All Larner Med departments have developed strategic diversity plans utilizing variable templates and containing departmental identified priorities
- All Larner Med departments have identified one or more departmental diversity champions

COMMITTEE RECOMMENDATIONS

- **Ensure Institutional Support -** Funding and support needs should be identified by departmental leadership and addressed.

- **Standardized DEI Plan Template** – Although each department has created a DEI plan, the format, details, and accountability measures vary widely across departments, making it difficult to determine efficacy across departments. A standardized DEI departmental plan template should be created, which includes the categories included in the example (see *Sample Departmental Diversity Plan Template* below).

- **Standardized Departmental Champion Support** – Standardized support for the departmental diversity champions is essential. Currently, inequity exists across departments in how the diversity champion role is defined, how the incumbent(s) are identified, the number of people assigned to this role, how champions are remunerated (specifically release time), and how they are assessed. In addition, sustained professional development for this role is needed.

- **Data Reporting and Analysis** - Regularly publish data (dashboard) on the outcome measures identified in each plan and share annually with Larner Med leadership, departments.

- **Assessment** - Create mechanism to assess the outcomes of departmental plans. Ensure this assessment is a part of department leadership annual review.

Committee Questions:
- What are the goals for the plans?
- What is the department chair's role in this process?
- How are these initiatives funded?
- How are department chairs evaluated on this work?
- Are there clear accountability measures?

![The University of Vermont — LARNER COLLEGE OF MEDICINE]

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SAMPLE

Departmental Diversity Plan Template

Purpose/mission for DEI-related to Larner Med DEI mission: _____

Dept Info- description of department: _____

Champion-names: _____

Chair support declared: _____

Goals	Action items	Assigned to	Timeline	Data	References -applicable	Dept. Education- Plan	Staff- Involvement	Patient Care Related?	Resource needs	Renewal cycle?	Dept. Communication Plan?

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Recommended Action 1.2 – Demonstrated DEI Institutional Commitment

Ensure that Diversity, Equity and Inclusion (emphasizing Inclusion) is incorporated into all Larner Med Strategic Plans and Initiatives.

Status
- "Cultural humility" is referenced in the Vision 2025 Larner Med strategic plan
- Beginning in FY'21, there has been increased messaging from Larner Med leadership re: the importance of diversity, equity and inclusion to the work of the institution
- Renaming of the Office of Diversity, <u>Equity</u> and Inclusion
- Associate Dean for Diversity, Equity and Inclusion added to Sr. Leadership Team
- Director of Gender Equity position named

Committee Recommendation
- *no recommendation*

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Recommended Action 1.3 - DEI in Bylaws

In the 5-year review of the 2012 Bylaws of the Faculty of the College of Medicine, specific language regarding diversity and inclusion of all Standing committees, with particular attention to the Nominations Committee, should be considered.

Status

- This has not been implemented

Committee Recommendation

- *no recommendation*

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Recommended Action 1.4 - Communications Strategy
Develop a communications strategy highlighting inclusion and innovation in a scientific and medical culture.

Status
- Office of Medical Communication has drafted an inclusive social media guide to assist departments in ensuring content is appropriate and inclusive.

Committee Recommendation
- *no recommendation*

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Recommended Action 1.5 - DEI Education for the Larner Med Community
Develop a College-wide voluntary educational strategy, including but not limited to curricular efforts, Teaching Academy sessions, inclusive management for supervisors, and leadership training. (literature based.)

Status
- *Finding Our Common Ground* diversity, equity and inclusion curriculum framework implemented for medical students, beginning in 2017.
- Everfi eModules introduced to Larner Med community in 2019.
- Equity and Inclusive Excellence Certificate program introduced in 2019.
- Annual DEI Professional Development collaboration with Teaching Academy.
- Gender Equity Education Series- monthly workshops developed
- Expanded professional development sessions on Everfi modules introduced to departments in 2020.
- All search committee members are assigned Everfi "Managing Bias" module prior to serving.

Committee Recommendations
- **Collaboration with Partners** – Establish closer collaboration and coordination for DEI education between the university and the medical center/network to ensure consistency and efficiency, recognizing that Larner Med faculty regularly work in both institutions (see committee comments below).

- **Alignment of DEI Education and Communication** – Ensure that there is alignment of DEI education (and communication on DEI education) across all three entities.

- **Data Reporting and Analysis** - Regularly publish data (dashboard) on engagement in DEI education at the departmental level and share annually with Larner Med leadership, departments.

- **Assess Engagement** - Create mechanism to assess engagement and ensure that DEI education is assessed in all annual reviews.

> *Committee Comments:*
> - There are three separate entities that physicians are possibly reporting to--UVM, Larner Med and UVMMC.
> - All three have different administrative offices/personnel and subsequently DEI plans/policies. Faculty often are primarily employed by UVMMC and currently one of the observed challenges is the lack of clarity related to the complexity of ensuring that faculty are not required to do different things for each organization.
> - VP for DEI was appointed in 2021.
> - **Educational sections of the department plans will need to be collated and published to communicate across departments and to UVM and UVMMC.**

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Recommended Action 2.1 - Create Faculty Pipelines

Collaborate with UVMMC by linking Larner Med students to UVMMC Graduate Medical Education (GME) programs, and then to junior faculty positions.

Status
- [Visiting Student Elective Scholarship Program](#) (VSESP) established in Emergency Medicine department. Recruitment of first cohort put on hold due to pandemic and suspension of visiting electives at UVMMC. Goal is to create scholarships in ½ of departments by 2023.

Committee Recommendation
- **Program Development** – Ensure program has defined ownership (ODEI? Residency programs?) goals, objectives, personnel, budgetary support and reporting capabilities.

- **Current Goal** - Ensure Larner COM meets the goal of ½ of residency scholarships are created by 2023.

- **Data Reporting and Analysis** - Departments should set a goal for the number of students joining Larner residency programs and then continuing on to faculty positions.

- **Explore Guaranteed Residency Program** - Priority group students assured residency positions and possibly offer some assured residency positions. One way to increase URM student applications is to increase the amount of URM physicians we have working and teaching at Larner. Encouraging our current URM students to stay via assured residency spots is a step I think we should strongly consider. (example [Penn State COM](#) , [NYU Langone Health programs](#)).

Committee Comments/Questions:
- How many VSESP students need to join faculty for this program to be considered a success?
- It will be important to get feedback from participating students about why they did or did not continue into residency here if offered a position.
- *Program Idea: Guaranteed Residency* - Priority group students some assured residency positions. One way to increase URM student applications is to increase the amount of URM physicians we have working and teaching at Larner. Encouraging our current URM students to stay via assured residency spots is a step I think we should strongly consider. (example [Penn State COM](#) , [NYU Langone Health programs](#)).

Recommended Action 2.2 – Faculty Retention

Implement [recommendations](#) of U Maryland in areas of mentoring, work-family balance, transparency in promotion.

Status
- This has not been implemented

Committee Recommendation
- *no recommendation*

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Recommended Action 2.3 - Faculty Mentoring

Create mentoring and coaching programs for junior faculty at Larner COM, in all departments, specifically emphasizing women, ALANA and URM, and LGBTQ faculty (literature based). Explore feasibility (including costs) of a pilot junior faculty fellowship award program (Literature based).

Status

- This has not been implemented

Committee Recommendation

- **Review and Assess Current Faculty Mentoring Program** – The Dean of Faculty Affairs should clarify the existence of the current faculty mentoring program and standards for evaluating its effectiveness. If these do not exist, there should be published standards for the program, including its goals, an outline of the program structure so it is clear re: expectations, obligations for supporting this work.

- **Program Development** – Ensure program has defined ownership (Faculty Affairs? ODEI?), goals, objectives, personnel, budgetary support and reporting capabilities.

- **Data Reporting and Analysis** – Dean for Faculty Affairs

Committee Comments and Questions:
- In theory, all junior faculty are assigned a faculty mentor; what any information is collected on the effectiveness of this current system?
- Are junior faculty from priority and URM groups asked if it is helpful?
- What is the role of the dean of faculty affairs and what is the interplay between ODEI and the Faculty Affairs office in this program?

Recommended Action 2.4 – Faculty Leadership Development

Create a leadership forum with training for executive and leadership skills in women, ALANA, URM and LGBTQ faculty

Status
- This has not been implemented

Committee Recommendation
- **Review and Assess Current Faculty Leadership Development Offerings -** The Dean of Faculty Affairs, in conjunction with the Office of Diversity, Equity and Inclusion, should review current leadership development offerings through the Larner COM and other organizations (AAMC) and assess the adequacy of these.

- **Develop Leadership Forum -** The Dean of Faculty Affairs, in conjunction with the Office of Diversity, Equity and Inclusion, should develop a program to identify, train and promote faculty from identified priority groups. This plan should include goals for the number of faculty who participate and monitoring mechanisms to assess the number of participants who continue into leadership positions at the Larner COM (or at other institutions)?

- **Data Reporting and Analysis** - This program should include published annual reports to the Dean's group, Gender Equity Steering Committee, and the community, etc. on its efficacy.

Committee Comments:
- What is the current system to identify faculty interested in moving into leadership positions?
- How do we support them with paid training (and release time)?
- What is the role of the dean of faculty affairs and what is the interplay between ODEI and the Faculty Affairs office?
- AAMC offers numerous training opportunities that Larner COM should ensure faculty are identified and provided the support to attend.

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Recommended Action 3.1 - Expand Student Pipeline Programs

Create scholarships in the UVM Post-Bac Premedical program and Master of Medical Science programs; link performance to Larner COM admission (Literature based)

Status
- The Dean's Medical Scholars Program (DMSP) has been created for the Master of Medical Science program beginning in 2021. Participants receive a full tuition scholarship for the one-year Master of Medical Science (MMS) Program which allows participants to demonstrate further academic readiness for the rigors of medical school. Performance is linked to Larner COM admission.

Committee Recommendations
- **Review and Assess Current Student Pipelines** – ODEI and Office of Medical Student Admissions should create a comprehensive list of current outreach and pipeline programming, clearly identifying the status of each.

- **Propose Pipeline Programming** - Determine the appropriate number of pipeline programs.

- **Develop Pipeline Programs** – Ensure each pipeline program has defined ownership (ODEI? Admissions?) as well as goals, objectives, personnel, budgetary support and reporting capabilities.

Committee Questions:
- Should our goal be for 100% of these students to be accepted into med school?
- What level of support do we need to provide during this MMS year, and is that level sustainable throughout the 4 years of med school?
- Is the MMS a pipeline into graduate school?
- We need additional pipelines –we have the branch campus in Connecticut, the hospital and network, local communities.
- Local colleges in the community to connect students with Larner and increase the diversity of our application pool.
- What is the engagement between UVM/Larner COM and UVM Partnership HS's?
- NYU and Columbia have partnerships with high schools and community colleges as examples
- Expand pipelines with colleges in VT and increase or presence and opportunities.
- **All of our recruitment planning is directed toward med students; can we also think about recruitment of URM students to graduate programs?**

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Recommended Action 3.1.1 – Create Pipelines from Local Schools

Create new evidence-based pipeline programs with the Burlington and Winooski School districts, and underserved areas of Vermont, such as the NE Kingdom. (Literature based).

Status
- This has not been implemented

Committee Recommendation
- *no recommendation*

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Recommended Action 3.1.2 – Create Pipelines from Local Colleges
Create new pipeline relationships with Middlebury and St. Michael's Colleges.

Status
- This has not been implemented

Committee Recommendation
- *no recommendation*

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Recommended Action 3.1.3 - Expand UVM PEP Program

Expand UVM's pre-medical enrichment program with addition of a second entry point in sophomore year ("second chance").

Status
- This has not been implemented

Committee Recommendation
- *no recommendation*

Committee Comment:
- The Premedical Enhancement Program should be evaluated as to efficacy and alignment with current recruitment and retention goals and priorities.

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Recommended Action 3.2 - Enhance Student Support
Create a pilot program for medical students at high academic risk for the summer prior to matriculation to enhance preparedness and retention (Literature based).

Ensure availability of additional student support services for at-risk students, including student "siblings" or peer mentoring availability, and coordinate with existing programs.

Status
- [Jumpstart the VIC](#) program created for entering med students. The goal of JumpStart VIC is to prepare students for success in medical school by providing objective-driven MCAT review materials and multiple-choice questions for evaluation of learning. Data may be available for first two cohorts of participants

- **Academic Excellence Liaison position** (.45 FTE) created in ODEI—coordinated with OMSE Director of Student Success to provide academic support to students from priority groups.

- [LCOM Mentors](#) program created, which pairs medical students who are members of groups underrepresented in medicine with faculty members and/or residents who have common interests and goals

Committee Recommendation:
- **Review and Assess Jumpstart the VIC -** ODEI and the Office of Medical Student Education should evaluate and report on this program, including goals, objectives, identified metrics of success, funding streams and ownership. A concern is that this initiative may not have adequate funding, support and personnel to ensure its success. be considered full programs with goals, objectives, identified metrics of success.

- **Review Metrics and of the Academic Excellence Position -** ODEI should evaluate and report on this position, including funding streams, to ensure the appropriate level of personnel to support the priority group student population.

- **Review and Assess the LCOM Mentors program -** ODEI should evaluate and report on this initiative, including goals, objectives, identified metrics of success. A concern is that this initiative may not have adequate funding, support and personnel to ensure its success.

- **Data Reporting and Analysis** - These programs should produce published annual reports to Larner COM leadership and the community, etc., on their efficacy.

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Recommended Action 3.2 - Enhance Student Support *(continued)*

Committee Comments:
- How many students participate in each of these programs?
- How are these programs funded? Who is responsible for them?
- Re: Jumpstart the VIC - Does performance in this program correlate with struggles in the preclinical coursework?
- There is pre-and post-test data we can look at
- Do we collect student feedback on the program?
- How do we advertise this program? Is it required for priority group students or all students?
- Who pays for the program?
- Re: Academic Excellence Liaison
- What data will we need to see to determine success? how do we let students know this support system exists?
- Re: LCOM Mentors
- What percent of PRR students participate?
- Does every student who wants a mentor get matched with one?
- Do we collect feedback on whether participating students find this program helpful?
- Re: Enhanced Student Support
- Are there any Larner COM support services to help URM graduate students? We learned during the search for a Dean that Graduate students as a group feel isolated and ignored.

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Recommended Action 3.3 – Offer Exit Interviews for All Students Leaving Larner COM

Status
- This has not been implemented

Committee Recommendation
- *no recommendation*

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Recommended Action 4.1 – Staff Recruitment

Create a pilot initiative at Larner COM allowing decentralized human resources strategies to recruit and retain a diverse and inclusive staff in technical areas.

Status

- This has not been implemented

Committee Recommendation

- **Collect, Review and Report on Staff Retention** - Collect and report on retention data specific to exit interviews. Larner COM should do its own an exit survey of faculty and staff who leave the institution.

Committee Comments:
Staff Retention
- Exit Interview Process: Is there an opportunity for exit interview with neutral party so that concerns can be known and dealt with?
- Do we have data on how many staff resigned over the past 3 years?
    - How many were URM?
    - Did they transfer within UVM, or leave UVM?

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Recommended Action 4.2 - Create Staff Pipelines

4.2.1 - Create partnerships with local minority associations, non-profit organizations, and Veteran's groups to enhance recruitment
Status
- This has not been implemented

Committee Recommendation
- *no recommendation*

4.2.2 - Identify specific educational needs and develop pre-employment training programs or certificates;
Status
- This has not been implemented

Committee Recommendation
- *no recommendation*

4.2.4 - Explore opportunities for staff community service initiatives in enhancing diversity.
Status
- This has not been implemented

Committee Recommendation
- *no recommendation*

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Recommended Action 4.3 – Staff DEI Education

Identify opportunities for staff participation in (voluntary) educational opportunities and to champion diversity and inclusion initiatives at Larner COM at the Department and College levels.

Status
- [Equity and Inclusive Excellence Certificate](#) created. First faculty and staff cohort graduated in June 2020. Continuation of program on hold due to pandemic. Participant feedback data available.

Committee Recommendation
- **Review and Assess the Equity and Inclusive Excellence Certificate -** ODEI should evaluate and report on this program, including goals, objectives, identified metrics of success, funding streams and ownership. A concern is that this initiative may not have adequate funding, support and personnel to ensure its success. be considered full programs with goals, objectives, identified metrics of success.

- **Data Reporting and Analysis** - This program should produce published annual reports to Larner COM leadership and the community, etc., on its participation and efficacy.

Committee Questions:
- How many staff can participate in this program each year?
- What is the participant feedback?
- How is effectiveness measured?
- How many of these participants joined their departments DEI committees?
- How many are serving as diversity champions?
- This program was suspended during the pandemic--how is this program funded and is it sustainable?

Recommended Action 4.4 - Staff Recognition

Identify existing and/or create University, College, and Department level staff recognition for support of Diversity and Inclusion.

Status

- This has not been implemented

Committee Recommendation

- *no recommendation*

Committee Comment:
The Dean's Professionalism Award created in 2020 to include staff recognition, but not specifically related to DEI.

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Recommended Action 5.1 – DEI Annual Report and Dashboards

Create Larner COM annual report and dashboards based on faculty, staff, and student data. For faculty (UVM data), data is available on gender, ethnicity, rank. UVM data is available through the office of the Associate Dean for Faculty Affairs prospectively. The Office of Medical Student Admissions and registrar are sources of student data.

Committee Recommendation
- See data reporting recommendations on page 28.

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Recommended Action 5.1.1 – Data Gap Analysis
Identify data gaps and develop specific metrics, using practical and systematic approaches, to regularly monitor and ensure progress.

Committee Recommendation
- See data reporting recommendations on page 28.

Recommended Action 5.2 – Climate Assessments

Conduct regular assessment of the College's culture, environment, and climate using validated or national methods. Develop process measures for inclusion, as needed. (Literature based).

Status

- Larner COM will enhance the use of a standardized climate assessment tool in conjunction with the university, beginning in 2022.

Committee Recommendation

- *no recommendation*

Recommended Action 5.3 – UVM DEI Annual Report and Dashboards

Request that UVM add LGBTQ as an additional self-reported option to enhance existing demographic elements, using AAMC criteria.

Committee Recommendation
- See data reporting recommendations on page 29.
- Create matrix to include a listing of who produces these reports, who they are presented to and an annual schedule for reports.
  - College of Medicine Advisory Council (COMAC)
  - Dean's Senior Advisory Group (SAG)
  - Medical Curriculum Committee (MCC)
  - Larner COM Human Resources
  - UVMMC Faculty Practice
  - Medical Education Leadership Team (MELT)
  - OMSE/ODEI Collaborative Task Force
  - Larner COM Continuous Quality Improvement Committee (CQI)
  - Larner Med Town Halls

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Data Reporting Recommendations

See attached

Non-URM students
- SES Diversity
- Regionality
- 1st Generation
- Academic Achievement in Family

Pre-Clinical Education Data
- Qualitative Student Responses (Surveys to students)
- PRR/URM experience in Team Based Learning (TBL)
- Effectiveness of TBL
- Adequate resources
- Who accesses Student Services?
- Adequate support
- Advancement Committee Visits
- Tutoring Hours
- Diversity of Presenters
- Staff
- Acknowledgements
- All Foundation Courses
    - Pass
    - Fail
    - Remediation

Clinical Education Data
- Clinical Skills Exams (CSE)
- Subjective Data Scoring
- Clinical Education
- Qualitative Evaluation (Residents/Attendings to Course Directors)
- Professionalism
- Knowledge Base
- Presentations
- Shelf Scores
- Numbers of attempts
- Pass
- Fail
- Mid Rotation Feedback (Check box or no?)
- Professionalism
- Knowledge Base
- Presentations

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Clinical Education Data (continued)
- Student's Evaluation of Clerkship
- Educational Opportunities
- Teaching Resident
- Comfort of Learning Environment
- Unprofessional Experiences
- Faculty evals
- Positives and negatives
- Staff
- Acknowledgements

Board Scores
- Step 1
    - Pass
    - Fail
    - Number of sittings/completions
- Step 2
    - Scores
- Number of sittings/completions

Honors/Honor Society Induction
- Clerkship Honors
- AOA
- GHHS

Faculty Recruitment and Retention Data
- Categories
    - PRR/URM/and ALL Racial/Ethnic Categories
    - Native American/Alaskan Native
    - Asian
    - African American
    - Hispanic/Latino
    - Native Hawaiian/Pacific Islander
    - White
    - Two or more races
    - Non-resident alien
    - Race and ethnicity unknown

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Recruitment
- Applicant pool
- PRR/URM
- Minority
- White
- Not reported
- M/F
- LGBTQ

Retention
- Current status
- Two, five, ten-year retention rates
- All
- URM
- Minority
- White
- Not reported
- M/F
- LGBTQ

Mentor/Promote
- Current status
- Asst/Assoc/Prof
- All
- URM
- Minority
- White
- Not reported
- M/F
- LGBTQ

Promotion rate
- Asst/Assoc/Prof
- All
- PRR/URM
- Minority
- White
- Not reported
- M/F

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- LGBTQ

Leadership Positions
- Admin/Hospital
- Clinical Leaders
- Chair
- Chief
- Site Leaders
- Clerkship Directors
- Program Directors
- All
- URM
- Minority
- White
- Not reported
- M/F
- LGBTQ

Minority Tax
The proportion of black, Latino, and Native American faculty in U.S. academic medical centers has remained almost unchanged over the last 20 years. Some authors credit the "minority tax"—the burden of extra responsibilities placed on minority faculty in the name of diversity. This tax is in reality very complex, and a major source of inequity in academic medicine.
https://bmcmededuc.biomedcentral.com/articles/10.1186/s12909-015-0290-9
- Quantify how minority tax may be affecting faculty from PRR groups
- Committee Service
- Formal and Informal Mentoring

DEI Data Reporting Dashboards and Schedule
- Representation
  - % of students, faculty, staff from priority groups compared with company, labor market or industry benchmarks. (Reported annually to Dean's Group

- Retention
  - Comparing average tenure for employees from priority groups to average tenure across the workforce or average tenure of members of the dominant group.
- Recruitment
  - Comparing the number of applicants for open positions from priority groups against the potential pool of applicants from

- Selection
  - Tracking appointments of individuals from priority groups compared with appointments of applicants who are not members of a priority group.

DEI Data Reporting Dashboards and Schedule (continued)

- Promotion
  - Tracking promotions awarded to individuals from priority groups compared with promotions awarded to individuals who are not members of a priority group.

- Development
  - Tracking lateral moves, appointments to acting roles, training and other learning and development participation, and other stretch assignment opportunities by identity group.

- Employee engagement
  - Compare employee engagement scores for individuals from priority groups with scores reported by individuals who are not members of a priority group.

- Student and Employee focus groups
  - Facilitated focus groups for the purpose of gathering information on the issues and challenges facing diverse talent.

- Exit interviews
  - An interview held with an employee about to leave an organization, typically to discuss the employee's reasons for leaving and their experience of working for the organization.

- Supplier diversity
  - Track the diversity of suppliers used by Larner Med by identity group. For example, women-owned, or Indigenous-owned businesses.

- Outcomes - UVM Pipeline Program Students
  - PEP
  - MMS
  - AHEC

- Employment applicant data
  - self-identifying or demographic information that has been provided by applicants during the hiring of both staff and faculty in our department

The University of Vermont
LARNER COLLEGE OF MEDICINE

Dean's Advisory Committee on Diversity, Equity and Inclusion
2018- 2023 DEI Plan Evaluation

References

1) https://www.gartner.com/en/newsroom/press-releases/2021-06-21-gartner-says-hr-leaders-must-establish-consequential-accountability-to-achieve-diverse-leadership-benches#:~:text=Consequential%20accountability%20integrates%20DEI%20measures,DEI%20as%20a%20strategic%20priority.&text=Ultimately%2C%20talent%20progression%20comes%20down,and%20behaviors%20of%20senior%20leaders

2) https://hbr.org/2020/12/how-to-best-use-data-to-meet-your-dei-goals