

Imago Dei

2021 FMOLHS Diversity, Equity
& Inclusion Impact Report

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In the summer of 2020, when The Catholic Health Association of the United States issued its Confronting Racism by Achieving Health Equity Pledge, conversations continued within our health system about how we could lean into our mission by being more intentional about diversity, equity and inclusion.

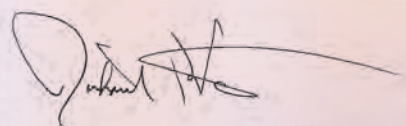
It was a natural fit for us to join with other Catholic healthcare organizations to sign onto the We Are Called pledge and commit to systemic change for health equity by advocating change to end health disparities and systemic racism, putting our own house in order, and building right and just relationships with our communities.

Once executive sponsor Hunter Richardson and accountable leader Tina Schaffer said yes to our specific ask to lead the DEI work within our system, the efforts to formally operationalize our FMOLHS Diversity, Equity and Inclusion work began. In its first year we have made great strides, as you will read in these pages.

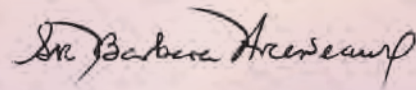
Much of our work so far has been to build a DEI structure that will allow us to move forward and achieve the vision set forth in the We Are Called pledge to heal, to unite and to justice. Our DEI work is not being done in a bubble but is taking place collaboratively as those who can make the needed changes work to make them happen.

While there is much yet to do and accomplish, the careful work and dedication of all the many leaders and team members who have committed themselves to this effort are already making impacts across our health system. DEI work makes a difference to our patients, to our team members and to our communities that we are privileged to serve. We look forward to continuing to be part of this story of healing, as DEI isn't a trend but an integral part of who we are as a health system.

Our ministry offers a place of respect and inclusion and welcomes each person's diverse talents, experiences and backgrounds as gifts. We seek to grow always in our understanding and our value for each unique person, remembering we are all made in the image of God. With joy we answer Jesus' invitation, "Love your neighbor."



Richard Vath, MD
CEO, FMOLHS



Sister Barbara Arceneaux
FMOL Regional Minister

We Are Called To Heal. To Unite. To Justice.

At Franciscan Missionaries of Our Lady Health System, We Commit to Systemic Change for Health Equity By:

- **Advocating change to end health disparities and systemic racism.**
- **Putting our own house in order.**
- **Building right and just relationships with our communities.**

Confronting Racism by Achieving Health Equity Pledge, Endorsed by The Catholic Health Association of the United States Board of Trustees on July 27, 2020

DEI Stands for Diversity, Equity & Inclusion

Diversity is the presence of differences within a given setting. It is the broad range of similarities and differences including, but not limited to, race, gender, gender identity and expression, sexual orientation, age, religion, ethnicity, disabilities, abilities, points of view, levels of education, personalities, thinking styles, work experiences and military experiences.

Equity is the process of ensuring that programs are impartial, fair and provide equal possible outcomes for every individual. Equity provides the tools needed for everyone to be successful, knowing not everyone needs the exact same tools.

Inclusion is the practice of ensuring that people feel a sense of belonging in the workplace. Inclusion provides equal opportunity to all people to fully engage themselves in creating an environment and a cultural attitude whereby everyone and every group fits, feels accepted, has value, and is supported by a foundation built on trust and mutual respect.

IMAGO DEI is a theological term denoting the relationship between God and humanity. Imago Dei has its roots in Genesis 1:27: "God created mankind in his image; in the image of God he created them..." To say all people are created in the image of God is the foundation for human dignity. One of the themes of Catholic Social Teaching is the dignity and worth of every person. Our focus on diversity, equity and inclusion as an organization is rooted in our Catholic faith, our values and our mission.



Diversity Blessing

May God who created a world of diversity and vibrancy,
Go with us as we embrace life in all its fullness.

May the Son who teaches us to care for strangers,
Go with us as we try to be good neighbors in
our communities.

May the Spirit who breaks down our barriers and
celebrates community,
Go with us as we find the courage to create a place of
welcome for all.

Anoint our hearts, our hands, our intentions and
this work, O God,
so that in our endeavors, we may amplify your love
for each of us.

Amen

**“Our Catholic identity calls us to pursue a
culture of belonging where every human is
treated with dignity and respect.”**

– LaTina “Tina” Schaffer, M.A., SHRM-SCP,
FMOLHS Vice President, Chief DEI Officer
& Talent Strategy

Bendición por la diversidad

Pedimos que Dios, quien creó un mundo diverso y dinámico,
nos acompañe en el camino de abrazar la vida en toda su plenitud.
Pedimos que su Hijo, quien nos enseña a cuidar a los desconocidos,
nos acompañe en el camino de ser buenos vecinos en
nuestra comunidad.

Pedimos que el Espíritu Santo, quien derriba nuestras barreras
y celebra la comunidad,
nos acompañe a encontrar el valor para crear un lugar donde todas
las personas sean bienvenidas.

Consagra nuestros corazones, nuestras manos, nuestras
intenciones y este trabajo, oh, Dios,
para que nuestros esfuerzos nos permitan ampliar tu amor
por cada uno de nosotros.

Amén

FMOLHS DEI Council

DEI Integration Program Manager



Talent Workgroup

Responsibilities
DEI hiring practices
Development to support
DEI initiatives
Leader and team member
DEI training program
System recognition
programs
Cultural transformation
Talent metrics,
measurement and
reporting



Compliance Workgroup

Responsibilities
Policy review and
development to ensure
inclusion compliance
Recommend new
diversity/inclusion policies
Review DEI complaints
Promote Compliance
Hotline



Community Workgroup

Responsibilities
Health disparity initiatives
Quality and safety
data analysis
Critical care
training programs
Community program
partnerships



Operations Workgroup

Responsibilities
DEI metric dashboard
DEI budget and
expenditures
Supply chain initiatives
Facility evaluation
Investment strategies
External DEI initiatives
(branding and advertising)

Our Diversity, Equity & Inclusion Model

A major accomplishment in our first year of operationalizing DEI efforts in response to the Catholic Health Association’s We Are Called pledge was to implement an integrated strategy to address structural processes, relationships and practices. We have created several councils, including a systemwide Diversity, Equity & Inclusion Council to create strategic accountability for results, provide governance and oversight on DEI efforts, and promote organization-wide communication on progress.

We have created ministry DEI Councils across our geographical footprint to ensure system integration and frontline team member involvement. These local councils serve as engagement drivers, champion DEI in each ministry, host activities, promote DEI and organizational initiatives in their individual ministries, represent each ministry on the system DEI council, and elevate our mission.

We also formalized four cross functional workgroups to achieve performance outcomes by focusing on talent, compliance, community and operations. Hunter M. Richardson; LaTina “Tina” Schaffer, M.A., SHRM-SCP; and Renada W. Deschamp serve on all Workgroups.

The way we’ve established our DEI structure is sustainable, allowing us to gather data and information, assess fully where we are and have been, with an eye to the future.

DEI Councils Membership

Franciscan Missionaries of Our Lady Health System Diversity, Equity & Inclusion Council

- Richard Vath, MD, Chief Executive Officer
- Hunter M. Richardson, Chief Human Resources Officer and Executive Sponsor
- Avery Cloud, Chief Information Officer
- LaTina “Tina” Schaffer, M.A., SHRM-SCP, Vice President, Chief DEI Officer & Talent Strategy
- Victor W. Vidaurre, Vice President of Mission Integration, St. Francis Medical Center
- Sister Karina Dickey, Dominican Sister, St. Dominic’s
- Rafael E. Flores, Director of Mission Integration, Our Lady of Angels
- Bently B. Senegal, Manager Community Services, Our Lady of Lourdes
- Chabry W. Marks, RN, MSN, MBA, Senior Director of Operations, Franciscan Health Physicians
- LaDonna Williams, NFA, MPA, Vice President and Chief Operating Officer, Franciscan Health Physicians
- Coletta C. Barrett, RN, FACHE, Vice President of Mission, Our Lady of the Lake
- Tonya Jagneaux, MD, Chief Medical Informatics Officer, Our Lady of the Lake
- Christopher Thomas, MD, Medical Director: Quality and Patient Safety, Franciscan Missionaries of Our Lady Health System
- Renada W. Deschamp, MPA, MCCT, DEI Integration Program Manager

- Our Lady of the Angels**
 - Kristi Do
 - Rafael Flores
 - Angela Lambert
 - Elizabeth "Beth" Owens
 - Laura Peters
 - Gordon Thomas
 - Alicia Warren
 - Rickie Warren
 - Jane Whitney
 - Marilyn Youngblood
- Our Lady of the Lake**
 - Tamela S Aidt
 - Camille A Amadeo
 - Dekisha T Anderson
 - Melissa L Anderson
 - Coletta C Barrett
 - Sonya P Bordes
 - Tara F Bosley
 - Jasper Bridgewater
 - Carol P Brown
 - Daron P Brown
 - Pamela M Chaney
 - Chase Cole
 - Zeraleigh N Cole
 - Tiffany L Coleman
 - London Curry
 - Meredith C Davis
 - Dlynn M Debendetto Jones
 - Maranda P Douglas
 - Karen D Estela
 - Leigh J Fenn
 - Romeria Fields
 - Warren L Goodman
 - John E Guerin
 - Diana Hamer
 - Maurice L Harris
 - Beth Hoover
 - Andrea K Irvin
 - Felicia Jackson
 - Jennifer E Jackson
 - Sheniese Jones
 - Ashley B Joseph
 - Christine M Joseph
 - Donna D Longs
 - Orlando J Matthews Jr
 - Chadwick M Mayes
 - Kimberly L Mcgee
 - Angela M McIntosh Petrakis
 - Anastasia C Montgomery

- Michelle R Nelson
 - Andrea T Newton
 - Thuy Nguyen
 - Rebecca R Olivera
 - Candace Perry
 - Debbra Pogue
 - Maria A Reyes
 - Kirstin Richard
 - Brenda Roberson
 - Randee F Rousseau
 - Melissa H Roy
 - Mark K Rudison
 - Siobhan A Sellers
 - Emily A Stevens
 - Yolundra Striplin
 - Lillian F Tate
 - Cheryl A Thomas
 - Vanisha Thomas
 - Alisha C Thompson
 - Lesley M Tilley
 - Rachel M Totaro
 - Keri P Truitt
 - Stacy M Turner
 - Tippy L Ventress
 - Jacqueline Woods
- Our Lady of the Lake Physician Group - Franciscan Health Physicians**
 - Dustin Adams
 - Curry Allen
 - Tina Bertrand
 - Nicole Borne
 - Jason P Bridges
 - Erica N Davis
 - Thomas E Dunn
 - John F Fraiche
 - Harmanjot K Grewal
 - Valerie R Harris
 - Jesse Harrison
 - Nathan Hite
 - Arielle Hollins
 - Giovana L Joseph
 - Courtney L Langlois
 - Lisa K Le
 - Chabry W Marks
 - Christine Mayeux
 - Brandi B Mccants
 - Amy Opdyke
 - Tenisha D Prout

- Jayantrey Z Ross
 - Dawn Roy
 - Michael P Smith
 - Erika A Washington
 - Kristen L Wiggins
 - LaDonna M Williams
 - Tamika Wilson
 - Kiya K Wooten
 - Rose Worley
 - Dawn Zitman
- Our Lady of Lourdes**
 - Tawana Castille Butts
 - Katherine Comeaux
 - Michelle Furka
 - Gilbert Humbert
 - Christine Iste
 - Dessie Ledet
 - Jehangir Michael
 - Cris Mire
 - Lynn Rayburn
 - Kip Schriefer
 - Kelly Segura
 - Lilly Segura
 - Bently Senegal
 - Lucille Woodard
- St. Dominic’s**
 - Sharon Chappell
 - Howard Derrick
 - Sr. Karina Dickey
 - Beatrice Ezem
 - Felichia Fields
 - Temekia Jackson
 - Jill Hisaw
 - Zinith James
 - Ryan McBride
 - Heather Miles
 - Kattie Minor
 - Charlie Minor
 - Kelly Moline
 - Ladarious Moore
 - Rob Nelson
 - Tammy Palmer
 - Jean Rose
 - Katie Schipper
 - G. Ashley Smith
 - Stephanie Tapp
 - John Watson
 - Tanya Williams

- St. Francis**
 - Stacey Barnes
 - Felicia Brunson
 - Sandra Carradine
 - James Dominic
 - Melissa Epler
 - Mackenzie Ernst
 - Margaret Garsee
 - Yumeki Harden
 - Kimberly Hummel
 - Alicia Jackson
 - Nina Johnson
 - Lisa Messina
 - Rebecca Mixon
 - Saundra Nalley
 - Nicholas Obura
 - Christina Randle
 - Dirk Rhodes
 - Pamela Siegmund
 - Everett Slack
 - Katy Temple
 - Victor Vidaurre
- Shared Services**
 - Leanne H Allen
 - Pamela M Andrew
 - Avery Cloud
 - Courtnie D Cook
 - Jennifer B Feduccia
 - Juan D Guzman Noguera
 - Shavon R Hamilton
 - Meagan N Jarreau
 - Charla B Johnson
 - Patrice L Labranche
 - Nikki D McNamara
 - Sandra M Michel
 - Yolanda Y Mills
 - Britani T Pinckard
 - Brittney L Sprague
 - Brian Foster
 - Lisa Bourne
 - Corliss Robeskie
 - Emmett Robbins

Walk the Talk

When they walk the talk, our DEI council leaders and members model respect and inclusion; listen and engage to understand with curiosity and without judgment; are respectful and welcoming of different ideas, styles and goals; don’t assume agreement or consensus; and co-create a brave, heart-centered and self-aware space for learning and dialogue.



Our Diversity, Equity and Inclusion Work is Our Mission in Action



Franciscan Missionaries of Our Lady Health System Mission Statement

Inspired by the vision of St. Francis of Assisi and in the tradition of the Roman Catholic Church, we extend the healing ministry of Jesus Christ to God's people, especially those most in need.

We call forth all who serve in this healthcare ministry to share their gifts and talents, to create a Spirit of Healing—with reverence and love for all of life, with joyfulness of spirit, and with humility and justice for all those entrusted to our care.

We are, with God's help, a healing and spiritual presence for each other and for the communities we are privileged to serve.

Diversity, Equity and Inclusion is not a new concept to us, although this formalized effort is a product of now, this unique time and place in history. DEI has always been here, in our mission and in the hearts of our Sisters, and it's a part of the lifeblood of our health system. Our Catholic identity and mission are foundational to our work to operationalize DEI, and Catholic Social Teachings is rooted in Jesus' invitation to "Love your neighbor." These values have been part of our organization since its founding by immigrant missionaries from France, more than 110 years ago. Conceptually our ministry goes back even farther to the healing ministry of Christ. Our Sisters have continued this link from Jesus to St. Francis and St. Clare in the chain to our team members doing the work today—healing, uniting and seeking justice. We are working to build and strengthen relationships through stories, which can heal and change hearts, ultimate goals for our DEI efforts.

Our organizational culture of inclusion and belonging sets up our team members for success as we work together to create a *Spirit of Healing*. Diverse groups' productivity can increase, and our team members are more easily able to reach their God-given potential and professional goals because of our mission and focus on love, joy, humility and justice. We always remember that behind all our demographics and data are God's people, especially those most in need, and that all of us are made in God's own image and likeness.

"We are called to love because we were loved first. Our DEI work allows us to be faithful to our identity, and our journey is always back to love."

— Pete Guarisco, Jr., FMOLHS Senior Vice President of Mission

Franciscan Missionaries of Our Lady Health System Core Four

Our DEI Model is built on the foundation of our health system's Core Four Behaviors in which all team members strive to:

Be the Guide

Focus on doing the right thing, even when the solution is personally hard. Think through challenges to ensure everyone is considered and included. Prioritize time so that all commitments can be met. Be honest through words and actions. Demonstrate safe, quality care.

Be the Bridge

Work for common purpose while appreciating the gift of differences. Create a place where each person feels they belong. Build relationships based on mutual respect and trust.

Be the Catalyst

Be open to change and welcome new ideas. Prepare for and respond to challenges appropriately. Involve others in decisions that affect their work; involve patients in their care. Inspire action that can create positive lasting effects. Be safe, always. Find potential in people and processes. Step up and make good things happen.

Be the Love

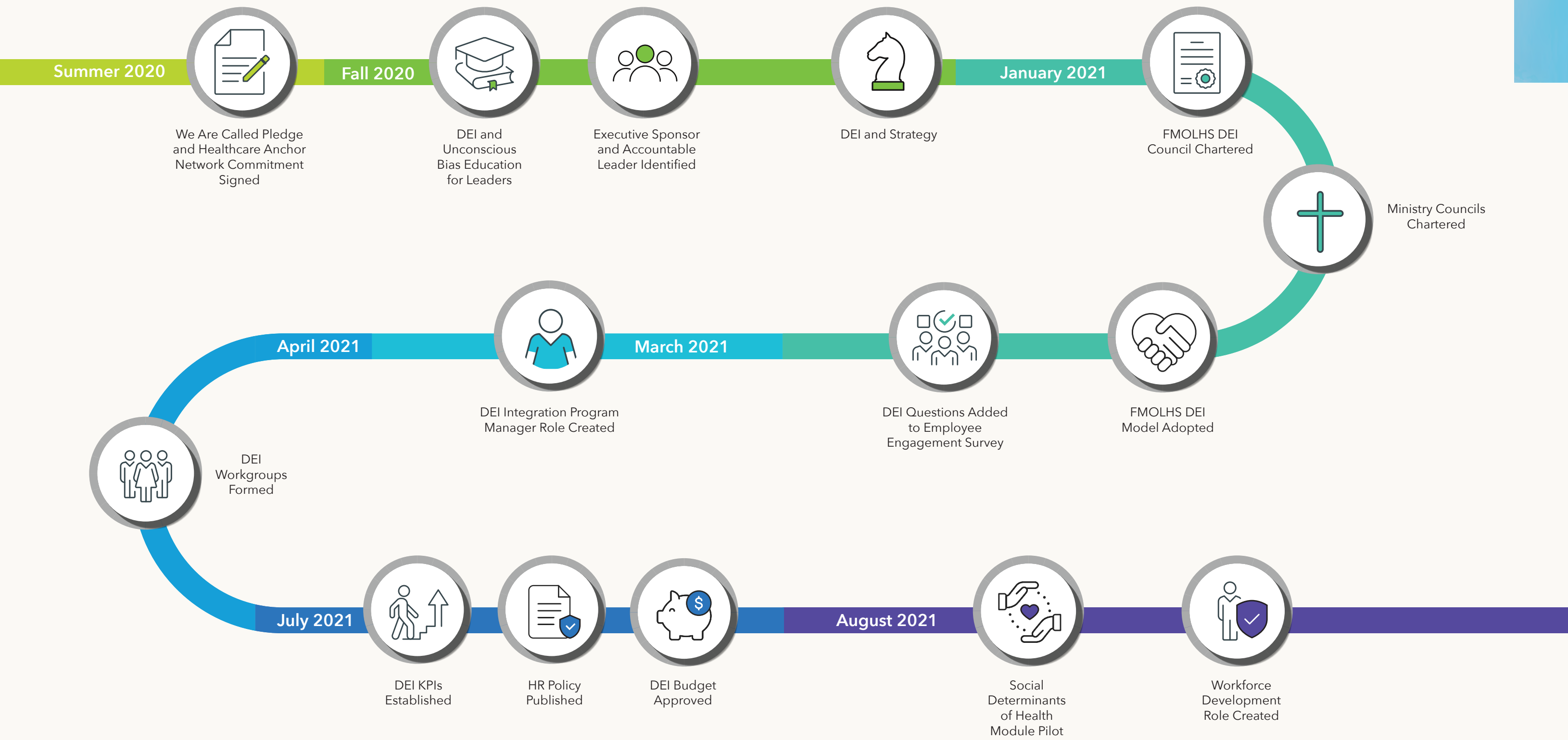
Connect those we serve with the Mission through our caring. Seek excellence in patience and customer care, safety and quality. Demonstrate fairness and equity in all decisions. Be prepared to serve all. Express appreciation and gratitude to everyone. Our work is love made visible.



"Our DEI work will open the door to start the needed courageous conversations and provide an opportunity for self-reflection and self-awareness training for everyone."

— Bently B. Senegal, Our Lady of Lourdes Ministry DEI Sponsor, Manager of Community Services, Our Lady of Lourdes Regional Medical Center

Our Diversity, Equity & Inclusion Journey



We Are Called to Heal:

Our Focus on Our Patients

Our health system seeks to help our patients live well, and to succeed we keep our patients at the center of our business decisions. It requires consistently finding and nurturing long-term relationships in all communities we serve. We are continually reaching out and connecting with all types of people, helping to meet the mental, physical, and spiritual needs of people of color, people with unique accessibility needs, veterans and others.

Our goals include enhancing safety, health outcomes and patient experience, and improving patient-provider communication and relationships. We are leveraging our ministry's diversity in an inclusive way to lead to better efficiencies and providing exceptional experiences for all patients entrusted to our care.

The structural tactics being used in our focus on patient care include increasing the collection, stratification and use of race ethnicity, language preference and other sociodemographic data to improve quality and safety, increasing cultural competency training to ensure responsive care, improving and strengthening community partnerships to support our patients, investing financial resources to address patients facing health disparities, and establishing metrics, benchmarks and goals to ensure we are investing in the areas most beneficial to the populations we serve.

Advocating change to end health disparities and systemic racism. Our health system will leverage our united and powerful voice to advocate changes that eliminate health disparities and systematic racism. We will advocate policies that ensure access to quality health care services for all; end racial and ethnic disparities in health outcomes; promote and improve the delivery of culturally competent care; and increase the diversity of the health care work force. We will oppose policies that exacerbate or perpetuate economic and social inequities as they greatly contribute to health disparities and systemic racism. We will call for changes to policies that shape people's lives—education, housing, nutrition, criminal justice reform and the environment – so that every man, woman and child in our society may flourish.

The Work Being Done in Our Community Workgroup

- Social determinants of health module piloted in the electronic medical record
- Quality and safety data analysis, including outcomes by demographics
- Role specific education around DEI and patient care
- Community program partnerships

DEI Community Workgroup Members

Tonya Jagneaux, MD (Lead)
Meredith Bailless
Coletta Barrett
Michael Bolton, MD
Tandra Davison
John Fraiche, MD
Elizabeth "Tren" Garbo
Ashley Saucier, MD
Bently Senegal
Rich J. Vath

Weaving a Tapestry to Improve Patients' Health

Healthcare doesn't start in the exam room, and health problems don't start overnight. Social determinants of health (SDOH) account for about 80% of a person's health and wellness. They also contribute to health disparities and inequities. Medicine and surgery can only do so much, and simply promoting healthy life choices won't eliminate disparities. Our health system is determined to take action to improve conditions in our communities.

First, we are tracking SDOH within our own patient populations. Dr. Tonya Jagneaux, Our Lady of the Lake chief medical informatics officer and associate professor of clinical medicine at LSU Health Sciences Center, serves on our DEI Community Workgroup and leads our SDOH pilot program in EPIC, our electronic health record system. It's an expansion of work that's been in progress for about three years in conjunction with the LSU College of Engineering.

EPIC has a screening tool, but this project includes sensitivity training to ask the difficult questions and truly listen to patients' answers. The SDOH pilot program includes work to improve the software's efficiency, reducing the number of clicks and interruptions while capturing the patients' stories and creating more value. The project started in the Baton Rouge market, and eventually all our system's patients will be screened at least once a year.

By tracking and identifying patients' barriers to health, we can then take the steps to connecting them to solutions through social workers or other community resources. "If you don't recognize these obstacles, you certainly cannot hope to overcome them," Dr. Jagneaux says.

Diana Hamer, PhD, research scientist in the LSU Internal Medicine Residency Program at Our Lady of the Lake Regional Medical Center, works with Dr. Jagneaux and has built a searchable library of resources mapped to the questions in EPIC. The integration goal will be to have seamless information exchange for patients and providers. With a background in public health, epidemiology and statistics, Dr. Hamer helps capture the needed information, turning their shared vision of addressing SDOH into reality.

"Our mission as a health system includes caring for those most vulnerable, and to do that effectively we must know who our most vulnerable are," Dr. Hamer says. "With this data we'll paint a better picture: what actually are our patients needs and how can we pair them with the available resources."

Dr. Jagneaux remains mindful of the larger picture of DEI work.

"Diversity, equity and inclusion is helpful from the education standpoint and getting rid of our blind spots," Dr. Jagneaux says. "But it requires an agenda. We can't do it by accident. We must do it on purpose. We have a tapestry effect going on where we have lots of folks who sit in the same spaces working together to tackle these types of problems."



Social Determinants of Health



Education Access and Quality



Healthcare Access and Quality



Economic Stability



Social and Community Context



Neighborhood and Built Environment

A JEDI Lens for Graduate Medical Education

Training the next generation of physicians to be more aware of diversity, equity and inclusion is part of our efforts as a health system.

Our Lady of the Lake is part of the Alliance for Independent Academic Medical Centers (AIAMC), an organization that hosts national 18-month learning collaboratives. The current initiative is called Justice, Equity, Diversity and Inclusion (JEDI) and is focused on discussions about diversity and inclusion in healthcare; strategies to counteract unconscious bias; and the importance of fostering an inclusive environment. Our Lady of the Lake is one of 28 academic hospitals participating in JEDI and is part of a cohort focused on curriculum and educational development.

Rich J. Vath, MAEd, senior director, dean of education for academic affairs for Our Lady of the Lake Regional Medical Center, is on the AIAMC programming committee and works as the administrative counterpart to Miranda Mitchell, MD. Melissa Roy, MD, pediatric hospitalist and program director of Our Lady of the Lake Pediatric Residency program, and pediatric resident Sara Javadi, MD, are also taking part in the JEDI project.

A goal for the regional medical center's JEDI work is to develop two capstone experiences for new residents out of medical school: equity rounds and equity rotations. An equity round will provide the opportunity to look at a case through the lens of equity and have conversations about improving and learning from the experience. An equity rotation will be a two-to-four-week experience within the community, whether seeing patients or working in some other way with a community partner.

"One of the biggest hurdles to overcome with improving inequities in healthcare is creating experiences for our learners to recognize the distances in life experience between themselves and the patients they're privileged to care for," Vath says.

The efforts include building the coaching platform and framework to support these kinds of conversations and learning, with the end goal of providers who realize the true value of the social determinants of health tools being developed.



2019 class of residents

Providing Pediatric Residents with DEI Knowledge

Although diversity, equity and inclusion weren't emphasized as much when pediatric hospitalist Melissa Roy, MD, went to medical school, it's something that's very important to her personally now as the program director of Our Lady of the Lake Pediatric Residency program.

"We need to think a little bit differently about resident recruitment and faculty recruitment and retention, making sure we're having a diverse work staff and truly making people feel included," Dr. Roy says. The residency program's efforts include educational emphasis for residents that go beyond modules or lectures. Some of the topics covered include cultural humility, Dialogue on Race Louisiana, the effects of poverty on children, adverse childhood experiences, micro-aggressions and implicit bias.

"We're still early in this journey, but we're learning how to help with awareness and help faculty incorporate this into their daily interactions with residents and patients," Dr. Roy says.

Recruitment is an important piece of any DEI puzzle. "We've always been fortunate to have a diverse residency program, so it has perpetuated itself," she says. "How do we make sure we're being really purposeful rather than expecting it to continue to draw underrepresented minorities in medicine?"

The work includes making sure residents and medical students within the program know where they could go if they face microaggressions or otherwise need

support. They are also working with Coletta Barrett, vice president of mission for the Baton Rouge region, on launching an additional mentorship program that will allow residents to branch out beyond pediatrics and be paired with clinical and non-clinical mentors.

Research is another part of the program's equation, focused on ensuring scholarly activity takes into consideration social determinants of health and patient demographics. The residency program recently completed a two-year project focused on health literacy, which fits into our larger DEI efforts.

All of the learnings the program offers to residents and medical students are also open to faculty, in an effort to get even more people involved.

"This is such an important issue that requires our entire institution to mobilize resources and invest in our community, and it will not be an overnight success," Dr. Roy says.

In addition to Dr. Roy as program director, the Pediatric Residency Program has two associate program directors: Angie Byrd, MD, pediatric hospitalist, and Michael Bolton, MD, pediatric infectious disease specialist.



We Are Called to Unite:

Our Focus on Our Team Members

Being an employer of choice for diverse candidates requires our health system to use an innovative and collaborative approach to talent acquisition and development. Diversity, equity and inclusion training is fundamental for all team members, and we're engaging with our team members of color to identify additional ways to attract new talent as well as creating new opportunities for advancement within our organization.

Our goals include improving workforce diversity, increasing engagement with team members of color, and reducing turnover rates for team members of color. Our Talent Workgroup's strategy includes pipeline programs to develop talent and pathways for advancement within the health system. For our team members we offer programs to support continuing education and advancement. Our talent metrics and reporting this year will provide us the benchmark from which to grow.

Our Compliance Workgroup has taken a deep dive into our policies, making sure there are no unintended consequences in language that may discourage individuals from working for the system or feeling displaced or not as important. The group also reviews anything from a regulatory standpoint to ensure equity, including pay, and creates ways to incentivize this work among leaders.

We want the demographics of our providers and team members to better reflect the demographics of the communities we serve. All our team members should feel represented, valued and engaged. We offer clear paths to leadership for people of color, and we proactively encourage all team members to explore

such opportunities. Our diverse workforce inspires innovative, sustainable solutions for our patients, team members and the communities we serve.

Putting our own house in order. Our health system will examine all aspects of our organization, including how we provide clinical care; how we recruit, hire, promote and retain team members; how we conduct our business operations including visible diversity and inclusivity at the decision, leadership and governance levels; and how we incentivize and hold our leaders accountable to ensure we are truly dismantling and not perpetuating racism and inequity. We will leverage all our assets towards proactively eliminating health disparities.

The Work Being Done in Our Compliance Workgroup

- Policy review and development to ensure inclusion compliance
- Recommend new diversity and inclusion policies

DEI Compliance Workgroup Members

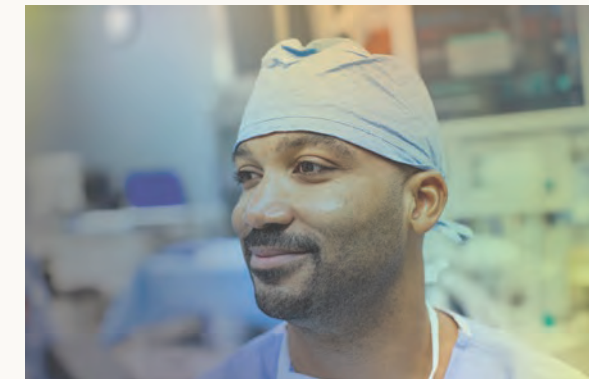
Jolee Bollinger (Lead)
Elizabeth Champion
Sister Karina Dickey

The Work Being Done in Our Talent Workgroup

- DEI talent strategy, pipeline, pathways and development programs
- Education for all team members around DEI in the workplace
- Development for Leaders on inclusion
- Examination of holidays and benefits
- Talent metrics, measurement and reporting
- DEI engagement data

DEI Talent Workgroup Members

Kellie Barton (Lead)
Rafael Flores
Catherine Harrell
Victor Vidaurre
LaDonna Williams
Michael Yost



Wilson Foundation Workforce Development Grant

Our health system's DEI team, in partnership with Ochsner, received a grant from the Wilson Foundation to support workforce development. The funds support our Impact Training program and our Sterile Processing Tech to Surgical Tech program through Baton Rouge Community College. Phase one award was \$25,000, and phase two is set for \$50,000.

DEI Becomes Part of Our Day-to-Day:

How We Attract, Retain and Develop Our Team Members

When system CEO Dr. Richard Vath asked Hunter M. Richardson to be the executive sponsor and champion for our health system’s diversity, equity and inclusion work following the events sparked by the murder of George Floyd, Richardson did not hesitate to say yes. Richardson is our chief human resources officer, a role he’s held since August 2019, and he’s worked in various capacities within our ministry for 25 years.

“I love doing this work,” Richardson says. “From a personal perspective, I have had my own journey in life where I was treated differently because of who I am.” Richardson says he’s always felt embraced by the FMOLHS organization. That embracing has helped him see the opportunity to help others fit into the ministry.

Whether we are celebrating Black history month, supporting our organization’s first social media acknowledgement of Pride or embracing uncomfortable conversations we’ve never had before, Richardson says he’s never been more proud of our organization. “We want to be all-inclusive and welcoming as part of our Catholic identity. We recognize the whole person.”

From a business and human resources perspective, DEI efforts make good sense. “It gives us the opportunity to specifically reach out to groups we didn’t historically focus on to create talent pipelines and invite those individuals to come work with us.”

Richardson encourages all team members to foster their curiosity within all spaces, including DEI. “When you’re curious, you’re self-reflecting, looking for information and processing it in an unbiased manner.”

A goal for DEI within our health system is to move toward the point where this work can become part of our culture and day-to-day work. “This isn’t a special project. This isn’t something that we can check a box and be done,” Richardson says. “This is a cultural change from a historical perspective, and everyone is on their own journey.”

As for his journey with DEI, Richardson says, “It’s an ever-evolving learning process. Really the key for me is that I’ll never be perfect, but I can be open and understanding and a continuous learner.”



Hunter M. Richardson, FMOLHS
Chief Human Resources Officer
FMOLHS Diversity, Equity and
Inclusion Executive Sponsor

We Are Called to Justice:

Our Focus on Our Community

The Franciscan Missionaries of Our Lady Health System commitment to community outreach is guided by our mission to provide compassionate, holistic care to people who are vulnerable and otherwise lack access to essential services. Our size strengthens our ability to support and partner with trusted organizations to collaborate on programs that make our community efforts more effective.

Our goals include addressing health inequities across all communities, transforming communities through strategic partnerships that support health and wellbeing, and increasing supplier diversity in our spending to support diverse and inclusive economic development in our communities.

Reviewing our facilities through a DEI lens helps us become more aware of others’ perspectives and needs, especially those with accessibility needs whether that’s using a wheelchair, limited sight or hearing, or something else. We want our facilities to continually become more accessible to all team members and patients, and that’s part of the work of the Operations Workgroup and our focus on community.

Building right and just relationships with our communities. Our health system will find ways to build and strengthen trust with communities of color. This includes fostering and sustaining authentic relationships based on mutually agreed upon goals; “leaning in” to listen; learning about and understanding the needs of the community; determining how we can best partner together to bring about sustainable change; measuring the impact of our efforts; and making adjustments as called for by the community and as our combined work and relationships evolve.

Health Disparity Initiatives

Data is key to any work on health disparities. Determining the right method of data collection is a first step to determining the type of impact we will make as an organization in this space. Health disparities do not occur in a vacuum. It will take input from many sources to work on the roots of the issues. Using Race, Ethnicity and Language (REaL) Data will allow our health system to make measurable impacts.

The Work Being Done in Our Operations Workgroup

- DEI budget and expenditures created
- Supply chain diverse supplier metric established
- Facility evaluation assessment
- External DEI initiatives (brand and advertising)

DEI Operations Workgroup Members

- Scott Labbe
Janice Lamy
Nikki McNamara
Kevin Moraski
Scott Richard
Gary Sandifer
Amy Webb

Candid Conversations

Demonstrate Commitment to Justice

When system CEO Dr. Richard Vath began to engage in listening sessions in the wake of George Floyd's murder in the summer of 2020, LaTina "Tina" Schaffer, M.A., SHRM-SCP, vice president, talent strategy, was quick to participate. She became our system Diversity, Equity & Inclusion accountable leader. "It was a no brainer for me to just raise my hand and say, 'Put me in, Coach,'" she says.

As a Brown Girl, as she calls herself, Schaffer is familiar with the realities of being treated differently, and she shared her story through that lens with Dr. Vath. "I told him about my experience being passed over for a promotion [at another organization] because of my color and because I was female," Schaffer says. "The board was not ready for a Black female to be an executive in their company, and they told me so."

She also has experienced racial profiling, being pulled over on I-10 and having her car searched. Two professional women in a nicer vehicle, she and her best friend, a Black dental hygienist, were told they looked suspicious for drug trafficking.

Schaffer's conversations with her 16-year-old son, passing on lessons of what to do when interacting with the police if stopped while driving, also play a role in her decision to lead our DEI work. "My son, standing in the kitchen, said, 'Mom, I know what to do if I'm stopped by a police officer, but you have to understand there's a strong possibility they're going to kill me anyway.'"

Quickly, Schaffer got to work developing a DEI model and proposal, telling Dr. Vath and her boss, Hunter M. Richardson, chief human resources officer, "This is what it should be. I would love to lead it, and I'll learn along the way the things I don't already know." They agreed, and since then our DEI efforts have been full speed ahead.

"As one of the largest employers in Louisiana and now into Mississippi, it's important that we demonstrate our commitment to diversity, equity and justice across these southern states," says Schaffer, who has worked for our ministry for 10 years. "We have influence, and because we are mission driven it's important for us to lead and model the way for justice for all of God's people in our communities."

Schaffer envisions a future where the culture doesn't require anyone to tuck in. "People don't have to leave part of themselves at home when they come to work," she says. While team members will still demonstrate our standards of behavior and align with our mission and values, they will be able to be their authentic selves.

Equity is a key component from a justice perspective. "We are working to give everyone access to reach their full potential," Schaffer says. "We're not asking for anybody to be removed from the table, but we are asking people to scoot over and create more space for others."



Building Spaces of

Learning, Acceptance and Growth

Renada W. Deschamp, MPA, MCCT, is our DEI Integration Program Manager, and her passion for this work and the reasons why she said yes when asked to lead are similar to Tina Schaffer's, specifically Deschamp's children who are all neurodiverse.

"My daughter has severe cerebral palsy, my middle son has ADHD, and my youngest son is dyslexic," Deschamp says. "As I looked at them and thought about their futures and the workforce they will go into, I wanted to ensure they are able to bring who God made them to be to whatever workplace they choose."

Deschamp's experiences with her children's schools and wanting them to be heard, seen and included also drives her desire to take part in DEI efforts across our health system.

"I was once fearful of inclusion," she says. When her daughter was in middle school her school shifted to inclusive learning. "This meant my nonverbal child had to sit in a classroom with children without disabilities for short periods of time during the school day." While Deschamp worried that her daughter would be teased, the result was much different. The family went together to an eighth-grade dance.

"When we wheeled her in, I was surprised to realize that kids knew her name and a couple even took pictures with her. At eighth grade graduation the whole class cheered for her too," Deschamp says. "Those moments changed my perspective. There is no need to fear inclusion. If I had let that fear move me, I would have robbed her of that sense of a broader community, and I also would have robbed the other children the opportunity to practice compassion."

Children like Deschamp's are the future leaders and team members of tomorrow's organizations. "We have a responsibility to create brave spaces for learning, acceptance and growth for them," she says.

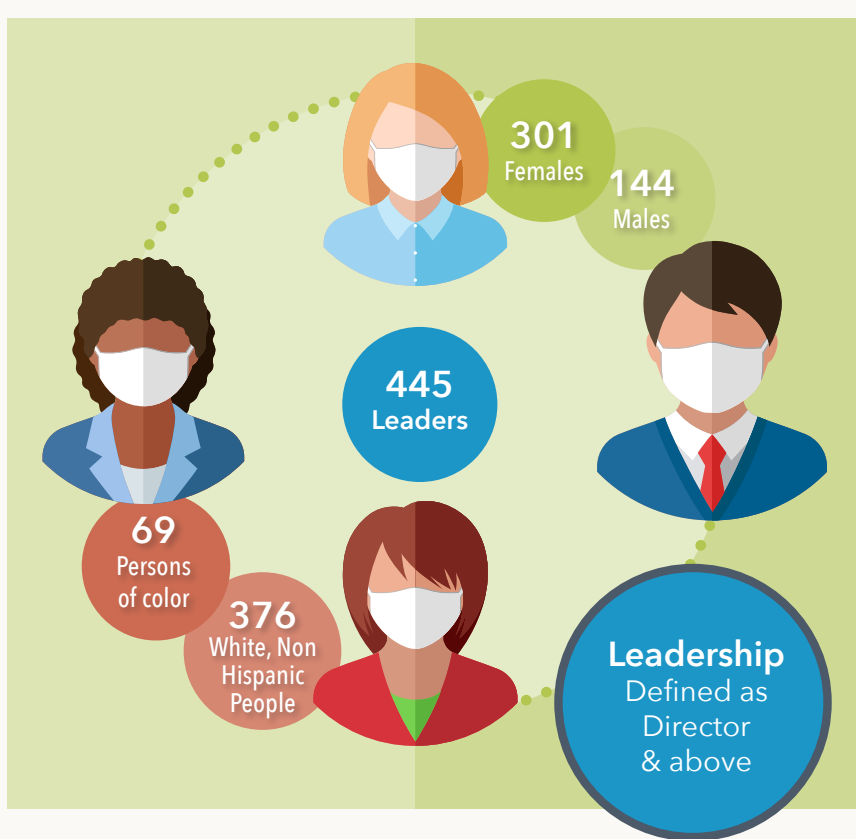
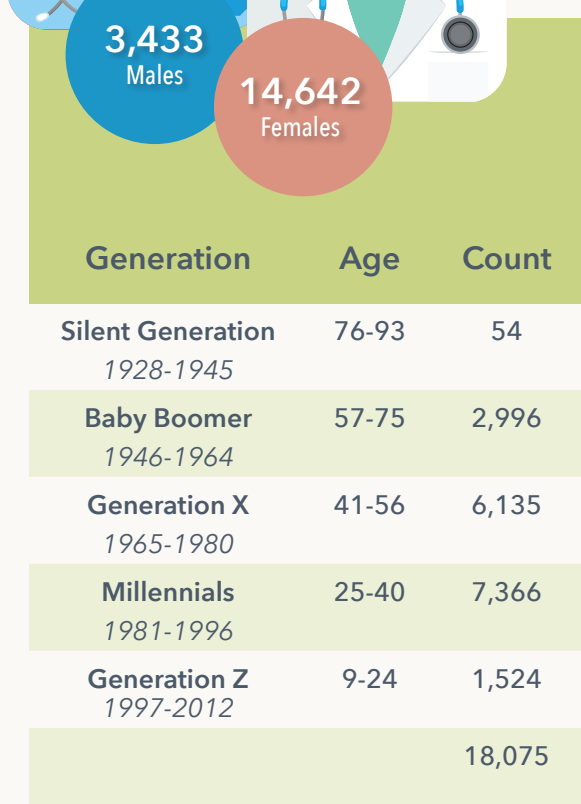
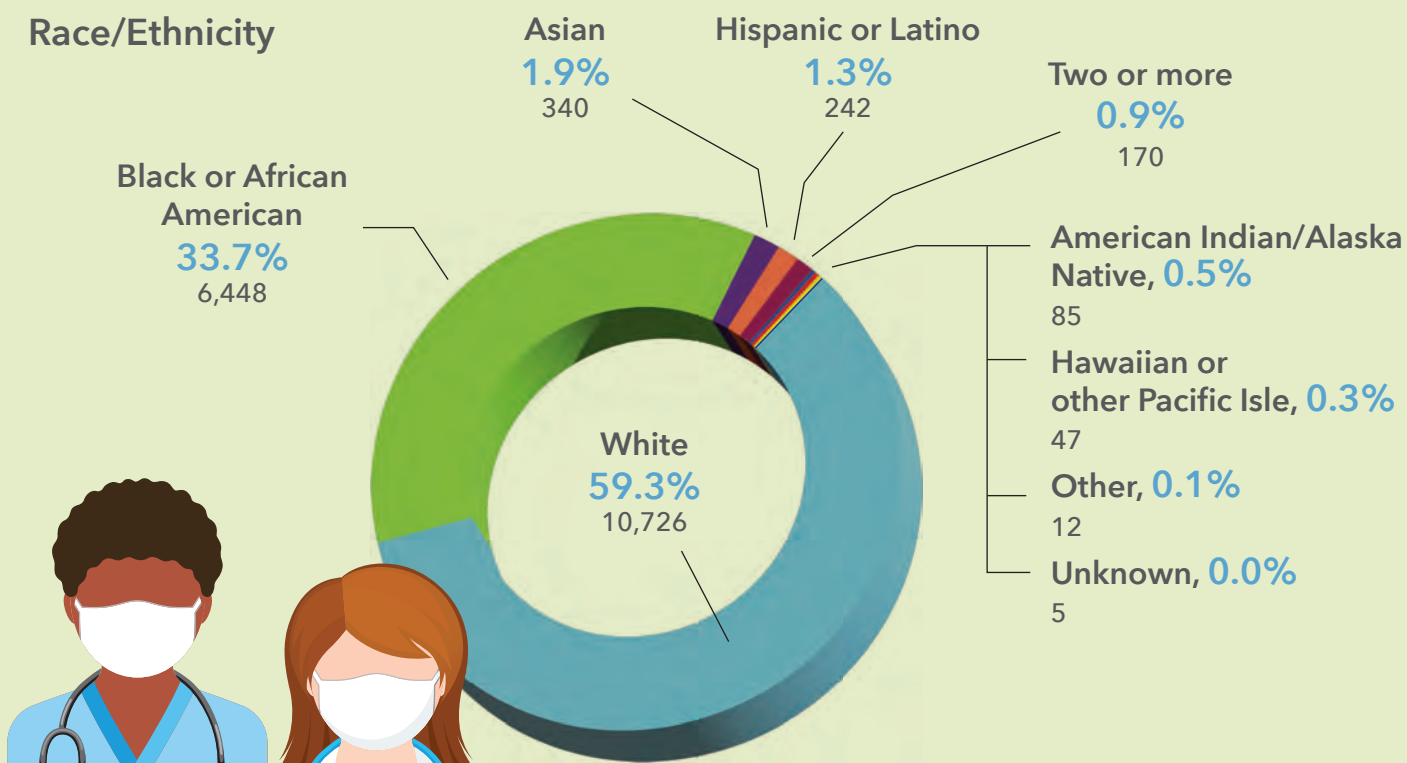


"Focusing on DEI upholds our mission, and to continue to do God's work we must ensure that all have an opportunity to be successful."

— Yumeki Harden, BSW, MHS, Patient Advocacy Coordinator, Office of Civil Rights Coordinator, St. Francis Medical Center

Demographic Data for Fiscal Year 2021

(July 1, 2020 - June 30, 2021)



Our Key Performance Indicators

DEI Workgroups	Key Performance Indicators	Strategic Priorities
Talented Putting our own house in order	Turnover and Engagement	Reduce Minority Voluntary Turnover Increase diverse representation in our leadership (director and above) Improve applicable engagement DEI Survey items (overall and Equal Employment Opportunity extraction)
Compliance Putting our own house in order.	Policy Review	Review current policies, scanning for possible changes needed internally
Community Advocating change to end health disparities and systemic racism.	Advocacy and Health Disparity	Launch social determinants of health EPIC module, establish and measure metric
Operations Building right and just relationships with our communities.	Supply Chain Budget	Increase diversity procurement spend, measure every 12 months Dedicate and incrementally spend (budgeted/allocated) for system DEI Strategy

Our Partnerships

Catholic Health Association

In response to Franciscan Missionaries of Our Lady Health System’s commitment to fostering inclusiveness in our workplace culture, advocating change to end health disparities and building right and just relationships with our communities, in partnership with the Catholic Health Association, we will work to develop a comprehensive, strategic and data driven approach on our journey to solve the challenges faced by individuals in our community. Our approach includes all facets of our organization at both the health system and ministry levels. Learn more about CHA commitment to heal, to unite and to justice at chausa.org/cha-we-are-called.

Healthcare Anchor Network

The Healthcare Anchor Network (HAN) is a health system-led collaboration that consists of 50+ health systems across the United States who are committed to advancing an anchor mission approach within their institutions. An anchor mission approach prioritizes economic inclusion strategies in the areas of hiring, procurement, and investing. In collaboration with a backbone organization (The Democracy Collaborative), HAN supports participants in effectively identifying the critical shifts needed to achieve the long-term goal and collaboratively designing and implementing solutions that advance their anchor missions. We can produce

measurably beneficial impacts on individual and community health, and by doing so lower preventable demand. This improves patient quality of care and cost effectiveness.

By leveraging our business practices around inclusive, local hiring and workforce development, local and diverse sourcing, and place-based investing, we can tackle these underlying causes of poor health by investing in the social and economic well-being of the communities we serve. We can get at that impact by leveraging what we’re doing now. The Anchor Mission approach offers a portfolio of proven strategies that can multiply outcomes without multiplying cost.

Looking Forward

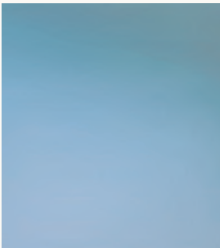
During this time of unprecedented change in our society in general and the healthcare industry specifically, Franciscan Missionaries of Our Lady Health System is poised to lead the transformation required. As we reflect on our 2021 accomplishments, we look forward to 2022 and beyond and aim to continue our commitment to heal, to unite and to justice.

While we are extremely proud of our achievements so far in establishing our Diversity, Equity & Inclusion model and framework, we are not satisfied. There is much more to do to ensure a more diverse, equitable and inclusive environment for our team members and those we serve, as patients and our communities. We will not rest and are actively listening to consumers and our team members to identify, prioritize and address the most critical obstacles to a diverse, equitable and inclusive environment for all. We will continue to monitor new and ongoing initiatives, measure their impacts and adjust our strategies to meet our ultimate goal: healthcare equity and healthy opportunities for our patients, team members and communities.

Team Member Affinity Networks

Our Team Member Affinity Networks will be launched in the next year. These team member-led, self-directed voluntary groups will become an integral component of our health system’s commitment to drive change in diversity, equity and inclusion.

These networks will allow us to capitalize on the extraordinary resources of our team members, leveraging their engagement to promote DEI initiatives as well as their professional development. These groups will work as a team member support system providing education, personal growth, and information and idea sharing.



DEI Annual Education Module

We believe we must educate ourselves, grow and continue learning together. Coming in March 2022, our first education module that will be required for all team members will be rolled out. We’ve developed plans for 2023 and 2024 for role-specific education around DEI, including helping our providers deliver more inclusive patient care. We have a three-year development plan for DEI education across our health system, including new leader orientation and building a course for our current leaders on leading inclusively.



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