

RECOMMENDATIONS EXCERPTED FROM:

# Report to the Board of Trustees of Seattle Children's Hospital

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## **PART SIX: RECOMMENDATIONS**

Seattle Children's has an unprecedented opportunity coming out of this assessment to focus on achieving equity, diversity, and inclusion for its workforce and patients and families, and to establish itself as an anti-racist organization and industry leader in pediatric health equity. If Seattle Children's commits to achieving the objectives reflected in each recommendation described below, it can capitalize on this moment. We recognize that Seattle Children's has undertaken many important initiatives in this regard while this assessment has been underway, including significant advancements under the Anti-Racism Organizational Change ("AROC") Plan, and we have attempted to calibrate our recommendations to the current state of these ongoing efforts.

Because leadership begins at the top, our recommendations begin with a focus on governance, the Board, and the Executive Leadership Team. We then address potential changes to the organization's policies, procedures, and priorities with respect to equity, diversity, inclusion, and anti-racism. We conclude with recommendations focused on Seattle Children's opportunity to become a leader in the field of pediatric health equity. For each recommendation, we have proposed potential approaches to achieve the corresponding objective, to give the Board and management the opportunity to evaluate how best to sequence and implement our overarching recommendations. We appreciate that these measures are extensive, and accomplishing them will require substantial allocation of resources and attention by an institution that has many other critical responsibilities. The hospital should leverage its significant internal expertise to develop goals and metrics to measure progress towards these recommendations.

### **SUMMARY OF RECOMMENDATIONS**

**Recommendation I: Make and Sustain an Unequivocal Commitment to Anti-Racism and EDI.** Demonstrate and communicate an unequivocal institutional commitment to anti-racism and EDI in all of Seattle Children's operations. Have leadership announce this commitment and assign ownership for executing on it. Specify the actions that will be taken to demonstrate it, the timeline for doing so, and concrete plans for implementation, including how people will be held accountable.

**Recommendation II: Lead the Institution with Purpose and Decisive Action.** Strengthen governance and oversight related to health equity, EDI, and anti-racism across the Seattle Children's Hospital System, including by defining the appropriate role of the Board in holding Seattle Children's leadership accountable for driving health equity, EDI and anti-racism goals; evaluating executive leaders to assess their decisiveness with respect to priorities and difficult EDI questions; incorporating EDI and anti-racism competence and goals in the mandate for and evaluation of all executive leaders; and ensuring that all executive functions and leaders are sufficiently resourced to establish, prioritize, and achieve EDI and anti-racism goals in their area of responsibility.

**Recommendation III: Hire to Increase and Sustain Diversity.** Develop and implement enhanced strategies for recruiting, retaining, and promoting a diverse and inclusive workforce throughout the Seattle Children's Hospital System. Collaborate with Children's University Medical Group ("CUMG"), the University of Washington ("UW") School of Medicine, and others as needed to promote greater racial and ethnic diversity among the providers who practice at Seattle Children's.

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**Recommendation IV: Choose to Build and Sustain a Culture of Inclusion in the Workplace.** Make choices concerning policies and practices that promote EDI and anti-racism at Seattle Children’s. Invest in mandatory, recurring Seattle Children’s Hospital-wide training programs focused on EDI and anti-racism. Incorporate EDI and anti-racism principles into all relevant workplace policies and procedures. Collect and use data to measure achievement of EDI and anti-racism efforts. Empower and train Human Resources to establish trust and effectively implement policies with EDI and anti-racism principles in mind.

**Recommendation V: Choose to Include All Patients on the EDI Journey.** Enhance health equity outcomes and patient and community trust in Seattle Children’s by implementing and upholding policies and processes that prioritize EDI and the eradication of racism for patients and their families. Increase investment in patient services that directly support BIPOC patients and families, including patients with limited English proficiency. Strengthen quantitative efforts to collect and use data to assess areas for improvement in patient-focused EDI and anti-racism initiatives. Eliminate inequitable treatment in Seattle Children’s security and policing practices by implementing systematic policy changes, monitoring implementation, standardizing data collection, and reporting outcomes. Recognize, embrace, and prioritize the unique role OBCC plays in the Seattle Children’s Hospital ecosystem and in connecting Seattle Children’s to the local community.

**Recommendation VI: Listen to the Workforce, Patients, and Families.** Enhance tools for Seattle Children’s to receive feedback and insights and analyze data related to the workforce, patient, and family experience, with a focus on measuring and addressing EDI, anti-racism, and health equity goals.

**Recommendation VII: Communicate Transparently.** Commit to communicating with the Seattle Children’s community regarding progress and challenges. Take steps to gain trust by soliciting meaningful input, and communicate to all relevant stakeholders precisely what actions have been taken, what has worked, and what opportunities for improvement still exist.

**Recommendation VIII: Lead the Way.** Seattle Children’s should embrace the opportunity to set the standard for health equity in the delivery of pediatric care. Seattle Children’s should take up this challenge by making itself a learning laboratory for health equity initiatives, testing actions against changes, sharing its lessons learned, and leading the field in health equity internally, in research, and in the broader community.

**DETAILED RECOMMENDATIONS**

**Recommendation I: Make and Sustain an Unequivocal Commitment to Anti-Racism and EDI.** Demonstrate and communicate an unequivocal institutional commitment to anti-racism and EDI in all of Seattle Children’s operations. Have leadership announce this commitment and assign ownership for executing on it. Specify the actions that will be taken to demonstrate it, the timeline for doing so, and concrete plans for implementation, including how people will be held accountable.

Seattle Children’s leadership should reaffirm Seattle Children’s unequivocal commitment to addressing racial inequality by communicating that commitment in a clear, high-profile way. Steps to achieve this could include:

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1. Issue a public statement from the CEO and Board Chair acknowledging Seattle Children’s role in enabling and perpetuating systemic racism, taking responsibility for failing to address racial disparities sooner and with greater urgency, acknowledging deficiencies in reaction to events like the killing of George Floyd and the resignation of Dr. Danielson, reaffirming Seattle Children’s commitment to becoming an anti-racist organization, and setting forth specific actions that Seattle Children’s will take to demonstrate its commitment to anti-racism, including a schedule of milestones that leadership will be accountable for meeting. This statement can build on and incorporate elements of the unsigned statement regarding systemic racism published on the Seattle Children’s website on May 17, 2021.
2. Update Seattle Children’s mission, vision, and values statements to specifically include elements on prioritizing EDI and becoming an anti-racist organization, including elevating and emphasizing these commitments where language relating to equity is already included, such as the values statement.
3. Feature Seattle Children’s commitment to EDI and becoming an anti-racist organization prominently on the Seattle Children’s homepage, including as a first-line category in the dropdown menu/site navigation, as well as at facility entrances. This step can be taken in conjunction with the Seattle Children’s AROC Plan to introduce an anti-racism presence on the external website.
4. Listen to your people. Seattle Children’s employs experienced professionals with significant internal and external EDI and anti-racism expertise who should play a leading role in developing and tailoring the plans for implementing these recommendations and the metrics by which the hospital will hold itself accountable.

**Recommendation II: Lead the Institution with Purpose and Decisive Action.** Strengthen governance and oversight related to health equity, EDI, and anti-racism across the Seattle Children’s Hospital System, including by defining the appropriate role of the Board in holding Seattle Children’s leadership accountable for driving health equity, EDI and anti-racism goals; evaluating executive leaders to assess their decisiveness with respect to priorities and difficult EDI questions; incorporating EDI and anti-racism competence and goals in the mandate for and evaluation of all executive leaders; and ensuring that all executive functions and leaders are sufficiently resourced to establish, prioritize, and achieve EDI and anti-racism goals in their area of responsibility.

To empower EDI and anti-racism efforts, Seattle Children’s should consider strategies for strengthening governance, management, and oversight of those efforts, potentially including the following steps:

1. Formalize the Board’s role in holding management accountable for EDI issues without exercising outsized control over granular decisions and actions appropriately left to management. Consider avenues for the Board to hold leadership accountable for workplace health equity, EDI, and anti-racism, such as amending the charters of each Board committee to include workplace EDI, health equity, and anti-racism goals or establishing a permanent EDI Board committee. Institute periodic reporting concerning progress against EDI and anti-racism goals to the Board or EDI Board committee from the Center for Diversity and Health Equity (“CDHE”), the VP of EDI, the VP of HR, and the Chief Quality and Safety Officer. Ensure the Board is kept apprised of progress against EDI goals, and alerted before crises develop.

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2. Against the backdrop of this project, evaluate all Executive Leadership Team members to assess their ability to lead decisively and sincerely with respect to EDI and anti-racism priorities. It is critical to ensure that the right leaders are in place.
3. Task the CEO with developing measurable goals addressing issues highlighted in this Report, and reporting to the Board quarterly on progress.
4. Conduct an organizational structure audit to determine roles and responsibilities with regard to initiatives and departments impacting health and workplace equity, including Quality and Safety systems and the Code Purple committee. Act on audit results to make adjustments in assignments to ensure that priorities and goals for these areas can be fulfilled, and ensure that individual leaders are aware of their roles and responsibilities.
5. Set specific EDI and anti-racism goals for each member of the Executive Leadership Team, and develop and apply individual and collective key performance indicators (KPIs) to track and measure progress toward those goals. Create accountability for these goals in the performance evaluation process.
  - a. KPIs can incorporate existing tools for measuring progress. For example, diversity dashboards can show progress on diverse hiring, and quality indicators like engagement surveys or ambulatory scorecards can be segmented by race. Potential goals could include increasing diversity at specific levels of an Executive Leadership Team member's organization, implementing recommendations from CDHE and the HEDI Council, and improving critical health metrics. Advancement, compensation, and other benefits decisions should consider performance on applicable KPIs and other actions to embrace EDI and anti-racism principles, including collaboration with other Executive Leadership Team members.
  - b. Task the Executive Leadership Team with defining related, specific KPIs for non-executive leaders.
6. The Executive Leadership Team should coach all leaders, including middle managers, on how to communicate the value of EDI, emphasizing that all employees and departments are responsible for advancing EDI, not just those tasked with overseeing EDI efforts.
7. Assess candidates for all leadership roles on performance related to EDI and anti-racism objectives. For example, refer to these principles in job postings and include in hiring criteria, and pose interview questions on EDI and anti-racism or collect diversity statements from applicants.

**Recommendation III: Hire to Increase and Sustain Diversity.** Develop and implement enhanced strategies for recruiting, retaining, and promoting a diverse and inclusive workforce throughout the Seattle Children's Hospital System. Collaborate with CUMG, UW School of Medicine, and others as needed to increase racial and ethnic diversity among the providers who practice at Seattle Children's.

Seattle Children's should continue its efforts to increase racial and ethnic diversity across the organization, focusing on particular job categories. The following strategies could be used to improve EDI and achieve anti-racist goals at the recruitment and hiring stage, building on those already set by Seattle Children's in the AROC Plan:

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1. Prioritize recruiting individuals from groups underrepresented in the workforce for positions with clear paths for promotion and progression. Focus on increasing BIPOC representation among critical functions, including the Executive Leadership Team, the HR team and investigators, and patient care providers such as employed physicians and nurses. Ensure that diverse candidates are considered for career-oriented jobs with opportunities for advancement.
2. Continue building on efforts to ensure minimum diverse hiring slate requirements, including expanding diverse slate requirements to other roles throughout the Seattle Children's Hospital System and assessing whether the current 20% diversity standard applied to applicant pools for manager and director roles is high enough to meaningfully increase diversity. With respect to the current standard, analyze slates to identify whether, and if so, why, some managers are doing better than others on achieving diverse slates and consider whether the three-week expiration on the requirement for diverse slates is appropriate for all positions or should be longer for a sub-set. Additionally, consider whether the concept of "diversity" is sufficiently tied to race and ethnicity.
3. Recruit and hire racially and ethnically underrepresented leaders with health equity research backgrounds at CDHE and the Research Institute to attract national talent, coalesce existing scholarship activities, and position Seattle Children's Research Institute to be a leader in pediatric health equity research.
4. Solicit feedback from candidates from underrepresented racial and ethnic groups who decline offers, and take action to address their concerns.

Implement programs and processes for retaining, cultivating, and empowering employees from underrepresented racial and ethnic groups to excel throughout the employment lifecycle:

5. Institute a career framework that creates transparency and consistency in career paths by standardizing levels of seniority within each job family, and educating employees on career path options.
6. Develop and implement formal career mentorship and sponsorship programs to accelerate the advancement of employees in racial or ethnic groups that are underrepresented in the workforce. This program should include formal mentoring scheduling while also encouraging informal mentorship. Invite new hires in underrepresented racial or ethnic groups to participate in the mentorship and sponsorship programs within their first year of employment.
7. Create a succession planning process that requires each Executive Leadership Team member to assess and develop pipelines for underrepresented (and specifically BIPOC) candidates in the positions that fall under their management. Create career development plans for those candidates that give them growth opportunities and position them to succeed current leaders.

Critically, Seattle Children's should focus on increasing racial and ethnic diversity among non-employee providers:

8. Partner with CUMG and UW to promote increased racial and ethnic diversity of CUMG faculty, such as by establishing year-over-year goals in different categories and establishing accountability measures connected to these goals.

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9. To enable measurement of the organization's progress toward goals, insist that CUMG collect and provide Seattle Children's with CUMG physician demographic data annually.

### **Recommendation IV: Choose to Build and Sustain a Culture of Inclusion in the Workplace.**

Make choices concerning policies and practices that promote EDI and anti-racism at Seattle Children's. Invest in mandatory, recurring Seattle Children's Hospital-wide training programs focused on EDI and anti-racism. Incorporate EDI and anti-racism principles into all relevant workplace policies and procedures. Collect and use data to measure achievement of EDI and anti-racism efforts. Empower and train Human Resources to establish trust and effectively implement policies with EDI and anti-racism principles in mind.

Building and sustaining a culture of inclusion requires intentional choices by leadership concerning Seattle Children's policies and practices. We recommend a number of potential actions to demonstrate a commitment to these choices. To start, Seattle Children's should pursue a coordinated, mandatory EDI and anti-racism training effort that fills gaps in current training and creates accountability for participation:

1. Implicit bias training for the entire Seattle Children's workforce should be mandatory and recurring, and should continue to be tailored to the healthcare industry, Seattle Children's particular environment, and the specific roles of various personnel within the Seattle Children's Hospital System. Training should specifically provide tools for how to recognize and minimize microaggressions.
  - a. Make the Executive Leadership Team an ongoing, visible champion of the new Bias Reduction in Medicine-Leadership ("BRIM-Leadership") workshop series by communicating its importance to all leaders. Continue refining the BRIM training program and promptly expand program participation to all leaders.
  - b. Make implicit bias training a condition of admitting privileges or any other credentials needed to practice in the Seattle Children's Hospital System, and enforce suspension of those credentials when training lapses.
2. For nurses and first-impression staff (*e.g.*, main line operators, front desk, building security), consider providing training on interacting with patients and families who have limited English proficiency ("LEP") or who may require other specialized support. Training can focus on how to consider cultural sensitivities and support these patients and families.
3. Ensure that Seattle Children's Hospital completes plans to launch psychological safety training with an embedded anti-racism focus, such as emotional response or grief-awareness training. This intensive training should be focused on patient- and family-facing staff and their supervisors.
4. To address disparities in use of security calls involving patients and families, provide mandatory de-escalation training with EDI and anti-racism principles, not just to security, but to all patient-facing staff, including nurses and providers. Require that all staff receive the same standardized training with intensive training options if needed, and centralize responsibility for training requirements in one leader.
5. Implement tools to ensure accountability for required EDI training, including through a learning management system. Ensure that the system tracks and automatically alerts

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individuals and their supervisors of missed training deadlines. Impose consequences for missing training, including through the performance review and compensation processes. Consider including training completion rates of direct reports in supervisors' annual evaluations.

6. Make training accessible for all who take it, including making it available in multiple languages.
7. The VP of EDI should continually monitor the quality of the trainers and training materials to ensure that trainings contain the latest EDI and anti-racism information. Consider a mix of live and online training, and identify training modules that are engaging and interactive. Trainers should have a specialization in health organizations and health equity.

Seattle Children's should also incorporate EDI and anti-racism principles in relevant workplace policies, processes, programs, and institutions, potentially taking the following steps:

8. Expand the scope of CDHE and ensure that CDHE is sufficiently empowered, staffed, and resourced to fulfill its mandate and to appropriately support the HEDI Council. For example, increase resources for the CDHE Consultation Program to better publicize and respond to consult requests; increase CDHE's outreach to offsite clinics, including OBCC; and clarify CDHE's role in tracking and addressing racial disparity data in relation to Quality and Safety. Prioritize the retention of CDHE leadership.
9. Require everyone in the organization to have an EDI-related goal as part of their performance goals. Goals would ideally be mandatory, with accountability for falling short. There can also be aspirational goals, with extra benefits for meeting them.
10. Consider whether medical staff bylaws or granting clinical privileges can be used to hold CUMG faculty accountable for meeting Seattle Children's EDI and anti-racism goals for workplace and health equity, and for complying with Seattle Children's policies related to discrimination, harassment, retaliation, EDI, and anti-racism. Consider including a requirement to abide by such policies in contracts with non-employees providing services at Seattle Children's.
11. Continue the work of revising key Human Resources policies to highlight and prioritize EDI and anti-racism where applicable, building on the work done to update, for example, the Social Media and Corrective Action policies. Consider consulting with outside counsel or EDI experts to review and finalize revised policies with new EDI and anti-racism provisions. Policies should address microaggressions, disrespectful conduct, racist and other derogatory language, as well as consideration of EDI contributions and anti-racist behavior in transfers, promotions, recruitment, and performance evaluation.
12. Emphasize the prohibition on retaliation. Strengthen the "Reports of Noncompliance; Non-Retaliation" policy to clarify the prohibition on retaliation and how to report retaliation. Highlight the commitment to anti-retaliation in other relevant Human Resources policies, and cross-reference the non-retaliation policy to ensure that employees can easily access the policy. Enforce the Non-Retaliation policy with respect to those who make reports through eFeedback or any other channels.
13. Review, streamline, and clarify complaint reporting channels for employees, including anonymous reporting options, and ensure these channels are properly and clearly communicated to the workforce.

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- a. Update key Human Resources policies that currently lack information on reporting channels and include clear instructions in policies for how to submit anonymous reports via EthicsPoint.
  - b. Post the instructions for EthicsPoint widely throughout Seattle Children's Hospital and clearly display the instructions on CHILD.
  - c. Consider safeguards and improvements to the eFeedback system.
14. Audit the performance review process and ratings regularly to find and address areas of bias. To promote consistency in annual performance ratings and promotion decisions, review definitions and provide evaluators with training and examples. Consider instituting a "challenger" program in the performance evaluation and/or promotion decision process to ensure objectivity; such a program generally brings a "challenger" into personnel decision-making to ensure that decisions are based on objective criteria.
15. Modify policies and practices to increase meaningful participation in inclusion networks.
- a. Provide inclusion network leaders with sufficient allotted time during working hours to properly fulfill their inclusion network leadership responsibilities. Acknowledge inclusion network leadership activities in annual performance reviews, and consider compensating leaders for that work.
  - b. Require that supervisors and managers allow their direct reports who are inclusion network members to use the permitted two hours per month for inclusion network activities, as stated in the CHILD Inclusion Network FAQ. Regularly communicate this allowance to all employees.
  - c. Convey to Seattle Children's leaders the importance of supporting inclusion networks and employee engagement in the networks.
  - d. Make inclusion network opportunities and activities visible to employees in all roles, with a particular focus on workers who may not have regular access to CHILD or Seattle Children's email.

Seattle Children's should collect and use data to take a quantitative approach to assessing and improving workplace EDI and anti-racism efforts, including possibly the following:

16. Consistently track diversity metrics in hiring, performance evaluations, promotion, compensation, discipline, retention, and attrition. Implement a process to regularly review these metrics and take action to identify and improve disparities.
17. Continue conducting exit interviews with employees who resign, as well as with employees who transfer departments. Review the data to assess and address key drivers of turnover, especially where drivers differ for diverse populations. Encourage UW/CUMG to conduct similar exit interviews of faculty who have provided services at Seattle Children's, and to make that data accessible to Seattle Children's.
18. Track severance and separation agreements to identify any racial disparities in use, amount of severance, or content.

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The Human Resources function can be strengthened in several ways to increase employee trust in Human Resources and ensure Human Resources is aligned with Seattle Children's EDI and anti-racism commitment, including by considering the following changes:

19. Hire more Human Resources employees to significantly lower the Human Resources to employee ratio. Assess the ability of current Human Resources employees to effectively carry out and enforce Human Resources policies in a professional manner consistent with Seattle Children's EDI and anti-racism goals.
20. Strengthen the Human Resources complaint and investigation functions.
  - a. Provide Human Resources personnel with resources and training focused on investigation methodology and best practices, and training on interrupting implicit bias in workplace investigations. Consider designating certain Human Resources consultants with responsibility for sensitive Equal Employment Opportunity investigations, and ensure this group is adequately trained in how to conduct such investigations. Consider establishing a policy regarding when to engage independent outside counsel for investigations.
  - b. Provide clear information to complainants regarding the investigation process. Specify what information will and will not be provided to complainants upon completion of an investigation, and establish a close-out protocol to ensure consistency.
  - c. Continue to explore a new complaint tracking system to ensure that tracking is comprehensive and secure, to provide Seattle Children's with the ability to handle complaints consistently across the organization and maintain adequate records, and to ensure the ability to assess trends and problem areas.
  - d. Continue efforts to develop a disciplinary framework and procedures to hold individuals accountable for racist or discriminatory conduct, and to ensure all HR personnel follow these procedures.
  - e. Offer support to complainants and those who have experienced racist or disrespectful conduct following the close of an investigation, and follow up periodically to ensure they have not experienced retaliation or other adverse actions.
21. Execute on the AROC Plan to establish baseline data for race-related grievances and discrimination complaints. Regularly publish complaint metrics and outcomes for visibility to the workforce.
22. Develop a consistent and transparent process for investigating and resolving workplace complaints involving faculty. The process should clarify who will lead each investigation and provide Seattle Children's with greater transparency into complaint determinations and outcomes.

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**Recommendation V: Choose to Include All Patients on the EDI Journey.** Enhance health equity outcomes and patient and community trust in Seattle Children’s by implementing and upholding policies and processes that prioritize EDI and the eradication of racism for patients and their families. Increase investment in patient services that directly support BIPOC patients and their families, including patients with limited English proficiency. Strengthen quantitative efforts to collect and use data to assess areas for improvement in patient-focused EDI and anti-racism initiatives. Eliminate inequitable treatment in Seattle Children’s security and policing practices by implementing systematic policy changes, monitoring implementation, standardizing data collection, and reporting outcomes. Recognize, embrace, and prioritize the unique role OBCC plays in the Seattle Children’s Hospital ecosystem and in connecting Seattle Children’s to the local community.

Seattle Children’s should continue to modify policies and practices that impact patients and families to incorporate EDI and anti-racism principles and enhance health equity, including by focusing on patient services that directly support BIPOC patients and families. Seattle Children’s should continue to collect and use data to take a quantitative approach to assessing and improving patient-focused EDI and anti-racism efforts. Steps Seattle Children’s can take to achieve this goal include the following:

1. Embed EDI and anti-racism principles within the hospital’s Quality System, and recognize health equity as an indispensable responsibility of the Quality System. Along with the ongoing efforts to reorganize the reporting structure for the Quality System to better track and address disparities in health metrics, adopt a process that requires Quality and Safety entities to conduct root-cause analyses within a specified period of time on any metrics, clinical or otherwise, that reflect disparities in care or treatment based on race, ethnicity, or language. Implement a report-back plan to appropriate Executive Leadership Team members and the CEO once the analysis is completed. Consider implementing this procedure to examine the root cause of the racial and language disparity in central-line-associated bloodstream infections (“CLABSI”) rates.
2. Assess whether the Quality Improvement Steering Committee (“QISC”) subcommittee structure has appropriate administrative support and staffing, and take steps to ensure accountability for issues identified by subcommittees. Promote collaboration between QISC and CDHE by holding leaders accountable for shared goals.
3. With regard to patient satisfaction surveys, update metrics-analysis processes to consider a broader range of EDI-related data. Continue publicizing the results of the satisfaction surveys to the Seattle Children’s workforce, and also develop and publicize action plans to address gaps identified by the satisfaction surveys.
4. Address missed appointments in a holistic, equitable way. Build on the strong work done to conduct a root-cause analysis on missed appointments at the South Clinic, and expand that targeted analysis at other relevant locations, including OBCC. Consider barriers that result in missed appointments for different racial and ethnic patient groups and determine whether and how Seattle Children’s might address these.

Seattle Children’s should consider specific steps to improve services for LEP patients, including the following:

5. Assign a single Executive Leadership Team member to be responsible for translation-service oversight and for compliance with the Interpretation and Translation Policy. Arrange for

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quarterly reporting to the Board regarding all translation programs, including metrics reporting and opportunities for improvement.

6. Significantly increase funding and staffing for Health Literacy and Communications, with a focus on expanding resources for translation services and investing more in staffing and support for Patient Navigator and cultural navigator programs.
  - a. Increase the availability of translated written materials and implement a strategy for translating Seattle Children's webpages into multiple languages. Establish measurable goals and tracking to reduce the turnaround time for translation requests, and remove any requirement that translated materials must benefit a minimum number of patients for a translation request to be processed. Continue efforts to improve the quality and accessibility of translation and interpretation services.
  - b. Ensure that all patients and families requiring navigator services can access them. Make navigator programs available outside the main campus, review and improve communications regarding navigator programs, and ensure Seattle Children's staff know how to make referrals to navigator programs.
7. Cultivate a culture of using interpreters in every encounter with LEP patients and families through consistent Executive Leadership Team messaging that explains the importance and mandatory nature of these services. Enforce the Interpretation and Translation Policy through trainings and accountability mechanisms.
8. Schedule sufficient time for nurses, physicians, and other faculty to communicate with families and patients through interpreters when necessary.
9. Significantly increase funding and staffing for social workers who support and advocate for families in health crises and ongoing care situations.

Seattle Children's should reiterate its understanding of the impact of policing practices and Code Purples on BIPOC patients and families and eliminate racial disparities in Code Purple calls. Seattle Children's can take the following steps to achieve this:

10. Clearly identify the roles of the Code Purple Leadership team in implementing Code Purple reforms, and identify members of the Executive Leadership Team responsible for working with the Code Purple Leadership team to implement reforms. Create accountability mechanisms for the Executive Leadership Team in implementing Code Purple reform goals.
11. Increase and standardize data collection, analysis, reporting, transparency, and accountability around security escalations, including Code Purple calls, Security Assists, Caspar alerts, Child Protective Services calls, and law enforcement calls. Consider independent oversight by the Board or a consultant that reports directly to the Board for implementation.
  - a. Track information for analysis, including departments, roles, and people responsible for initiating Code Purple calls, patient and family demographics for each Code Purple call, and reasons for initiating Code Purple calls, including whether the call was for assistance with a physical threat, medical intervention, or related to a patient's care plan. Assess underlying causes for racial disparities in Code Purple

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- calls, and develop an action plan for improvement that includes clear allocation of responsibility and accountability.
- b. Establish a standardized Code Purple pathway, meaning a guidance document that would include indicators for Code Purple, a definition of reasons and related behaviors for which a Code Purple is appropriate, and a personal “time-out” checklist. Ensure policy guidelines are enforced, and that individuals who deviate are held accountable. Require each unit to post the pathway in accessible locations and incorporate it into orientation and competency requirements, and ensure efforts are consistently implemented across the institution.
  - c. Create a page on CHILD where results of the Code Purple Quality Review are accessible to the entire Seattle Children’s workforce.
12. Provide monthly or quarterly data readouts from CDHE to patient-facing staff regarding security-escalation data, including patient/family demographics and circumstances.
  13. Monitor the effectiveness of the new Policy to Guide Engagement with Law Enforcement. Review other relevant policies to ensure that reliance on policing is minimized.
  14. Assess whether use of background checks on patient family members is appropriate and necessary. If so, adopt guidelines clarifying appropriate circumstances under which to conduct background checks on family members and how that information can be used by the Seattle Children’s security services. Ensure the guidelines address the need to consider implicit bias before processing a requested check.

Seattle Children’s should place additional focus on EDI relevant to OBCC, considering its posture as a unique and vital facility for Seattle’s BIPOC communities. Seattle Children’s should embrace the opportunity to be a leader in providing equitable pediatric primary care by increasing support for and collaboration with OBCC and prioritizing the repair of trust between OBCC and Seattle Children’s, including by considering the following steps:

15. Support leadership at OBCC by establishing a direct communication channel between OBCC medical and administrative leadership and the CEO (such as a quarterly meeting), by requiring at least twice-monthly onsite visits to OBCC by the Seattle Children’s vice president with responsibility for the clinic, and by clearly defining and publishing the OBCC leadership organizational structure. Clarify roles, accountability, and authority of OBCC leaders and teams, as recommended in the Genesis report.
16. Seattle Children’s and OBCC should collaborate to adjust metrics currently being collected to better align with issues faced by the OBCC patient and family community and community services provided by OBCC, while at the same time confirming that baseline metrics (*e.g.*, Early and Periodic Screening, Diagnostic, and Treatment) and demographics are collected for all visits, including race, ethnicity, gender, language, income level, and zip code. Assess whether additional metrics should be collected, including Emergency Department utilization, visits to other facilities, multiple service line use, and metrics recommended in the Genesis report (*e.g.*, percentage of families referred for social health needs; percent increase in non-billable visits; visit volumes against budget; net new patients; and time to next and third-next appointments). Continuously assess and adjust metrics to reflect the evolution in clinic maturity and capacity, and provide regular updates and appropriate administrative support to OBCC providers to enable them to monitor OBCC’s performance.

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17. Review OBCC's fiscal plans and budget and ensure that it is adequately and fairly supported by Seattle Children's. Evaluate and adjust OBCC fundraising obligations as compared to other clinics as necessary.
18. Review the obligations of OBCC workforce members to engage in fundraising activities and ensure equitable treatment as compared to other facilities' workforce members. Consider tasking the Foundation with reviewing OBCC's fundraising role and obligations.
19. Assess the financial, operational, and physical state of the OBCC Yesler facility through a comparative review against other Seattle Children's clinics. Focus on patient experience, facility appearance, equipment disparities, and patient offerings, and implement upgrades at Yesler as needed.

**Recommendation VI: Listen to the Workforce, Patients, and Families.** Enhance tools for Seattle Children's to receive feedback and insights and analyze data related to the workforce, patient, and family experience, with a focus on measuring and addressing EDI, anti-racism, and health equity goals.

EDI and anti-racism programs require continuous feedback to be effective. In addition to existing plans to improve feedback mechanisms, consider the following:

1. Supplement HEDI Council and CDHE outreach and listening sessions with regular online, anonymous focus groups consisting of workforce members. Consider publishing for the workforce aggregate information about feedback obtained through these various sessions and groups.
2. Continue regular meetings between the Executive Leadership Team and the Black and African Heritage Network ("BAHN"), and hold similar regular meetings with all relevant inclusion networks to identify and discuss issues related to EDI and anti-racism. Ensure these meetings incorporate a formal mechanism for members of inclusion networks to communicate feedback to the Executive Leadership Team.
3. Institute a standardized schedule of "rounds" for all Executive Leadership Team members to periodically visit all Seattle Children's facilities and departments. These rounds should provide the opportunity for Executive Leadership Team members to obtain feedback by meeting separately with families and with members of the workforce.
4. Continue to conduct employee engagement surveys and to include EDI-focused questions; continue to monitor trends in employee engagement, disaggregate the data by select demographics such as race, gender, and tenure, and report to the workforce on trends and efforts to address them.

It will also be critical to continue collecting and considering the unique perspectives and concerns of patients and families, particularly LEP patients and families and those from underrepresented racial and ethnic backgrounds:

5. Prioritize revision of the Patient Rights and Responsibilities document to simplify it, make it more patient-friendly, emphasize Seattle Children's commitment to EDI and anti-racism, and describe complaint procedures, including anonymous channels.

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6. Enhance patient satisfaction surveys to include specific questions concerning patient experience with discrimination or differential treatment based on race, ethnicity, or language ability, and ensure demographic data is collected or accessible to enhance analysis.
7. Prioritize EDI improvements to the eFeedback tool and consider whether additional data related to race, ethnicity, or language should also be tracked. Clarify for employees how to report equity concerns, including race discrimination and microaggressions, within eFeedback. Enhance the process for regularly reviewing and analyzing data collected through eFeedback to identify and report on trends and respond to incidents involving alleged racism or discrimination. The eFeedback page should contain information about anonymous reporting available via EthicsPoint.
8. Publicize patient and family complaint channels in multiple languages. Complaint channels should be made available in multiple formats: online as well as on paper at all Seattle Children's facilities, in patient rooms, and on posted signage throughout Seattle Children's. Assign responsibility for evaluating complaints and ensuring appropriate organizational responses to a senior leader, perhaps a member of the Executive Leadership Team.
9. Dedicate additional resources to the Patient and Family, Staff Support and Engagement ("PFSSE") team including so that PFSSE staff can increase shift coverage and be consistently visible at Seattle Children's to receive, and actively solicit, feedback from families, patients, and staff.

**Recommendation VII: Communicate Transparently.** Commit to communicating with the Seattle Children's community regarding progress and challenges. Take steps to gain trust by soliciting meaningful input, and communicate to all relevant stakeholders precisely what actions have been taken, what has worked, and what opportunities for improvement still exist.

The following steps could help achieve this goal:

1. Improve and standardize Executive Leadership Team communications and hospital-wide reporting on EDI and anti-racism efforts. In tandem with similar goals detailed in the AROC Plan, ensure that Executive Leadership Team communications on this topic are clear and define actions being taken, values and goals underpinning these actions, and who is accountable for which AROC goal. Messaging should clearly state that the entire Seattle Children's workforce is expected to support the AROC values and plan implementation.
2. Make regular announcements to the workforce from the Executive Leadership Team and VP of EDI to provide updates as these assessment recommendations are implemented and other EDI and anti-racism efforts and improvements are made. Ensure that these updates are specific and closely aligned to actual progress.
3. Commit to transparency in auditing and reporting data and outcomes related to key EDI initiatives including workforce demographics, workforce engagement and patient satisfaction, and disparities in care. Empower and resource CDHE to own this function and manage the reporting and auditing process. Commit to undertaking and reporting on the rigorous analysis of data, potentially through the use of outside experts, so that these efforts are meaningful and translate into real action.

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4. Commit to transparency with respect to Seattle Children's funding of OBCC generally and Othello specifically, particularly as to the Board and key community stakeholders. Consider publishing and updating periodically the level of OBCC's operational budget funded by Seattle Children's, as well as the sources and uses of funding related to development of the Othello clinic.
5. Assess internal marketing and communications capabilities to ensure that Seattle Children's can provide creative, responsive, intentional communications on EDI and anti-racism efforts to internal stakeholders and the workforce.

**Recommendation VIII: Lead the Way.** Seattle Children's should embrace this opportunity to set the standard for health equity in the delivery of pediatric care. Seattle Children's should take up this challenge by making itself a learning laboratory for health equity initiatives, testing actions against changes, sharing its lessons learned, and leading the field in health equity internally, in research, and in the broader community.

The following actions could potentially help achieve this goal:

1. Ensure a concerted and intentional effort to incorporate health equity research findings from the Research Institute and CDHE's Health Equity Research Program into clinical practices at Seattle Children's to address health disparities. Designate a member of the Executive Leadership Team to oversee this process and to work with the Research Institute, CDHE, and other hospital leaders to ensure implementation of changes in clinical practices responsive to research findings. Increase resources for CDHE's Health Equity Research Program to expand health equity research at Seattle Children's.
2. Share best practices in tracking clinical and quality metrics related to health equity with the industry. The Accreditation Council on Graduate Medical Education through the Clinical Learning Environment Review program (ACGME-CLER), Leapfrog, and the *US News and World Report* have all recently begun exploring equity as part of their survey programs. Seattle Children's is well positioned to help define key metrics and benchmarking in this domain going forward and should embrace the opportunity to do so.
3. Continue to study ways to attract more research participants from underrepresented groups. For example, consider working with the finance and audit groups to determine where exceptions can be made to policies or practices that may be obstacles to providing financial incentives for BIPOC participants.
4. Ensure that the Chief Financial Officer incorporates all EDI and anti-racism efforts that meet the standard of Community Benefit into the institution's annual IRS 990 and schedule H public filings.
5. By leveraging its Pediatric Grand Rounds platform, Seattle Children's should coordinate with the Department of Pediatrics of the UW School of Medicine to consider starting and supporting a monthly or bi-monthly equity series designed to bring in leading scholars and subject matter experts as visiting professors to broadly educate and engage the organization at the trainee, employee, faculty, administrator, executive, and governance levels.

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6. Encourage and support the UW Department of Pediatrics in establishing a system of relative value units (RVUs) that recognize contributions and efforts in the domain of advocacy and service, with an emphasis on promoting equity scholarship.
7. Encourage and support a collective goal of the UW Department of Pediatrics to increase academic productivity in the domain of equity by 5% year-over-year for the next five years as measured by the number of publications and national presentations.
8. Review the early career development and internal K-award programs sponsored and supported by the Seattle Children's Research Institute for faculty underrepresented in medicine (URiM), to ensure program access is equitable between PhD basic scientists and clinician-scientist investigators.
9. Continue increasing the use of National Institutes of Health ("NIH") Diversity Supplements to diversify research faculty, trainees, and staff at the Research Institute.
10. Review the role, structure, and diversity of external advisory groups such as the Community Advisory Council and the Family Advisory Council and ensure appropriate attention to and use of feedback.
11. Develop an overarching and centralized strategy and coordinated effort to enhance Seattle Children's partnerships with third-party organizations that can help address the underlying needs of underserved communities and communities of color in the Seattle Children's service region. This could include: branching out from targeted youth programs to connect with parents and families, either directly or through organizations such as aid groups and faith centers; partnering with local public health agencies to provide information on prevention and wellness programs; and coordinating funding from a central decision-maker at Seattle Children's to ensure equitable resources are provided across outreach efforts.