



THE AMERICAN ORTHOPAEDIC ASSOCIATION®

*Leading the profession since 1887*

## CORD Town Hall: Fostering a JEDI Residency Program

(Just, Equitable, Diverse, and Inclusive)

Practical Tools and Tips to Support URM Residents

8:00pm – 9:30pm EDT

Continue the Conversation  
on Twitter: @aoa1887;  
#AOACORDJEDI

8:00PM Introduction

8:05PM Panel Discussion

8:30PM How Program Directors Can Better Support URM Residents

9:05PM Q&A/Open Discussion

9:30PM Summary & Adjourn

*Raise your hand to verbally ask a question.*

*All questions will be addressed during the Q&A session following all presentations.*

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Thank  
You

# Ways to participate

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01



Raise your hand to ask a question **verbally** during the Q&A session at the end. In order of hands raised, you will receive a notification, telling you to unmute yourself.

02



Chat with panelists and/or all attendees. Send a chat to panelists if you have a technical issue.

03



Ask questions in the Q&A box if you'd prefer not to be unmuted and would like a written response to your question.

# Agenda

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8:00PM Introduction

8:05PM Panel Discussion

8:30PM How Program Directors can better support URM residents

9:05PM Q&A/Open Discussion

9:30PM Summary & Adjourn



# **RECRUITING AND ATTRACTING TO YOUR PROGRAM**

**Anthony Johnson, MD FAAOS FACS FAOA  
Orthopaedic Surgery Residency Program Director  
Chair, AAOS Diversity Advisory Board**

**AOA/CORD Town Hall - Fostering a JEDI Residency Program  
(Just, Equitable, Diverse, and Inclusive)  
30 September 2020**



# Disclosures



# Compare These Two Candidates for Your Residency Program

## Candidate #1

- Foreign born
- Naturalized US Citizen
- English Second Language
- Low SES
- 3.5 GPA High School
- 2.85 GPA Graduate School
- 24 MCAT
- 208 USMLE Step-1

## Candidate #2

- Low SES URM
- Team Captain Track Team Junior & Senior year
- State Champion in Track
- National Merit Finalist
- Dean's List, USMA
- AOA, UCLA
- UCLA Medical Alumni Award for Community Service

# Real Talk Moment

## Candidate #1

- What is your mental model?
  - Country of Origin?
  - Male or Female?
  - Race/Ethnicity?
  - Any other attributes?
  - Positive or Negative Initial Impression?
  - Invite to Interview at your Program?

## Candidate #2

- What is your mental model?
  - Country of Origin?
  - Male or Female?
  - Race/Ethnicity?
  - Any other attributes?
  - Positive or Negative Initial Impression?
  - Invite to Interview at your Program?



# Compare These Two Candidates for your Faculty

## Candidate #1

- 63<sup>rd</sup> Percentile PGY-4 OITE
- 69<sup>th</sup> Percentile PGY-5 OITE
- Not selected for fellowship out of residency
- Passed ABOS Part-1 with 71% (69% minimum passing score)
- Chief of Orthopaedic Surgery, small community hospital post-residency
- Former military with multiple deployments
- Presidential Volunteer Service Award for > 4,000 hours of community service
- Assistant Chief of Orthopaedic Surgery, large academic medical center
- Member of multiple committees of national Orthopaedic societies

## Candidate #2

- Most published resident in history of program at time of graduation
  - Chair designates as Graduate with Honors
- Joint Special Operations Task Force Orthopaedic Surgeon for 3 combat deployments with 2 Bronze Star medals and Combat Medic Badge
- Service Chief or higher at every hospital since ABOS Diplomate
- AAOS/OTA/SOMOS/POSNA Course Director
- AOA/AAOS/ABOS Fellowship Education Consortium
- President of Orthopaedic Society
- Chair of large academic Orthopaedic medical department
- > \$26M in Extra-Mural grant funding
- Leadership roles in multiple committees of national Orthopaedic societies

# Real Talk Moment

## Candidate #1

- What is your mental model?
  - Country of Origin?
  - Male or Female?
  - Race/Ethnicity?
  - Any other attributes?
  - Positive or Negative Initial Impression?
  - Invite to Interview at your Program?

## Candidate #2

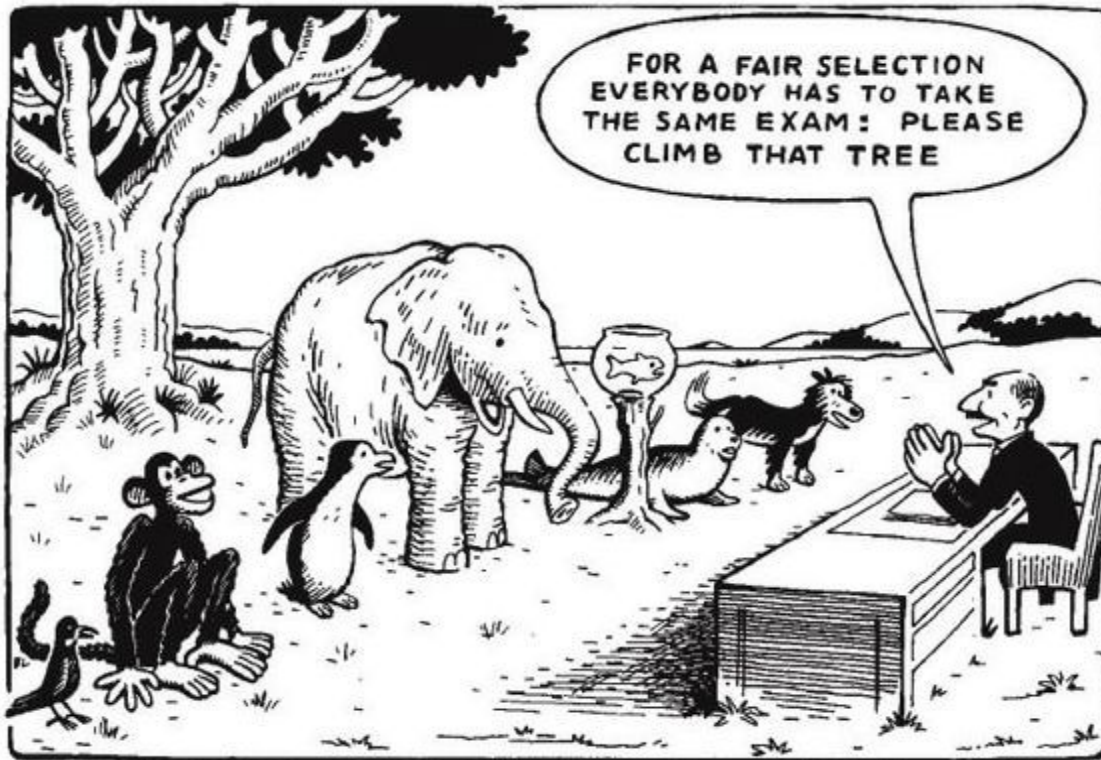
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  - Country of Origin?
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  - Any other attributes?
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# Consequence of Bias



# (Mis)Communication





# Well Intended But Off the Mark





# Recommended Tips

- Clear Demonstration of Leadership Support
  - Welcoming and Inclusive Culture
  - Consider DEI Committee if one does not exist
- Communication of “Welcoming and Inclusive Culture”
  - Use Social Media
  - Highlight Diversity efforts
    - Especially Faculty
  - Resident and Faculty Wellness Efforts
- Establish Recruitment Committee to assist Interview & Selection Committee
  - Recruitment Committee is sub-Committee of Interview & Selection

# Recommended Tips

- Interview & Selection Committee
  - Annual Implicit Bias Training
    - No photos on reviewed applications
    - List of “Do not/Can not ask” questions
  - Holistic Review of Candidates
    - Establish “minimal acceptable” scores – rather than seeking highest scores – as initial screening criteria
    - Transparent Grading Rubric for Interview Selection
      - Community service, Demonstrated leadership, Inquisitiveness/Research, Grit
    - No penalty for lack of “away rotations” to avoid penalizing low SES
  - Academic Profile only used during selection for interviews
    - All interviewees judged to be equally qualified
  - Ranking based solely on interview and cultural/mission fit
- Recruitment post interview (Top-25)
  - PD, APD, and Recruitment Committee
  - Communication post-interview vs. 2<sup>nd</sup> look interviews (again to avoid penalizing low SES)

# Thank You



The background of the slide is a light gray gradient with several realistic water droplets of various sizes scattered across it. The droplets have highlights and shadows, giving them a three-dimensional appearance. The text is centered on the slide.

# **CORD TOWN HALL: FOSTERING A JEDI RESIDENCY PROGRAM ONBOARDING AND MAKING CONNECTIONS**

A. RASHARD DACUS, MD, FAOA

R. RANDALL MCKNIGHT, MD

The background features a light gray gradient with several realistic water droplets of various sizes scattered in the corners. The droplets have highlights and shadows, giving them a three-dimensional appearance. The text is centered in the upper portion of the slide.

# PROGRAM DIRECTOR/FACULTY PERSPECTIVE

# TRANSITION TO RESIDENCY

- PREPARATION PRIOR TO ARRIVAL
  - PASS STEP 2, SPEND TIME WITH YOUR HOME ORTHO PROGRAM, PRACTICE
- SET YOURSELF UP TO BE SUCCESSFUL
  - LIVE CLOSE TO WORK, PREPARE PHYSICALLY/MENTALLY, KNOW THE PROGRAM
- GET SETTLED IN EARLY
  - FINISH PAPERWORK EARLY, ARRIVE AS SOON AS POSSIBLE
- STUDY THE BASICS
  - LABS, MEDS, ANATOMY



# FINDING ADVOCATES

- CONTACT THE RISING 2<sup>ND</sup> YEARS
- BUILD ON CONNECTIONS MADE DURING AI AND INTERVIEW PROCESS
- SEEK OUT OPPORTUNITIES
  - DON'T SHY AWAY FROM YOUNG FACULTY
- DON'T RUSH IT OR FORCE IT
  - IT IS A 5 YEAR PROGRAM
- ASK
  - MOST FACULTY ARE THERE TO TEACH AND EMBRACE ACTIVE LEARNERS

# SUPPORT MECHANISMS

- STAY ENGAGED WITH FAMILY
  - HELP THEM UNDERSTAND YOUR NEW LIFE
  - REDUCES ISOLATION
- **TAKE TIME FOR SPOUSE OR SIGNIFICANT OTHER**
- FIND AN OUTLET
- PERIODICALLY PERFORM REFLECTION
  - WHAT HELPED YOU GET TO THIS POINT
- DON'T BE AFRAID TO ASK FOR HELP
  - CO-RESIDENTS, SENIOR RESIDENTS, PD, MENTORS, GME

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# RESIDENT PERSPECTIVE

# TRANSITION TO RESIDENCY

- ESPECIALLY IMPORTANT THIS YEAR
- FORMAL TRANSITION TO INTERN SKILLS
- INTRODUCE ALL SKILLS THAT MAKE A GOOD RESIDENT

# FINDING ADVOCATES

- KNOW WHO YOUR PROGRAM'S ADVOCATES ARE
  - PEOPLE WHO HAVE DEMONSTRATED DESIRE AND ABILITY IN PAST
  - ASK YOUR RESIDENTS IF YOU DON'T KNOW
- BE DELIBERATE ABOUT PRESENTING OPPORTUNITIES
- ENCOURAGE RESIDENTS TO ADVOCATE FOR THEMSELVES
- ENCOURAGE PARTICIPATION IN THE "INFORMAL" ACTIVITIES

# SUPPORT MECHANISMS

- ENCOURAGE FORMAL AND INFORMAL SUPPORT
  - RESIDENCY-WIDE (FACULTY/SENIOR/JR MENTORS)
  - INSTITUTION-WIDE
  - NATIONAL (SNMA/NMA, NTH DIMENSIONS, RUTH JACKSON, CONFERENCES, ETC)
- DIRECT, TIMELY, REGULAR FEEDBACK
  - QUARTERLY MEETINGS, END OF ROTATION, END OF CASES
- ENSURE DIVERSE RESIDENT SELECTION
- ACCEPT AND SUPPORT "DIFFERENT"



# Fostering a JEDI Residency Program

Melvyn Harrington, MD, FAOA

Professor

Residency Program Director

Adult Reconstruction Fellowship Director

Vice Chair for Diversity and Inclusion

Department of Orthopaedic Surgery

Baylor College of Medicine

Houston, TX

# Disclosures

- Zimmer Biomet - Consultant
- J. Robert Gladden Orthopaedic Society - BOD
- American Orthopaedic Association – Executive Committee
- Arthritis Foundation, Houston Community Leadership Board
- Movement is Life National Caucus to Eliminate Musculoskeletal Health Disparities, Steering Committee

# Problems

Understanding what is really  
happening in your program

Opening lines of communication

# COMMUNICATION!

- Open door policy
- Regular meetings with residents and leadership
- Mentor program
- Take any concerns seriously
- Utilize institutional resources





# CORD Town Hall: Fostering a JEDI Residency Program

Linda Suleiman, MD

Assistant Professor of Orthopaedic Surgery & Medical Education  
Adult Hip and Knee Reconstruction & Replacement

Assistant Dean of Medical Education  
Director of Diversity and Inclusion for Graduate Medical Education



# Facing Implicit Bias and Microaggressions

- Addressing implicit bias is NEVER easy
- It's difficult to contemplate the possibility of harboring unconscious attitudes or stereotypes
- Implicit bias affects matching residents into our programs and mentorship/sponsorship
- **What is our responsibility as Orthopaedic Educators**

Unconscious bias directly affects not only who gets hired, developed and promoted but also



The ability of a team to be high performing



The effectiveness of leadership decision making



The health, or lack thereof, of an organization's culture



The success of an organization



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## Inclusive Environment

Task Force on Inclusion and Bias

Latest Curricular Updates

Resources

**Curriculum Checklist**

Letters of Recommendation

## Inclusive and Bias Free Curriculum Checklist

This checklist is adapted from the *Checklist for Assessing Bias in Medical Education Content* developed by Dr. Amy Caruso Brown at SUNY Upstate Medical University. We use it with Dr. Caruso Brown's permission. You can also view her webinar **De-Biasing Medical Education: A Checklist Methodology**.

### How to Use It

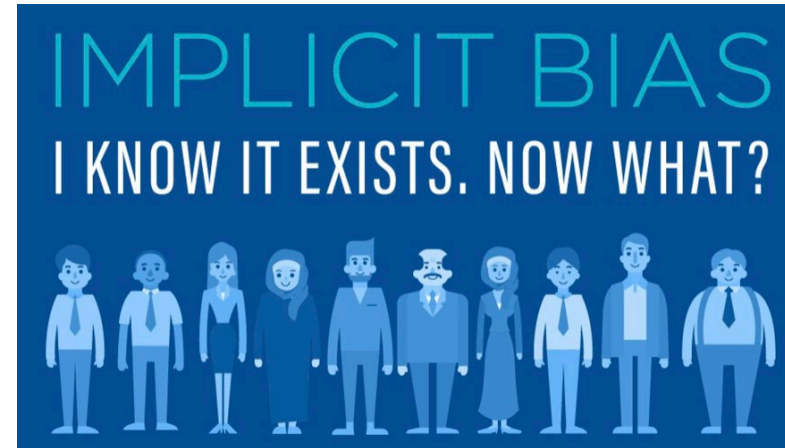
When creating or reviewing educational content for Feinberg students and trainees, the following questions can encourage reflection on how race, gender, and other socioeconomic factors are represented your content. Please consider whether one or more indicators (race, gender, age, etc.) is discussed in your educational content (this should include photos). If your answer is "yes" to any of the questions below, expand the area to evaluate recommended/preferred delivery of this content.

This checklist can be used to evaluate a variety of teaching content including (but not limited to) lecture slides, learning guides, clinical vignettes, multiple-choice questions, case-based learning materials and standardized patient encounter scripts.

Please note: These examples require some awareness of content across sessions, units and courses. Remember that learners can recognize patterns of bias that a single lecturer or facilitator may not appreciate. When reviewing the details of a case study or vignette, we recommend thinking about how it would affect learners if every patient with that condition was presented as being a particular race, ethnicity, sexual orientation, etc.

# How to mitigate implicit bias and microaggressions?

- Reflection
- Don't Stereotype
- Perspective
- Identify Blind Spots
- Slow Down





<https://orthodiversity.org>



**ODLC Founder and CEO Dr. Erica Taylor** welcomes you to our network. We have a robust team of Board Advisors who strengthen the footprint of our organization. Through education and dialogue, we look forward to our members staying connected to ODLC Leadership.



Dr. Linda Suleiman  
Focus: Medical  
Education



Dr. Rashard Dacus  
Focus: Professional  
Development



Dr. Julius Oni  
Focus: Networks

## Advancement Of Our Orthopaedic Leaders Of Diversity, Equity, And Inclusion WHERE DO WE START? HOW DID WE GET HERE? WHERE ARE WE GOING?

**Diversity, equity, and inclusion** in healthcare is a progressive discussion, particularly in orthopaedic surgery. There are a number of areas that must be addressed to combat structural inequities. A significant missing link is equipping our diversity leaders with the abilities to assess learning environments, strategize effective interventions, and accurately measure the impact of change initiatives. With additional skills, these leaders can be **empowered** to address the deep-rooted issues behind cultural transformation in challenging environments





Thank you

[Linda.suleiman@nm.org](mailto:Linda.suleiman@nm.org)





## **MaCalus V. Hogan, MD, MBA, FAOA**

Vice Chair and Residency Program Director

Senior Medical Director, Orthopaedic and Musculoskeletal Care Services, UPMC Health Plan

Chief, Division of Foot and Ankle Surgery

Department of Orthopaedic Surgery and Bioengineering

University of Pittsburgh School of Medicine-University of Pittsburgh Medical Center





# Avoiding the “Pile-on”



# COMMUNICATION

# ASK QUESTIONS

TALK TO EVERYONE.....NOT JUST WHO  
WANTS TO TALK TO YOU.....

**TAKE ACTION**



*With great power comes great responsibility!*



# Thoughts

- This won't be easy and WON'T go away!
- Must fill this vacuum of challenge and push to be great!
- Engage → Listen → Discuss → Plan Together → Avoid Distractors

***Maybe Best Apart...But Better Together!***



*Be ahead of the times.....*





**IN TIMES OF CRISIS,  
THE WISE BUILD  
BRIDGES, WHILE THE  
FOOLISH BUILD  
BARRIERS.  
WE MUST FIND A WAY  
TO LOOK AFTER ONE  
ANOTHER AS IF WE  
WERE ONE SINGLE  
TRIBE.**

**~ T'Challa**

# Questions/Discussion

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Practical Tools and Tips to Support URM Residents

Please remember to complete the evaluation survey.





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Coming Soon:  
2021 Virtual Spring CORD  
Conference

*Registration opening*

*November 2020*

Questions?  
Email [cord@aoassn.org](mailto:cord@aoassn.org)

2021 Virtual Spring CORD Conference  
*Thursday, March 11, 2021*  
*7:00pm – 10:00pm EDT*

**Orthomatch 2021: Opportunities  
and Challenges created by the  
COVID-19 Pandemic.**  
**What did we learn?**