CHARTING THE PATH TOWARDS INCLUSIVE EXCELLENCE

2012 School of Medicine Diversity Report Updates
April 2013
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Office of Diversity & Inclusion
belonging, engagement, achievement
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CHARTING THE PATH TOWARDS INCLUSIVE EXCELLENCE

School of Medicine Diversity Initiatives Update
April 2013
In response to President Brodhead’s directive last September, we submitted a robust diversity report that aimed to provide an overview of the current thinking and strategic direction for diversity and inclusion in The School of Medicine as well as reflect on a sampling of efforts and accomplishments upon which we planned to build.

Per the President’s instruction, the following update focuses in on three specific initiatives outlined in our initial report to reflect on progress made to date.
I. Diversity Strategic Planning Sessions

In our September report, we relayed that in order to build leadership accountability and influence active forward movement, all Department Chairs and Institute/Center Directors would be expected to develop a Diversity Strategic Plan (DSP) as part of their formal FY2013 success metrics upon which they will be reviewed.

Progress on this goal...

The strategic planning process begins with a meeting between the Chair and the Chief Diversity Officer to initiate “big picture” thinking and a discussion about the relevance of diversity and inclusion to the department’s current opportunities and challenges.

To date, 100% of the Basic Science Chairs and 69% of Clinical Chairs have engaged in at least one consultative session with our Chief Diversity Officer. The goal of these meetings is to help stimulate thinking broadly about diversity – beyond the usual “counting of heads” so that Chairs develop a robust and meaningful approach to their departmental diversity strategic plans.

A framework for creating an effective Diversity Strategic Plan (DSP) was developed with the goal of providing guidelines to help Chairs structure their department’s plan.

7 Elements of An Effective Diversity Strategic Plan (DSP)

- Leadership Engagement & Excellence: “Modeling The Way”
- Foster An Inclusive Climate
- Recruitment & Talent Acquisition: “Casting A Wide Net”
- Pipeline: “Priming the Pump”
- Retention & Engagement: “Thriving vs. Surviving”
- Take Periodic Data Snapshots: “Measurement Matters”
- Create Inclusive Academic Learning & Research Environments
Working sessions have been conducted for each constituency (Basic Science Chairs, Clinical Chairs, Institute and Center Directors) to introduce the DSP framework and distribute School-wide as well as department level data to help inform/shape departmental plans.

Customized data reports were created and distributed for each department that included the following:

- AAMC Diversity & Engagement Benchmarking Survey Data
  - Departmental & SoM breakdown of survey questions by item #
  - Respondent demographics
  - Summary of qualitative comments
- Current faculty demographics (Departmental and SoM)
- 2010 Faculty Survey Highlights (for purpose of thematic comparison on diversity related items)
- Tools and reference articles

A comprehensive analysis of qualitative themes has been completed based on 600 open ended survey comments in response to the prompt "We value any additional comments you have on what is working well with respect to diversity and inclusion at the SoM as well as what are some of the areas for improvement."

An in depth report is in the final stages of completion and will disaggregate the qualitative data based on key demographics (e.g., gender, race, function/position, faculty/staff/student) to inform going forward strategies and identify any patterns and trends of specific identity groups that warrant further exploration or targeted strategies. A summary of findings and recommendations from this report will be communicated at an inaugural Dean’s Diversity Senior Leadership Retreat in June. Subsequently this report will be shared with Chairs to help inform and shape the direction of the second year of our diversity strategic planning process.
II. **Recruitment & Talent Acquisition: “Casting a Wide Net”**

As reflected in the full diversity report submitted in September, inherent in our mission to educate clinicians and scientists who are fully engaged and equipped to serve an increasingly diverse society, we seek to attract and retain the very best people. This can only be accomplished by appealing to a diverse pool of applicants who feel welcome once they are here. We are striving to develop a comfortable and inclusive culture that attracts and retains outstanding faculty, students and staff from a large and diverse talent pool. Attracting outstanding, diverse talent helps to build a more representative academic community by getting our “unfair share” of potentially small talent pools.

To ensure that we are casting the widest net to attract highly talented diverse candidates, an expectation was established to ensure that the Chief Diversity Officer (CDO) is engaged in the process for all senior level searches.

**Progress on this goal...**

To date, the Chief Diversity Officer (CDO) has been engaged in the following senior level searches:

- Director, Implementation Science
- Chief, Endocrinology
- Chief, General Internal Medicine
- Chief, Medical Oncology
- Chair, Neurology
- Chair, Surgery

In addition, the CDO has been called upon to assist in a number of faculty searches as capacity permits. Currently, there is an initiative underway with the Office of Appointments, Promotion & Tenure (APT) to notify the Office of Diversity & Inclusion when departmental positions are approved so that assistance and guidance in ensuring a broad and inclusive search and recruitment process becomes embedded across all departments.
On the student side of our recruitment and talent acquisition goals, significant progress has been realized by the Office of Biomedical Graduate Diversity (OBGD) in the recruitment of minority scientists to School of Medicine biomedical PhD programs. Through combined recruitment efforts with the Graduate School, 17.7% of matriculates to the PhD programs in 2012 were underrepresented minorities, representing a 43% increase over the previous year.

A related accomplishment and acknowledgement for the efforts of the OBGD was the official notice that Duke was awarded an institutional NIH IMSD (Initiative to Maximize Student Development) grant designed to increase diversity and student development in the biomedical and behavioral sciences with a budget of approximately 2 million dollars over 5 years. The new program, which grew out of OBGD efforts and engagement outside of the SoM, will be named Duke BioCORE (Biosciences Collaborative for Research Engagement) and will feature student support and community/career development activities that encompass the School of Medicine, Trinity College, the Graduate School, and the Pratt School.

Our September report also identified a specific need to grow the diversity of the SoM Business Managers. One element of a multi-pronged strategy identified to help deepen the diversity of the talent pool for departmental business managers and similar staff leadership roles was to develop a Fellowship Program to help cultivate diverse internal and external talent.

A partnership effort between the Executive Vice Dean of Administration and Kyle Cavanaugh has resulted in the creation of a Research Administrative Fellow position, which will be funded over two years by a gift set aside specifically for the development of a qualified underrepresented minority staff in the area of research administration. At the end of the two-year fellowship, the Fellow will be qualified to apply for senior financial management positions in the School of Medicine. An internal candidate has recently been selected and the fellowship will begin in May.
III. Fostering An Inclusive Climate:

Cultivating a sense of community, respect and belonging, especially for groups who have traditionally been marginalized, is an important element of fostering an inclusive climate. One goal identified in our September report was to engage identify group constituents (LGBT, Latino Medical Student Association (LMSA), Student National Medical Association (SNMA; medical students of color), Latino Faculty, Black Faculty, etc.) in ongoing partnerships and feedback processes to help identify SoM climate strengths and areas for improvement. Members provide key identity group perspectives to forward the School’s inclusion vision. By growing and strengthening relationships with constituency groups we can better understand potential barriers to thriving and success, and identify strategies for improving the climate for everyone.

Progress on this goal...

- LGBT Inclusion Council

  Significant traction has been realized by this group whose members originated from the School of Medicine but subsequently expanded to include participation from faculty, staff and students across Duke Medicine. To date, some of the efforts this group has contributed to include:

  ➢ Participated in a UCLA Geffen School of Medicine study to improve the access to health care for Lesbian, Gay, Bisexual and Transgender (LGBT) — identifying individuals by finding out about current referral systems as well as education provided to med students and providers.

  ➢ Assisted the President of the School of Medicine’s GSA (Gay Straight Alliance) in the creation of content for 4th Year Medical Student’s Capstone Course “Caring for LGBT Patients”

  ➢ Designed, piloted and incorporated content on developing culturally competent care for LGBT Patients (“To Treat Me You Need to Know Who I Am”) into the Doctor of Physical Therapy curriculum as well as the medical students’ Practice Course
- Supported the Student GSA (Gay Straight Alliance) in a Transgender Health Forum attended by doctors, nurses and students across Duke Medicine to highlight the unique needs and concerns of transgender patients from the perspective of 5 transgender panelists.

- Facilitated upcoming visit by national LGBT health expert Shane Snowdon who will be meeting with key stakeholders across The School of Medicine (Curriculum Committee, Program Directors, Student Advisors, the Dean’s senior leadership team, Department of Medicine Chair & Chiefs, Medical & Nursing Students, Senior Hospital Administrators and other across Duke Medicine constituents) to highlight best practices for LGBT Inclusion for patients and their families, faculty, staff and students.

- Duke Student National Medical Association
  - Instituted bi-monthly meetings between the Chief Diversity Officer and Chair & Vice Chair of SNMA to provide coaching & mentoring to student leaders to tap perspectives on opportunities to leverage and challenges to address.

  - Coordinated engagement of Marc Nivet, Chief Diversity Officer of AAMC, to deliver keynote address at the annual SNMA MLK Jr. Banquet.

- The Office of Diversity & Inclusion, Multicultural Resource Center & SNMA are coordinating a Student, Faculty & Residents of Color Speed Networking Dinner in August to help cultivate connections across School of Medicine communities of color.

- Underrepresented Minority Faculty
  - In June, The Dean will be hosting a dinner for URM faculty to help cultivate relationships and hear thoughts, perspectives and experiences about what is going well for them in the School of Medicine and what some of the challenges and recommendations are.
The Chief Diversity Officer has convened several Latino faculty representatives who expressed a desire to connect with other Latino faculty across The School of Medicine. In May, The Office of Diversity & Inclusion will host a Latino Faculty Networking Breakfast to help bridge connections and build mentoring networks.

We are proud of the progress to date reflected in this update, and yet, we acknowledge that there is still more to do. We plan to stay the course and continue to work deliberately and intentionally to weave diversity and inclusion into the DNA of the School’s culture and to ensure that inclusive excellence remains both our goal and ultimate realization.
CHARTING THE PATH TOWARDS INCLUSIVE EXCELLENCE

School of Medicine Diversity Initiatives Update
December 2013
I. Implement Departmental Diversity Strategic Plans

In our September 2012 comprehensive diversity report, we relayed that in order to build leadership accountability and influence active forward movement, all School of Medicine Department Chairs would be expected to develop a Diversity Strategic Plan (DSP) as part of their formal FY2013 success metrics upon which they would be reviewed. In the end 100%* of Basic Science Chairs, 100%* of Clinical Chairs and 10/12 Institute and Center Directors made a submission (*with extensions provided to both new and interim Chairs).

To build upon the FY13 metric of "Develop a diversity strategic plan", the FY14 metric is for all SOM Chairs to "Implement departmental diversity strategic plans". Accordingly, The School of Medicine’s Office of Diversity & Inclusion will provide individual and group stakeholder consultation sessions with SoM leadership (Chairs, Institute & Center Directors) to ensure clarity and forward movement on goals, strategies and success metrics specified in each department’s diversity strategic plan.

Stakeholder consultation sessions will include sharing of best/promising practices and will aim to catalyze “big picture” thinking and discussion about the relevance of diversity and inclusion to the department’s current opportunities and challenges so that Chairs ensure a robust and meaningful approach to implementation of their departmental diversity strategic plans. The goal of these sessions is to support departmental leadership in successful implementation of their FY14 diversity strategic plans.

II. Formalize & Educate SOM Inclusion Council

Significant traction in understanding perceptions of inclusion across various SOM constituents has been realized by instituting and working with a variety of identity based groups (Latino Faculty Group, Black Research Faculty Group, Student National Medical Association (SNMA), Latino Medical Student Association (LMSA), Duke Medicine LGBTQ Inclusion Council) etc.

In the spirit of full inclusion, and to mirror national best practices, The School of Medicine will formalize a school wide Inclusion Council/Advisory Think Tank with representation across departments, and all constituent groups (faculty/staff/learners). Members of the council will be nominated and selected with the goal of creating a broad cross section of constituents to provide diverse perspectives and input on key aspects of the school’s diversity and inclusion strategy.
The goals for the Inclusion Council are to:
1) Address and prioritize opportunities and challenges identified by analysis of AAMC Diversity & Engagement Survey (as well as other sources of feedback on climate and culture)
2) Serve as departmental liaisons/intermediaries to help address goals, questions and concerns relevant to implementing departmental diversity strategic plans
3) Act as change agents to facilitate SOM D&I Goals

To equip council members in being successful in helping to move The School’s efforts forward, they will participate in an intensive (2 day) education/preparation process to help establish a common D&I framework and create shared meaning and understanding of the strategic change process and their role in it.

III. Initiate Inclusive Excellence Award

Reward and recognition are important channels for communicating the relevance and value of inclusion. As part of our effort to inculcate diversity and inclusion into the DNA of The School’s culture, we will formalize an Inclusive Excellence award to highlight and recognize those who are “modeling the way”. The School of Medicine will recognize one faculty, one staff and one learner on an annual basis who exemplifies the behaviors, attitudes, and characteristics of inclusive excellence.
CHARTING THE PATH TOWARDS INCLUSIVE EXCELLENCE

School of Medicine Diversity Initiatives Update
May 2014
I. Implement Departmental Diversity Strategic Plans

In our September 2012 comprehensive diversity report, we relayed that in order to build leadership accountability and influence active forward movement, all School of Medicine Department Chairs would be expected to develop a Diversity Strategic Plan (DSP) as part of their formal FY2013 success metrics upon which they would be reviewed. To build upon the FY13 metric of “Develop a diversity strategic plan”, the FY14 metric is for all SOM Chairs to “Implement departmental diversity strategic plans”.

Accordingly, The School of Medicine’s Office of Diversity & Inclusion will provide individual and group stakeholder consultation sessions with SoM leadership (Chairs, Institute & Center Directors) to ensure clarity and forward movement on goals, strategies and success metrics specified in each department’s diversity strategic plan.

Progress to date:
To help inform and shape the direction and implementation of Departmental Diversity Strategic Plans, all of our Department Chairs were engaged in a participative process to learn about perceived enablers and barriers to inclusive excellence by listening to the “voices” of our faculty, staff and learners from the vantage points of gender, race/ethnicity and position.

The interactive process helped our leaders internalize 10 key themes that emerged from a qualitative analysis of an AAMC Diversity & Engagement Benchmarking Survey that was conducted across the School. Chairs were also provided copies of an in depth report developed as part of the qualitative survey analysis titled “Enablers & Barriers to Inclusive Excellence: Listening to The Voices of our Faculty, Staff and Learners” – (a copy of which is attached.)

Additionally, we conducted two working sessions – one for Basic Science Chairs and one for Clinical Chairs to share best/promising practices in an effort to catalyze “big picture” thinking and discussion about the relevance of diversity and inclusion to each department’s current opportunities and challenges.
Many Roads Towards A Common Goal...

- Summarize your general thinking/philosophy, approach, and process to your department’s plan
- Identify what you see as current key strengths as well as challenges for leveraging diversity and inclusion in your department?
- Identify a few of your key goals, strategies and metrics/success indicators
- Any key insights or “ah ha’s” you discovered during the process of creating your plan?
- Thoughts as you move forward on implementation (FY-2014 diversity metric).

We invited 3-4 Chairs in each session to share key highlights, lessons learned and insights derived from the development of their diversity strategic plans in order to stimulate a robust and meaningful dialogue. The goal of these sessions was to support departmental leadership in the successful implementation of their FY14 diversity strategic plans by learning from and engaging with their peers.

II. Formalize & Educate SOM Inclusion Council

Significant traction in understanding perceptions of inclusion across various SOM constituents has been realized by instituting and working with a variety of identity based groups (Latino Faculty Group, Black Research Faculty Group, Student National Medical Association (SNMA), Latino Medical Student Association (LMSA), Duke Medicine LGBTQ Inclusion Council) etc.

In the spirit of full inclusion, and to mirror national best practices, The School of Medicine will formalize a school wide Inclusion Council/Advisory Think Tank with representation across departments, and all constituent groups (faculty/staff/learners). Members of the council will be nominated and selected with the goal of creating a broad cross section of constituents to provide diverse perspectives and input on key aspects of the school’s diversity and inclusion strategy.

The goals for the Inclusion Council are to:

1) Address and prioritize opportunities and challenges identified by analysis of AAMC Diversity & Engagement Survey (as well as other sources of feedback on climate and culture)
2) Serve as departmental liaisons/intermediaries to help address goals, questions and concerns relevant to implementing departmental diversity strategic plans
3) Act as change agents to facilitate SOM D&I Goals
To equip council members in being successful in helping to move The School’s efforts forward, they will participate in an intensive education/preparation process to help establish a common D&I framework and create shared meaning and understanding of the strategic change process and their role in it.

**Progress to date:**
We provided preliminary criteria for Chairs to consider to nominate departmental representatives to the Inclusion Council. Based on initial feedback we decided to reposition identification of departmental Inclusion Council Members from expected participation by every department to an "invitation" to participate. This was communicated at end of year Basic and Clinical Chairs meetings. Several Chairs have nominated representatives and we have approximately 12 faculty who have been identified and serving informally as Council members to date.

It will be important for council members who will play active roles as departmental intermediaries and culture change agents/brokers to receive adequate preparation and education in order to assist the process and help move our efforts forward. To do this successfully, it's necessary to create shared meaning and understanding of the strategic change process and their role in it. Due to limited resources/capacity, we postponed the formal nomination process and formation of SOM Inclusion Council to ensure appropriate training/education/preparation for members. Our goal is to reintroduce the nomination process to Chairs and secure a formal commitment of SoM Inclusion Council members by early June.

We currently have plans to bring Howard Ross, principal of Cook Ross consultancy in DC and a national thought leader on creating organizational change and unconscious bias to conduct an official kickoff orientation training for council members during the end of July and we are in the process of negotiating and securing funding for this effort. Mr. Ross has been working with the AAMC and member institutions and is well versed in these types of change efforts in the context of academic medicine.

**III. Initiate Inclusive Excellence Award**

Reward and recognition are important channels for communicating the relevance and value of inclusion. As part of our effort to inculcate diversity and inclusion into the DNA of The School’s culture, we will formalize an Inclusive Excellence award to highlight and recognize those who are “modeling the way”. The School of Medicine will recognize
one faculty member, one staff member and one learner on an annual basis who exemplifies the behaviors, attitudes, and characteristics of inclusive excellence.

**Progress to date:**
Based on higher priority areas of focus and limited capacity, we have not yet actualized the introduction of Inclusive Excellence awards. To date we have collected information on similar awards issued at other institutions and socialized the possibility of introducing such an award into the annual Faculty Award process. This goal remains relevant as part of our desire to acknowledge and recognize those people across the institution who are role modelling inclusive leadership however we have modified our approach and current thinking is that once the SoM Council is formally initiated, members of a subcommittee can help to champion this endeavor.

In addition to the above three initiatives identified as new areas of focus last December, there have been many achievements and much progress to report upon. The following report provides a summary of many of the diversity and inclusion initiatives that The School of Medicine has engaged in over the past year.

THE YEAR IN REVIEW: D&I HIGHLIGHTS ACROSS THE SCHOOL OF MEDICINE

- The cover article in INSIGHT into Diversity’s April/May 2014 issue which was dedicated to Diversity in Medical Schools features Duke & Dean Andrews.
• In partnership with The Office of Diversity & Inclusion, all Department Chairs developed and completed a Diversity Strategic Plan for their units to focus deliberate and intentional efforts to attract, support and retain students, trainees, and faculty that represent the diverse world in which we live and practice.

7 Elements of An Effective Diversity Strategic Plan (DSP)

- Leadership Engagement & Excellence: "Modeling The Way"
- Foster An Inclusive Climate
- Recruitment & Talent Acquisition: "Casting A Wide Net"
- Pipeline: "Priming the Pump"
- Retention & Engagement: "Thriving vs. Surviving"
- Take Periodic Data Snapshots: "Measurement Matters"
- Create Inclusive Academic Learning & Research Environments

• The development of these plans has led to important discussions and innovative new strategies to ensure that we foster an inclusive climate and culture in which everyone experiences a genuine sense of belonging, engagement and achievement and where excellence and innovation thrives.

• To help inform and shape the direction and implementation of Departmental Diversity Strategic Plans, SOM leadership engaged in a participative process to internalize 10 key themes that emerged from a qualitative analysis of The AAMC Diversity & Engagement Survey which included the development of an in depth report titled "Enablers & Barriers to Inclusive Excellence: Listening to The Voices of our Faculty, Staff and Learners".

Ten Inter-related Themes

- SOM Doing Well Overall
- Need for Greater Diversity especially in Leadership Positions
- Lack of Accountability - Management Not Being Held Accountable for Inclusion - Management Line Including Employees Accountable
- Deliberate vs. More Authentic Senior Leadership Commitment
- Inequities Related to Job Role, Function, Discipline and/or Level
- Inequitable Rewards
- Lack of Awareness, Appreciation and Respect between individuals
- Management and Recruitment Systems Need Improvement
- Diversity and/or Diversity Management Seen as Compromising Excellence and/or Promoting "Reverse Discrimination"
- Specific Areas of Inclusion/Exclusion - Gender Bias - Power and Money Matter Over Inclusion - Diversity of Thought Diversity/Variety Defined - LGBQT+ Inclusion/Exclusion - Socio-Economic Bias
• Chairs have been invited to nominate a faculty and staff member to serve on a school wide Inclusion Council to help further review survey data and other sources of feedback on climate and culture, prioritize goals and strategies, and recommendations, serve as an advisory think tank for The Office of Diversity & Inclusion, and act as diversity champions and liaisons for departments/centers/institutes.

• The Dean’s senior leadership team worked directly with Mark Nivet, Chief Diversity Officer of AAMC in a half day intensive leadership retreat focused on deepening individual, interpersonal and institutional knowledge and awareness to anchor diversity as central to Duke SoM’s mission, sustainability and long term success.

• Successful “Speed Mentoring” evening conducted for URiM Faculty, Residents and Students with 70 attendees interested in exploring novel mentoring models to support underrepresented members of the School of Medicine community. This session provided an initial forum for collaboration, as well as an experiential understanding of the impact of mentoring, and highlighted the importance of mentoring to personal and professional development in academic medicine.
Shane Snowden, a national thought leader on lesbian, gay, bisexual, transgender (LGBT) inclusion in academic medicine spent 2 days on campus in a series of presentations and strategic discussions with our students, faculty and administration in support of improving the climate/culture for LGBT faculty, students, and staff.

Shane also presented best practices to ensure equitable and inclusive care from the Joint Commission and The Institute of Medicine’s groundbreaking report on the unique concerns, challenges and healthcare disparities faced by LGBT patients and their families.

Established a SoM Latino & Hispanic Faculty Group to create fellowship by sharing individual experiences in navigating the culture of Duke Medicine; strengthening connections and communications across departments and communities; developing strategies to help recruit, retain, and support Hispanic and Latino faculty, staff and students; and raising interests, concerns and
awareness of Hispanics and Latinos to enhance multicultural awareness, healthcare issues and research.

- In an ongoing effort to enhance our culture and climate, The Dean has hosted a series of discussion dinners at her home with members of various identity groups to facilitate informal dialogue about the school’s strengths, opportunities and challenges to foster greater inclusion. In the past year, The Dean hosted a dinner with a group of African American Research Faculty as well as a dinner with members of our Latino & Hispanic Faculty Group and most recently, one with our LGBTQ faculty. These dinners led to a number of different follow up actions that included individual think tank sessions with Black Research Faculty and Latino & Hispanic Faculty Group members resulting in a plan to convene a Dean’s Advisory Group on URM faculty with representation from multiple ethnic/racial identity groups.

- Partnered with Latino Medical Student Association (LMSA) and Student National Medical Association (SNMA) leaders in a communications strategy to engage Department Chairs in sending faculty and residents to represent Duke at National and Regional Conferences as well as providing sponsorship and attending SNMA and LMSA banquets with the goal of raising awareness, building partnerships and enhancing recruitment efforts for URM students, residents and faculty.

- Very successful LMSA Banquet attended by close to 100 SoM faculty & students from Duke as well as registrants from LMSA South East Regional Conference. The keynote speaker was Dean Andrews who delivered an impactful speech that surprised and delighted attendees because her introductory comments were delivered in Spanish! This collaborative effort engendered strong feelings of institutional commitment to Hispanic and Latino diversity and cultivated a strong sense of community.

- Duke Medicine’s LGBTQ Inclusion Council formalized a group mission and vision which will be presented to senior leadership for approval. The LGBTQ Faculty Dinner with the Dean surfaced strengths as well as specific suggestions identified to enhance LGBTQ inclusion. Interest was expressed in forming an LGBTQ Faculty Network, as well as creating customized Ally Training which was highly recommended to help educate faculty and staff across SoM in an effort to create a more welcoming climate.

- Successful launch of BOND (Bridging Opportunities and Networking in Diversity) Council. The goal of the BOND Council is to create a forum for students across different identity based groups to support and foster inter-professional collaboration and innovation while providing peer to peer mentoring. Executive
committee members comprised of student leaders (presidents, vice presidents, and/or executive board members) have been identified and are fully engaged.

Familiar Faces in new places!

- Dr. Kenyon Railey, MD accepted a part time (10%) appointment in The Office of Diversity & Inclusion as a Diversity Strategist working closely with the school's Chief Diversity Officer, Judy Seidenstein.

- Jeanine Holland joined The Office of Diversity & Inclusion as the new Diversity Administrative Program Coordinator.

- The Duke Health Disparities Consortium (DHDC) secured support from SoM and DUHS leadership to launch a website to serve as a virtual center to accelerate the active pursuit of grant/funding opportunities, collaborative partnerships and projects that advance the goal of reducing disparities, growing URMs in healthcare and advancing health equity. By serving as a hub to highlight current health disparities efforts across the institution, The Consortium will increase the capacity and the synergies between our researchers, clinicians, educators, students, community partners and external academic partners resulting in greater cohesion, productivity and institutional impact on the reduction of health inequities.

- Chief Diversity Officer continues to consult on senior leadership searches. In the past year she presented to the Pediatrics, Pathology, Surgery and Ophthalmology search committees on strategies and processes for creating a broad and inclusive search
- Convened a Practice Course Cultural Competency workgroup to analyze curriculum and make recommendations to improve integration of cultural competency, bias, and disparities related topics throughout year 1 and year 2 of Practice Course. Similar curriculum requests have also been initiated for Capstone, GME and a variety of departmental education efforts.

- Contributed to the design and successful delivery of a 2 hour Capstone session on Unconscious Bias. Designed on-line training module on health disparities for residents. Designed and delivered module on infusing cultural competency into curriculum for GME Course/Residency Program Directors to assist in preparation for ACGME requirements.

- Assisted in development of successfully funded GME Innovations Grant focused on Unconscious Bias & Disparities Education.

- Partnership formed with Roberson Community College and UNC Pembroke on support services for Native American students to assist with retention, pre-health advising, and continuation onto four-year institutions.

- The Duke Biosciences Collaborative for Research Engagement (BioCoRE) Program recruited its first class of BioCoRE-supported Graduate Scholars (23 first year students, comprised of both underrepresented students and majority students committed to diversity in the sciences) and Undergraduate Scholars (9 students—underrepresented sophomores). In efforts to build an even more inclusive community, graduate students beyond the first year were invited to become a special category called Duke BioCoRE Founders (36 students joined).

- Duke BioCoRE also invited faculty members and administrators from the School of Medicine, the Graduate School, Pratt, and Trinity to become officially affiliated with BioCoRE and contribute to programming, mentorship, and scientific enrichment for the Scholars in the BioCoRE community. 109 faculty and administrators have affiliated to date.

- Duke BioCoRE held the first annual Duke BioSciences Collaborative Symposium in August of 2014 in the Semans Center. The Symposium included faculty, administrators and students from 8 institutions around North Carolina. The 2-day symposium including faculty/administrator sessions on student development, scientific enrichment, pedagogy, and diversity interventions, and student sessions covered career development, cross-institutional networking, and scientific development. The symposium successfully engaged over 130 members of the statewide scientific community, and participants formed collaborative relationships between multiple institutions. The symposium will be
an annual event and was supported by the Duke BioCoRE Program and Burroughs Wellcome Fund.

- The programming and recruitment efforts of the Office of Biomedical Graduate Diversity resulted in record numbers of minority applicants to School of Medicine basic science graduate programs. The graph below reflects the increase in applications since the inception of the office in July 2010:

![Graph showing increase in SoM URM Applicants](image)

- The Office of Biomedical Graduate Diversity has grown from serving approximately 40 students in School of Medicine basic science graduate programs in its first year (2010) to serving approximately 100 graduate students in 2010-14.

- The Office of Biomedical Graduate Diversity has formed a network of 15 institutional partnerships with other institutions that are committed to diversity and high caliber scientific development.

- Duke University, The University of North Carolina at Chapel Hill, and North Carolina State University have formed a novel Triangle Initiative for Maximizing Student Development (IMSD) Alliance. This alliance forms a link between IMSD Scholars at each institution (at Duke, these are BioCoRE scholars). The alliance organizes joint social, professional development, and mentoring programing for underrepresented students in the sciences across the three institutions. This has allowed for the formation of a "critical mass" of graduate minority scientists in the Triangle area.
The highlights presented within this report reflect The School of Medicine’s ongoing journey to inclusive excellence. We are proud of all we’ve accomplished and yet acknowledge that there is more work to do. We need to be proactive. We need to stay the course. And we need to find new and creative ways to grow the prospective pool of talented faculty, researchers and students. We will continue to develop and implement strategies that help us to better attract, support and retain students, trainees, staff and faculty members who represent the diverse world in which we live and practice.