

DEI IN EMS NEXT STEPS

Nichole Bosson, MD, MPH, NRP, FAEMS
NAEMSP Medical Directors Course 2024

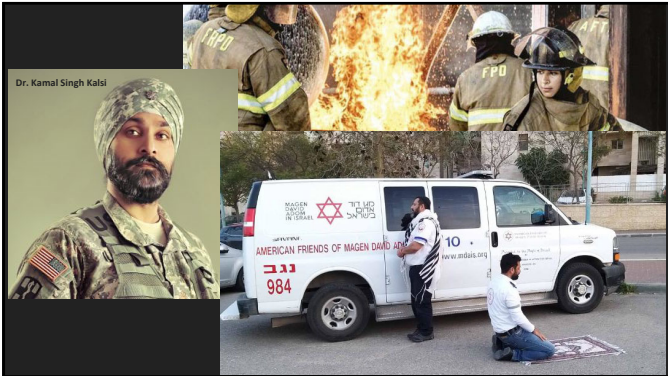


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OBJECTIVES

1. Evaluate the current diversity in the EMS workforce
2. Identify healthcare disparities in EMS
3. List the benefits of diversity for EMS systems
4. Define ways in which a Medical Director can promote diversity, equity, and inclusion in EMS

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Dr. Kamal Singh Kalsi

AMERICAN FRIENDS OF MAGEN DAVID ADOM

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CURRENT DIVERSITY IN THE EMS WORKFORCE

	Nationally Registered EMT	Nationally Registered Paramedic	US Population
Female Gender			50%
White			73%
Black			13%
Hispanic			18%

Crowe et al. PEC, 2020.

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LACK OF CURRENT DIVERSITY IN THE EMS WORKFORCE

	Nationally Registered EMT	Nationally Registered Paramedic	US Population
Female Gender	35%		50%
White	74%		73%
Black	5%		13%
Hispanic	13%		18%

Crowe et al. PEC, 2020.

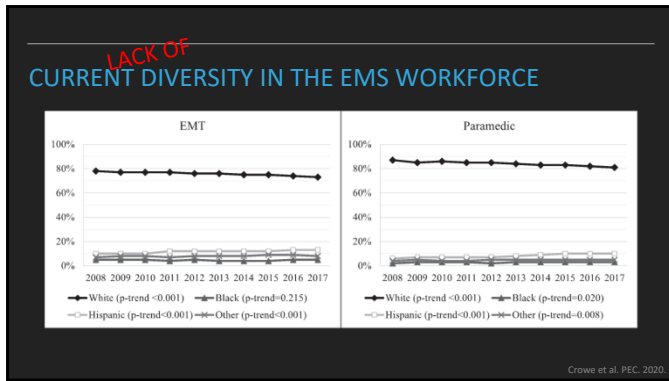
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LACK OF CURRENT DIVERSITY IN THE EMS WORKFORCE

	Nationally Registered EMT	Nationally Registered Paramedic	US Population
Female Gender	35%	22%	50%
White	74%	81%	73%
Black	5%	3%	13%
Hispanic	13%	10%	18%

Crowe et al. PEC, 2020.

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WHILE SOME CHANGES WERE OBSERVED OVER THE LAST 10 YEARS, THE DIVERSITY OF EMS PROFESSIONALS EARNING INITIAL CERTIFICATION DOES NOT REFLECT THE DIVERSITY OF THE POPULATION SERVED.

Crowe et. al.

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PREHOSPITAL EMERGENCY CARE 2022

Diversity, Equity, and Inclusion in the United States Emergency Medical Services Workforce: A Scoping Review

Jordan S. Rudman, Andra Farcas, Gilberto A. Salazar, JHoff, Remie P. Crowe, Kimberly Whitten-Chung, Gilberto Torres, Carolina Pereira, Eric Hill, Shazil Jafri, David I. Page, Megan von Iseburg, Ameera Haamid & Anjni P. Joiner

"This workforce is dominated by Non-Hispanic White males."

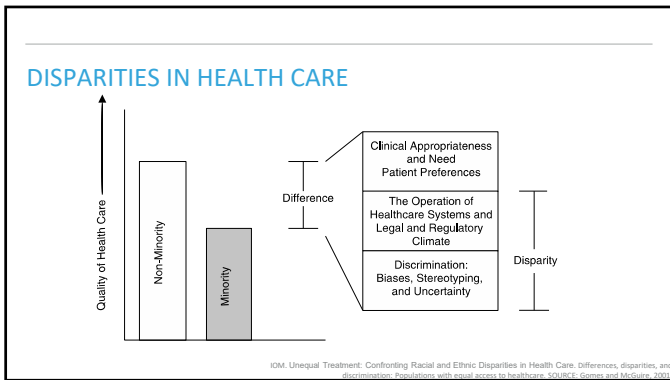
Highlighting "firsts"

Lack of diversity in diversity literature

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BIAS IN EMS?

- ▶ Non-White patients less likely to receive analgesia.
- ▶ Black and Hispanic patients more likely transported to a safety net hospital.

Howes et al. PEC. 2018; Meshani et al. Pain Med. 2012; Young et al. J Emerg Med. 2013; Hanchette et al. JAMA Open. 2019.

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PREHOSPITAL EMERGENCY CARE 2022

Disparities in Emergency Medical Services Care Delivery in the United States: A Scoping Review

Andra M. Farcaș, Anjni P. Jiner, Jordan S. Rudman, Karthik Ramesh, Gilberto Torres, Remie P. Crowe, Travis Curtis, Rickquel Tripp, Karen Bowers, Megan von Isenburg, Robert Logan, Lauren Coaxum, Gilberto Salazar, Michael Lozano J., David Page & Ameer Haamid



- ▶ Evaluated EMS access, pre-arrival care, diagnosis and treatment, and transport.
- ▶ Disparities noted in all aspects of EMS care.
- ▶ Mixed results across studies.
- ▶ Causes multifactorial.

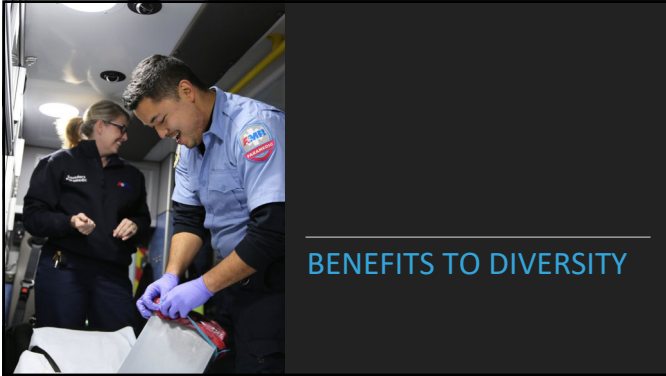
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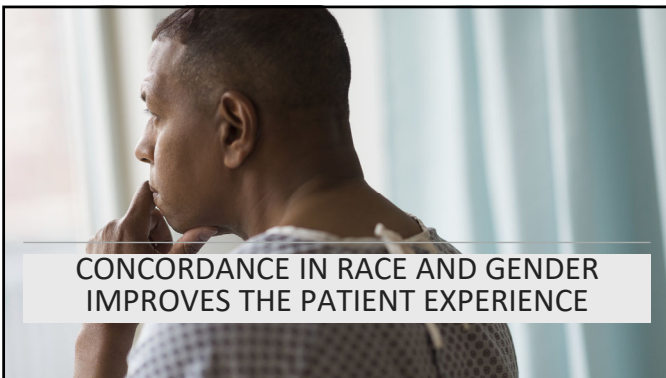
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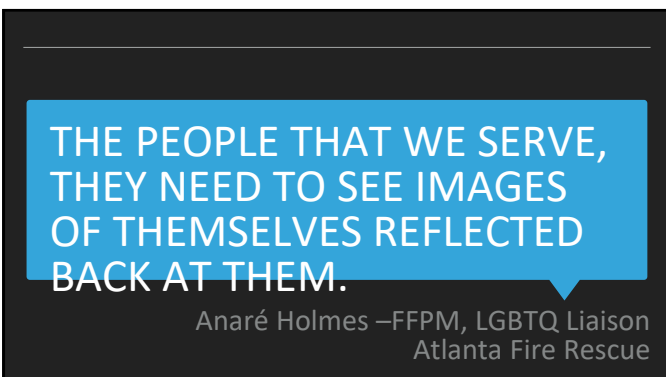
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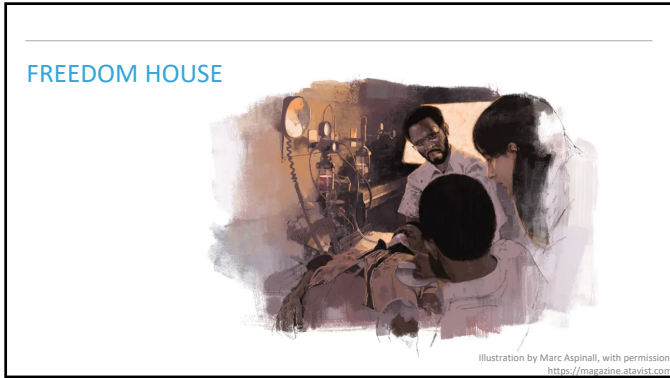
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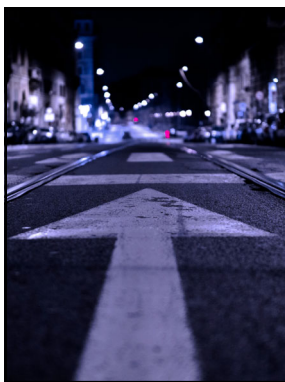


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SURE, I HAD PHYSICAL LIMITATIONS BUT THAT GAVE ME THE OPPORTUNITY TO THINK ABOUT PROBLEMS MORE CREATIVELY.


Female FFPM

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GETTING PAST AWARENESS

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#1 GATHER THE TOOLS



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Essential Principles to Create an Equitable, Inclusive, and Diverse EMS Workforce and Work Environment: A Position Statement and Resource Document

Sylvia Owusu-Ansah, Rickquel Tripp, Stacy N. Weisberg, Mary P. Mercer, Kimberly Whitten-Chung & The NAEMSP Diversity, Equity, & Inclusion Committee


To cite this article: Sylvia Owusu-Ansah, Rickquel Tripp, Stacy N. Weisberg, Mary Kimberly Whitten-Chung & The NAEMSP Diversity, Equity, & Inclusion Committee. Essential Principles to Create an Equitable, Inclusive, and Diverse EMS Workforce Environment: A Position Statement and Resource Document, Prehospital Emergency Care. DOI: [10.1080/10903127.2023.2187103](https://doi.org/10.1080/10903127.2023.2187103)

To link to this article: <https://doi.org/10.1080/10903127.2023.2187103>


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NAEMSP



Diversity, Equity, and Inclusion (DEI) Committee

We identify strategies for attracting and cultivating underrepresented minorities to the practice of EMS medicine and developing mentorship programs to support, encourage and build a new generation of educators, researchers and leaders through diversity and inclusion.



Women in EMS

Interested in Joining the Committee?

Please update your online profile to include this committee selection and contact our chair, Mary Mercer, to become actively involved.

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WOMEN IN FIRE

SAVE THE DATE FOR 2024



WOMEN IN FIRE

Networking Event
Sunday, April 14th, 2024

⊕

Leadership Conference
Monday, April 15th, 2024

Part of



FDIC INTERNATIONAL

April 15th - 20th, 2024

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INTERNATIONAL EMS & FIREFIGHTERS PRIDE ALLIANCE
 "Wishing Everyone a Safe and Happy New Year"
 We will not let hate win.

Mission: "To create a greater awareness of the lesbian, gay, bisexual and transgender professionals working in the emergency medical and fire service fields and to support those coming out or pursuing a career."

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LOOK TO EXAMPLES

HMS Women in EM Consortium Curriculum Cycle

- Identify Core Issues (Example: Gender-based salary disparities)
- Learn Strategies (Example: Negotiation skills for salary equity)
- Assess & Integrate Progress (Example: Negotiations skills workshop)
- Address Outcomes (Example: Post-workshop survey)

ORIGINAL CONTRIBUTION

Addressing gender inequities: Creation of a multi-institutional consortium of women physicians in academic emergency medicine

Lee LK, Platz E, Klig J, et al. Acad Emerg Med. 2021

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LOOK TO EXAMPLES

SOCIAL EMERGENCY MEDICINE AND POPULATION HEALTH


Race, Healthcare, and Health Disparities: A Critical Review and Recommendations for Advancing Health Equity

Wendy L. Macias-Konstantopoulos, MD, MPH, MBA¹ | Center for Social Justice and Health Equity, Department of Emergency Medicine, Boston, Massachusetts
 Kimberly A. Collins, MD, MPH² | Harvard Medical School, Department of Emergency Medicine, Boston, Massachusetts
 Rosemarie Diaz, MD³ | Tampa General Hospital, Tampa, Florida
 Herbert C. Duber, MD, MPH⁴ | University of California-Los Angeles, Department of Emergency Medicine, Los Angeles, California
 Courtney D. Edwards, DNP, RN, CLN⁵ | University of Washington School of Medicine, Department of Emergency Medicine, Seattle, Washington
 Antony P. Hsu, MD⁶ | Washington State Department of Health, Tumwater, Washington
 Megan L. Ramney, MD, MPH⁷ | Sanford University, Medical & Sanders School of Nursing, Birmingham, Alabama
 Ralph J. Rivieco, MD, MS⁸ | Trinity Health Ann Arbor Hospital, Department of Emergency Medicine, Ypsilanti, Michigan
 Zachary S. Wettstein, MD⁹ | Yale University, Yale School of Public Health, New Haven, Connecticut
 Carolyn J. Sachs, MD, MPH¹⁰ | University of Texas Health San Antonio, Department of Emergency Medicine, San Antonio, Texas
¹¹University of Washington School of Medicine, Department of Emergency Medicine, Seattle, Washington
¹²Ronald Reagan-UCLA Medical Center and David Geffen School of Medicine at University of California-Los Angeles, Department of Emergency Medicine, Los Angeles, California

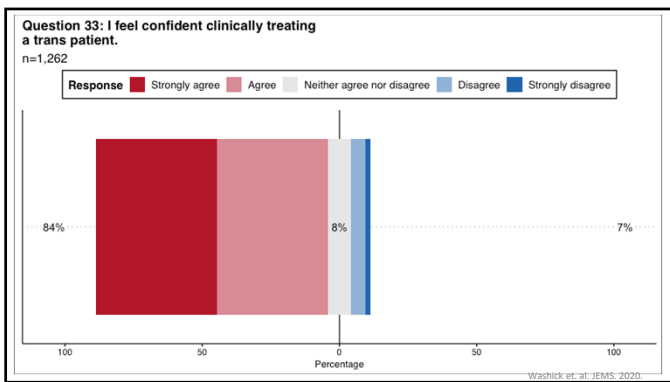
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#2 EDUCATE OURSELVES AND EACH OTHER

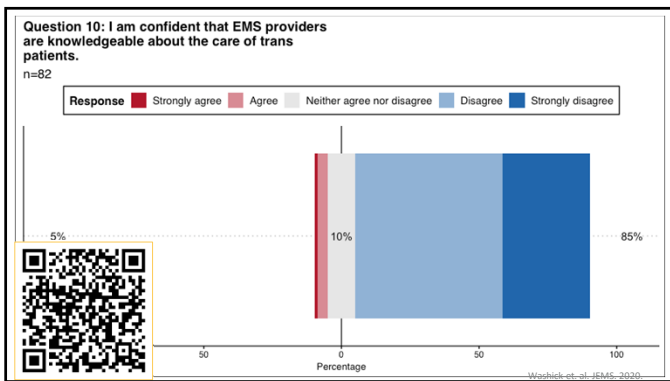
- ▶ Increase Self Awareness
- ▶ Develop primary and continuing educational content
 - ▶ Implicit Bias
 - ▶ Social Determinants of Health
 - ▶ Cultural Competency and Humility



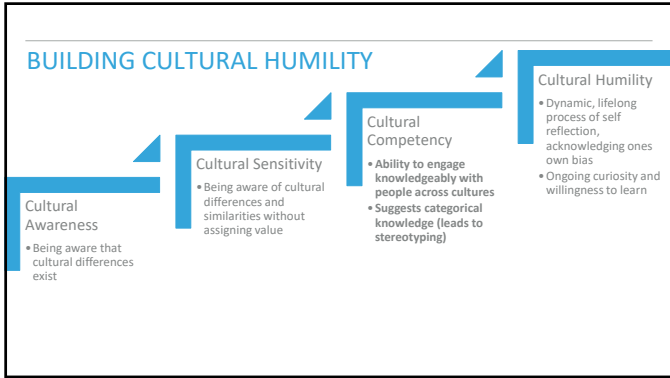
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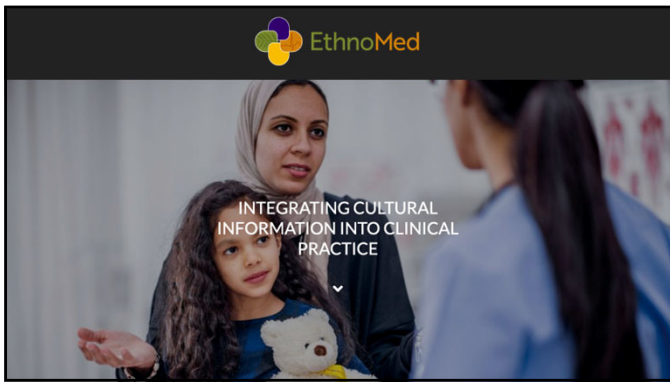
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PITTSBURGH'S FREEDOM HOUSE 2.0

NOW RECRUITING!

Jump-start a health career with 10-weeks paid training & mentorship

YOUR OPPORTUNITIES

- EMT
- Patient Care Technician
- Community Health Technician
- Community Health Worker

THE REQUIREMENTS

- Ages 18 to 24 or lost job due to COVID
- City of Pittsburgh or Allegheny County Resident
- High school diploma or GED

WANT MORE INFO?

pittsburgh@work@upmc.edu
<https://upmc.edu/freedomhouse>

#3 BUILD OPPORTUNITY

PARTNER: THE WORKER, GOVERNMENT EMPLOYERS PARTNERSHIP, UPMC, UPMC HEALTH PLAN

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BARRIERS TO WORKFORCE ENTRY

- ▶ Insufficient exposure
- ▶ Need for mentorship
- ▶ Limited access
- ▶ Inadequate support
- ▶ Absence of positive reinforcement
- ▶ Lack of opportunity




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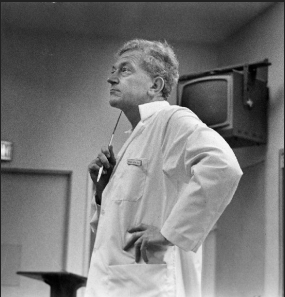
COMPONENTS TO SUCCESS



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COMPONENTS TO SUCCESS

- ▶ Have a champion




Schlesinger Library, Harvard Radcliffe Institute.

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COMPONENTS TO SUCCESS


- ▶ Have a champion
- ▶ Establish connections



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COMPONENTS TO SUCCESS


- ▶ Have a champion
- ▶ Establish connections
- ▶ **Recruit young**



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COMPONENTS TO SUCCESS


- ▶ Have a champion
- ▶ Establish connections
- ▶ Recruit young
- ▶ **Create identity**



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COMPONENTS TO SUCCESS


- ▶ Have a champion
- ▶ Establish connections
- ▶ Recruit young
- ▶ Create identity
- ▶ **Support basic needs**



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COMPONENTS TO SUCCESS

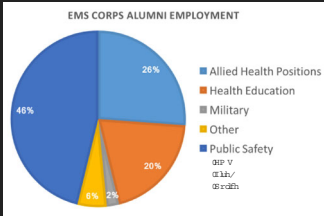
- ▶ Have a champion
- ▶ Establish connections
- ▶ Recruit young
- ▶ Create identity
- ▶ Support basic needs
- ▶ **Provide mentorship**



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COMPONENTS TO SUCCESS

- ▶ Have a champion
- ▶ Establish connections
- ▶ Recruit young
- ▶ Create identity
- ▶ Support basic needs
- ▶ Provide Mentorship
- ▶ **Facilitate employment opportunities**



Category	Percentage
Allied Health Positions	46%
Health Education	26%
Military	20%
Other	8%
Public Safety	2%

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#4 CREATE THE CULTURE




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BUILDING CULTURAL HUMILITY

1. Learn about your own culture and biases (self-assessment)
2. Gain exposure to other cultures (active listening and participation)
3. Consider cultural context of behavior (recognition of differences as a strength)
4. Pursue lifelong learning and self-reflection

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MITIGATING IMPLICIT BIAS



Form Common Identity	• Discuss until you find common ground.
Change Perspective	• Picture yourself in the other person's shoes.
Consider the Opposite	• Consider opposing data before drawing a conclusion.
Counter Stereotypes	• Look for qualities among people in that group you admire.


Courtesy of Drs. Sylvia Owusu-Ansah and Rickquel Tripp

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STATEMENTS TO REBUKE HATE

INTERRUPTERS

IAFC: "We must be in tune with the culture in our departments and lead change by example. How we treat each other matters all of the time, not just some of the time. When under our watch we look the other way at words and deeds that are inappropriate – or worse – we are doing our entire industry and the public a grave disservice."



- ▶ "That's not okay with me."
- ▶ "That's not funny."
- ▶ "What you just said is harmful."
- ▶ "Hold on, I need to process what you just said."
- ▶ "We don't say things like that here."
- ▶ "Help me understand your thinking."
- ▶ "I'm not comfortable with that."
- ▶ "I didn't realize you think that."
- ▶ "I find that offensive."

Courtesy of Drs. Sylvia Owusu-Ansah and Rickquel Tripp

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ABC'S OF CHANGE MANAGEMENT

Create the Climate	<ul style="list-style-type: none"> • Form a Powerful Coalition • Create a Vision for Change
Engage/Enable the Organization	<ul style="list-style-type: none"> • Communicate the Vision • Empower Action • Create Quick Wins
Implement Sustainable Change	<ul style="list-style-type: none"> • Build on the Change • Make it Stick

Courtesy of Drs. Meg Marino and Emily Nichols

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ABC'S OF CHANGE MANAGEMENT

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Courtesy of Drs. Meg Marino and Emily Nichols

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Courtesy of Drs. Meg Marino and Emily Nichols

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ABC'S OF CHANGE MANAGEMENT

- Create the Climate**
 - Form a Powerful Coalition
 - Create a Vision for Change
- Engage/Enable the Organization**
 - Communicate the Vision
 - Empower Action
 - Create Quick Wins
- Implement Sustainable Change**
 - Build on the Change
 - Make it Stick

Courtesy of Drs. Meg Marino and Emily Nichols

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#5 SHARE KNOWLEDGE

Photo by Maria Thalassinou

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SEX, GENDER, RACE, AND ETHNICITY IN RESEARCH

JAMA Updated Guidance on the Reporting of Race and Ethnicity in Medical and Science Journals
Annette Flanagin, RN, MA; Tracy Frey, BA; Stacy L. Christiansen, MA, for the AMA Manual of Style Committee

JACS

Table 1. A Call to Action Related to Categorizing Sex, Gender, Race, and Ethnicity

Cohort	Action
Researchers	Follow best practices for collecting, documenting, reporting, and discussing categories; expand categories beyond binary (ie include nonbinary gender category and more inclusive list of ethnicities); collaborate with historians, sociologists, and other experts; address intersectionality, where overlapping identities contribute to inequity
Journals	Ensure publications adhere to appropriate terminology; require reporting of a more inclusive distribution of population (ie include nonbinary genders and more ethnicities than Hispanic/Latino and non-Hispanic/Latino); diversity on editorial boards for all 4 of these categories
Surgical professional societies and funding agencies	Require distinct evaluation of sex, gender, race, and ethnicity; diversity of leadership for all 4 of these categories
National databases	Include sex, gender, race, and ethnicity as separate categories; incorporate other social determinants of health; provide at a minimum more than binary categories for gender and ethnicity
Standardized reporting tool	Development of a standardized tool to aid in the reporting and publishing of sex, gender, race, and ethnicity (eg EQUATOR tool)

EQUATOR: Enhancing the Quality and Transparency of Health Research.

Flanagin et al. JAMA. 2021; Nahmiás et al. JACS. 2021

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STRONGER TOGETHER

- ▶ Implicit bias and disparities in care exist in EMS
- ▶ Workforce diversity improves patient care and benefits all
- ▶ Steps we can take:
 - ▶ Promote Awareness
 - ▶ Educate Ourselves and Others
 - ▶ Build Opportunity
 - ▶ Create the Culture
 - ▶ Share Knowledge



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ACKNOWLEDGEMENTS

- ▶ David Page, MS, NRP – St Paul EMS Academy
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- ▶ Emily Nichols, MD – New Orleans EMS Agency
- ▶ Jocelyn Garrick, MD – Alameda County EMS Agency
- ▶ Meg Marino, MD – New Orleans EMS Agency
- ▶ Michael Gibson, MPA, PCC – EMS Corps
- ▶ Lt Quention 'Q' Curtis – Black Fire Brigade
- ▶ Rickquel Tripp, MD, MPH - UPMC
- ▶ Shira Schlesinger, MD, MPH – Harbor-UCLA Medical Center
- ▶ Sylvia Owusu-Ansah, MD, MPH – UPMC

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