

Huntsman Cancer Institute
Commission on Equity, Diversity, and Inclusion

Summary Report and Recommendations
to HCI CEO, Mary C. Beckerle, PhD

submitted by

Bradley R. Cairns, PhD, and Kolawole S. Okuyemi, MD, MPH,
on behalf of the Commission

January 22, 2021

*This Summary Report contains all the Commission recommendations in summary form. The full report with extensive appendices and supporting background materials is available to University EDI partners on request, to HCI Communications.

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from: Email to the Community and Press Release
**July 2020: HCI Leadership Makes New Commitments to
Equity, Diversity, and Inclusion**

Huntsman Cancer Institute
Vision

*Passionate individuals and teams,
delivering a cancer-free frontier
through scientific discovery and human touch.*

July 9, 2020

Dear Members of the HCI Community:

The tragedy of George Floyd's senseless and merciless murder catalyzed a national reckoning regarding racism, which has plagued our country for centuries. The recent dialogue has only begun to reveal a deeper understanding of the pain inflicted, and still experienced, by our Black family members, friends, neighbors, and colleagues. Even at HCI, where we have always prided ourselves on our commitment to inclusion, fairness, and respect for all, we have learned that we have much work to do.

Black Lives Matter.

We are committed to travel the road to become a cancer center that lives our stated values of equity, diversity, and inclusion—however long and bumpy that road may be. At HCI, we are familiar with tackling major and complex challenges, like cancer. We will similarly dedicate ourselves to tackling racism in our community. Why? Because it is the right and just thing to do. Because meaningful action is long overdue. And because we will fall short of our vision to deliver a cancer-free frontier if we do not succeed in our efforts to achieve equity, diversity, and inclusion at HCI.

Sincerely yours on behalf of your HCI Leadership,

Mary C. Beckerle, PhD

*CEO, Huntsman Cancer Institute
Jon M. Huntsman Presidential Endowed Chair*

Cornelia Ulrich, MS, PhD

*Executive Director, Comprehensive Cancer Center at Huntsman Cancer Institute
Jon M. and Karen Huntsman Presidential Professor in Cancer Research*

John H. Ward, MD

*Interim Senior Director for Clinical Affairs & Physician-in-Chief, Huntsman Cancer Institute
Margaret A. Amundsen Endowed Professor of Medicine*

Our change process at HCI begins today, with new commitments and actions that include the following:

We will make a daily, visible, public statement of HCI's commitment to actively counter racism and to advance a culture of equity, diversity, and inclusion. This commitment will be displayed on information screens throughout our cancer hospital, administrative areas, public spaces, and research buildings, as well as through our internet presence. Based on direction from our EDI Commission, we will regularly update the community on our progress.

We will commit \$1 million to establish a HCI Endowed Chair to expand Black representation on our faculty. This Chair will be dedicated to recruiting and providing ongoing support for a new cancer-focused faculty member at HCI.

We will establish an HCI Equity, Diversity, and Inclusion (EDI) Commission to make recommendations to the HCI CEO and executive leadership on issues related to equality and justice at HCI. Dr. Kola Okuyemi, MD, MPH, HCI Senior Director of Diversity and Inclusion and Chair of the Department of Family and Preventive Medicine, and Dr. Brad Cairns, PhD, HCI Senior Director of Basic Science and Chair of the Department of Oncological Sciences, have accepted the invitation to co-chair this Commission, which will include faculty, staff, trainees, and community members, with senior administrative support.

The EDI Commission will be charged to develop a set of priority recommendations within the next three months. Areas of immediate consideration by the EDI Commission will include mechanisms for addressing workplace racism and discrimination, hiring practices, implementation of implicit bias and microaggression training for all at HCI, anti-discrimination and bystander intervention tools, staffing needs to support EDI recommendations, and mechanisms to ensure transparency and accountability related to EDI initiatives.

We will establish an EDI fund, seeded initially with \$250,000, to support recommendations of the Commission.

We will expand HCI's Office of Diversity and Inclusion with appropriate support to serve ongoing needs across all HCI mission areas. This will include the establishment of effective pathways to address workplace racism concerns raised by faculty, staff, and trainees at HCI in a safe and confidential environment.

We will make our commitment to equity, diversity, and inclusion a key pillar of our HCI 2025 Strategic Plan, which will be finalized this year. This will enable us to maintain focus and continue evaluating progress toward our EDI goals to deliver sustainable results.

Equity, Diversity, and Inclusion Commission Composition and Subgroups

Co-Chairs

- Bradley R. Cairns, PhD
HCI Chief Academic Officer and Chair, Department of Oncological Sciences
- Kolawole S. Okuyemi, MD, MPH
HCI Senior Director of Equity and Inclusion and Chair, Department of Family and Preventive Medicine

Ex-Officio Members

- David Wetter, PhD, HCI Senior Director, Community Engagement and Cancer Health Equity Research and Director, Center for Health Outcomes and Population Equity (HOPE)
Professor, Department of Population Health Sciences
- José E. Rodríguez, MD, FAAFP
Associate Vice President, Health Equity, Diversity, and Inclusion, University of Utah Health and Professor, Department of Family and Preventive Medicine

Members

- Mary-Jean (Gigi) Austria, MS, RN, OCN, Nurse Manager, HCI Clinical Staff Education
- April Carlson, LCSW, HCI Social Worker, Surgical Oncology
- Samuel Cheshier, MD, PhD, Associate Professor, Department of Neurosurgery
- Scott Clark, HCI Multidisciplinary Team Outpatient Oncology/ Urology Patient Coordinator
- Swapna Gudipaty, PhD, HCI Postdoctoral Researcher, Department of Oncological Sciences
- Garrett Harding, Associate Director, HCI Community Outreach
- Emma E. Houston, MBA, Member, HCI Community Advisory Board and Special Assistant to the University of Utah EDI Vice President
- Krystle Osby, HCI Graduate Student, Department of Oncological Sciences
- Katherine (K-T) Varley, PhD, Associate Professor, Department of Oncological Sciences

Staff

- Ellen T. Wilson, PhD, Director, HCI Research Development
- Andrew K. Langi, Program Manager, HCI Office of Diversity and Inclusion
- Anna Marsden, MBA, Programs Manager, PathMaker Programs, Office of Cancer Training and Career Enhancement and Office of Diversity and Inclusion

	Clinical Policies	Education, Training and Awareness	Hiring & Retention Practices	Safety & Refuge	Trainee Concerns	Vision, Definitions, Culture
Kola Okuyemi	X	X		X	X	
Brad Cairns	X		Co-Chair		X	
David Wetter					X	X
Jose Rodriguez	Chair		X			X
Gigi Austria		Co-Chair	X	X		X
April Carlson	X	Co-Chair		X		
Samuel Cheshier			X			
Scott Clark	X	X		X		X
Swapna Gudipaty		X			Co-Chair	X
Garrett Harding			Co-Chair	X		Co-Chair
Emma E. Houston			X			Co-Chair
Krystle Osby		X			Co-Chair	X
K-T Varley			X	Chair	X	
Ellen Wilson		X	X		x	
A. Langi/A. Marsden	X			X		X
Meeting Frequency	Weekly	Bi-weekly	Weekly	Bi-weekly	Bi-weekly	Weekly

Executive Summary

Overview

Huntsman Cancer Institute (HCI) approaches its work with human-centered values at its core, as evidenced by its Vision statement: *Passionate individuals and teams, delivering a cancer-free frontier through scientific discovery and human touch*. HCI strives to be a place where fairness, social justice, and anti-racism are embedded in our culture.

Recent events of blatant racism in our country have sparked new dialogue and heightened awareness of systemic inequities in American culture. HCI responded to these events by charging, codifying, and funding the HCI Equity, Diversity, and Inclusion (EDI) Commission, led by Bradley R. Cairns, PhD, and Kolawole S. Okuyemi, MD, MPH. On behalf of the Commission, we hereby submit the following report and recommendations, including this Executive Summary.

Purpose. The purpose of the Commission and this report is to provide the HCI CEO with a set of recommendations and implementation options designed to support the creation of an anti-racist, equitable, diverse, and inclusive culture at HCI. Such a culture is needed to fully achieve the Mission and Vision of our cancer center.

Problem. Although HCI strives for a culture that values, respects, and supports its entire workforce—HCI has not adequately addressed racism, or created an environment that is fully equitable, diverse, and inclusive. The charge to the Commission was urgent, but was also a mandate to be thoughtful and deliberate, in order to deliver sustainable change. The Commission has identified deficiencies, concerns, and opportunities in six areas, defined in the ‘Structure’ section, below.

Scope. Aligned with its charge (see *Appendix 1*), the Commission focused mainly on the elimination of racism at HCI. Problem areas were identified, and we provide here recommendations and implementation options to address these issues for consideration by the HCI CEO. Our recommendations may also form a foundation for advancement in other areas of EDI during subsequent phases of the work.

Opportunity. The Commission recommendations—if accepted and effectively implemented internally and in coordination with our University partners—may greatly enhance employees’ job satisfaction, sense of belonging, and feeling of safety—thus enhancing their ability to contribute their unique talents, efforts, and perspectives toward the HCI mission. A workforce that embraces the advantages of EDI principles will catalyze the progress of HCI.

Structure: The report consists of: the Initial Charge/Commitment, composition of the Commission and its subgroup structure, an Executive Summary, Summary Recommendations, Full Recommendations and context in six areas, and an Appendix containing detailed implementation options and resource materials. The six areas for which we provide EDI Recommendations are: 1) Definitions, Vision and Culture, 2) Clinical Policies, 3) Safety and Refuge, 4) Hiring and Retention, 5) Education, Training, and Awareness, and 6) Trainee Concerns.

Implementation: The recommendations of the Commission will require sufficient FTE and an appropriate operations budget to enable implementation of approved steps. Proposed costs align with anticipated areas of investment noted in the original charge to the Commission. The Commission stresses the urgency for action, and provides timelines for the implementation of options in particular EDI areas.

HCI EDI Commission Summary Recommendations

Section 1. Vision, Definitions, and Culture

- 1.1: Establish common definitions for key terms, to ensure cohesive understanding and unified action at HCI.
- 1.2: Adopt these HCI-specific definitions throughout our enterprise, disseminating them widely through internal and external HCI communication channels.
- 1.3: Embed these definitions and aspirations in policies and materials that emerge from the EDI Commission and HCI's strategic plan, to reinforce our intentions and unify our message.
- 1.4: Create a web page to house EDI definitions and to be a hub for all enterprise-wide EDI content.
- 1.5: Rename the HCI Office of Diversity and Inclusion to be the Office of Equity, Diversity, and Inclusion; retitle the leader of this office in alignment with this change.
- 1.6: Engage in regular culture and climate surveys to learn whether the HCI community understands, believes, supports, and practices the stated vision, mission, and principles.
- 1.7: Commemorate holidays that are relevant to the HCI community, beyond the traditional Christian holidays. Ensure that large, institutionally sponsored HCI events are not scheduled on significant cultural/religious holidays.
- 1.8: In recognition of health disparities in screening and treatment known to be present for historically marginalized groups, provide paid time off for employees to engage in cancer screening exams and cancer treatment, if diagnosed.
- 1.9: Reconsider current employee engagement events (e.g. New Year's breakfast); identify new, innovative, and meaningful opportunities to engage employees.
- 1.10: Establish a team of EDI Ambassadors comprised of volunteer employee advocates from across the HCI enterprise (see also *Recommendation 3.3 and Appendix C3*).
- 1.11: Become an organization characterized by *Belonging* for all HCI employees through our actions to build an EDI-aware and welcoming culture.

Section 2. Clinical Policies

- 2.1: Establish policies, support structures, and training to appropriately and legally respond to incidents of bias that arise at HCI from patients and other individuals outside the HCI workforce.
- 2.2: Commit sufficient FTE to train and educate the clinical staff and hospital employees of all types as to their rights and responsibilities in these matters.
- 2.3: Establish measures to acknowledge and care for HCI clinical faculty/staff who are the targets of incidents of racism/bias.

Section 3. Safety and Refuge

- 3.1: Hire a full-time Director of Equity, Diversity, and Inclusion (EDI) with appropriate support and authority to establish a safe, inclusive, transparent, and responsive workplace culture at HCI.
- 3.2: Provide a software tool for anonymous community-based reporting of racism, discrimination, and biased language or actions at HCI.
- 3.3: Create a team of EDI Ambassadors, to act as a resource for members of our community who experience racist, discriminatory, or biased acts (see also *Recommendation 1.10 and Appendix C3*).

- 3.4: Train the uniformed officers in HCI Security in conscious and unconscious bias and release a statement about their commitment to protect and serve all members of our diverse HCI community.

Section 4. Hiring and Retention

Faculty

- 4.1: Establish new EDI Policies for faculty hiring through joint efforts by HCI Leadership (HCI CEO, HCI Sr. Director for Diversity and Inclusion, Chief Academic Officer (CAO), Executive Director, and Chief Clinical Officer) and in coordination with the AVP for Health Equity, Diversity, and Inclusion in the School of Medicine (SOM) and Human Resources.
- 4.2: Have search committees consult with a manager from the AVP Office of Health Equity and Inclusion and/or the SOM Associate Dean for Health Equity and Inclusion. All search committees should have a “diversity advocate.”
- 4.3: Ensure faculty job advertisements include revised language to emphasize how HCI values diversity.
- 4.4: Regarding both faculty advertisements and searches, follow Section 1 a-c of the AVP/SOM Diversity Plan (see *Appendix D1.*).
- 4.5: Include a “Commitment to EDI” statement in the faculty application package.
- 4.6: Each search should interview an under-represented minority (URM) candidate, as well as strongly consider all other diversity areas (e.g. gender, LGBTQ+, etc.).
- 4.7: To engage URM talent, conduct a ‘Rising Stars’ Seminar series that features top science by URM scientists.
- 4.8: Include expectation of alignment to HCI and U of U EDI principles in offer letters.
- 4.9: For Faculty development and retention, HCI and Departments should work together to create a community of URM mentorship and support with defined mentorship committees, using the Department Retention Plan (see SOM Diversity Plan, Section 3, *Appendix D1.*).
- 4.10: HCI Senior Director of Diversity and Inclusion should conduct an exit interview with departing URM faculty to learn from their experience.
- 4.11: Work with the SOM Academic Affairs Office to implement a required EDI statement within the RPT process – “Describe your past, present, and future commitments to equity, diversity, and inclusion.”
- 4.12: For faculty onboarding, personalize the onboarding process, to recognize cultural offerings and communities at HCI.

Staff

- 4.13: Include a standardized EDI statement as part of all staff job postings.
- 4.14: Include a personal pronouns question in all staff job postings.
- 4.15: Include a “Commitment to EDI” statement in all staff offer letters.
- 4.16: Require EDI and anti-racism training for all staff.
- 4.17: Include EDI ambassadors in all staff hiring.
- 4.18: Expand process for staff stay and exit interviews.
- 4.19: Improve pathways for staff promotion.
- 4.20: Advertise staff jobs in collaboration with organizations that serve underrepresented minorities.

- 4.21: Revamp and improve staff performance reviews.
- 4.22: Expand HR staff definition of expertise to be more inclusive of education and experience completed in countries outside of the United States.
- 4.23: Create an EDI response fund for staff who experience acts of discrimination, racism, sexism, homophobia, xenophobia, etc.
- 4.24: Promote the use of EDI-specific interview questions in staff hiring.

Section 5. Education, Training, and Awareness

- 5.1: Employ a full-time EDI Educator/Program(s) Manager (see *Appendix C2*).
- 5.2: Develop and deliver EDI educational programs for HCI employees; frame this training as professional growth.
- 5.3: Require Anti-Racism Primer training for all faculty, staff, and trainees.
- 5.4: Require advanced anti-racism training for promotion and leadership at HCI (Leadership Preparatory Training and EDI Leadership Certificate).
- 5.5: Require EDI certification for EDI Ambassadors.
- 5.6: Evaluate application of EDI concepts by our community members annually.
- 5.7: Expand EDI curriculum to address other marginalized groups (beyond those targeted by race and ethnicity).
- 5.8: Acknowledge racial trauma suffered by Black, Indigenous, and People of Color (BIPOC) individuals at HCI and provide support and community development.
- 5.9: Communicate HCI's intent to remodel our culture to the community; communicate that changes are intended to refine, improve, and update HCI, so that ALL are welcomed and feel a sense of belonging.
- 5.10: Evoke and encourage an empathetic culture through training and communication strategies.
- 5.11: Explore interacting with the Compassionate Workplace to continue and expand these ideas across the entire HCI community.

Section 6. Trainee Concerns

- 6.1: Conduct trainee townhalls and wellness check-in meetings, attended by both faculty and trainees.
- 6.2: Conduct anonymous surveys to gather information about equity, diversity, and inclusion among HCI trainees.
- 6.3: Create safe reporting avenues where trainees can report events of bias and concerning EDI-related behavior.
- 6.4: Appoint an ombudsperson/arbitrator/mediator for trainees.
- 6.5: Conduct Land Acknowledgements before HCI symposia, seminars, and public events.
- 6.6: Provide equity, diversity, inclusion, and microaggression training for graduate students and postdocs; this training may overlap with other training for staff and faculty.
- 6.7: Provide resources for trainees and faculty to attend conferences focused on networking and career advancement for BIPOC trainees, such as SACNAS, ABRCMS, and AISES.
- 6.8: Support and advertise events and seminars led by Graduate Student Diversity Organizations.