please seek me out and teach me; educate me about how I can be better, rather than characterizing me as insensitive and complaining about it to others.

Let's all help each other understand the barriers to improving diversity, and the benefits it provides to our community and our patients. Let's not shy away from being willing to have these difficult conversations. Just because it is difficult, we should not discontinue or be fearful. Rather, I ask that we remember who we are - a Department that has high ideals and takes real steps to reach them. We are not perfect and factors like heavy workload, fatigue and pressure of time make it easier for implicit biases (and we all have them) to be more readily apparent. But, I ask each of us to remember that we are a department committed to becoming more diverse and inclusive.

Ultimately, I would like us to build a Department that views diversity and inclusion as solutions to problems, not problems to be solved, and I am committed to leading this effort.

Much of this issue focuses on the different ways we are addressing diversity in the Department. I hope you will enjoy reading about the work we are doing, and join us as we build a more inclusive department. And as always, we have a number of faculty and resident honors and awards to celebrate, we introduce you to our new faculty, and we get to know one of our cardiothoracic surgeons, Dr. Kathleen Berfield (page 17), beyond the scope of her professional life. Dr. Kim Riehle's research is highlighted (page 16) and we provide an overview of the recently held Schilling Lecture and Research Symposium. I hope you enjoy reading the entire newsletter.

Sincerely,

Douglas E. Wood, MD, FACS, FRCSEd (ad hom) The Henry N. Harkins Professor and Chair

Diversity and Inclusiveness in the Department of Surgery

Achieving Excellence in Diversity and Inclusiveness in the Department of Surgery

Dr. Jorge, Reyes, Professor & Chief, Division of Transplant Surgery

he work of the Department of Surgery's Council on Diversity **L** and Inclusion (the Council) in increasing diversity is more than just the "right thing to do." It is about creating a culture of diversity and inclusion in our healthcare delivery as a critical component of improving healthcare quality. Our training would suggest that if we just got the "best and the brightest" we would automatically have the best patient outcomes. While not diminishing the traditional measures of excellence used in building our teams, research and experience with our community shows that diverse caregivers enhance excellence in patient care. The goal of the Department of Surgery's Diversity and Inclusion efforts is to create the environment and infrastructure for deep and sustained engagement of the mission that considers diversity and inclusion as core to excellence.



With this conceptual framework, the Council reflects on the events and actions on the road to achieving this goal. In February 2010, Dean Paul Ramsey created the UW School of Medicine Diversity Strategic Planning Ad Hoc Committee and appointed Dr. Carlos Pellegrini as its Chair to develop a new strategic plan for diversity programs in the UW School of Medicine (UWSOM). The group conducted a broad institutional assessment and comparison with best practices, and developed a set of recommendations that would enable the UW SOM to advance and to sustain a learning environment

Dr. Carlos Pellegrini

that was welcoming to and inclusive of individuals from all cultures,¹ and which is embodied the the UWSOM mission statement:

"The School values diversity and inclusion and is committed to building and sustaining an academic community in which teachers, researchers and learners achieve the knowledge, skills and attitudes that value and embrace inclusiveness, equity and awareness as a way to unleash creativity and innovation."

The UW Department of Surgery Council on Promotion of Diversity and Inclusion was formed by Dr. Carlos Pellegrini in January 2013 to establish and report on best practices and metrics to fully integrate and assure the promotion of diversity and inclusion in our department. Presently, the Council has 14 members including faculty, staff and residents: Drs. Jorge Reyes, Professor & Chief, Division of Transplant 1 From: Ad Hoc Diversity Strategic Planning Committee Recommendations; April 26. 2011 http://www.washington. edu/diversity/files/2013/04/medicineplan.pdf

Diversity and Inclusiveness

Continued from page 3



Surgery, Elina Quiroga, Assistant Professor, Division of Vascular Surgery, Andre Dick, Associate Professor, Division of Transplant Surgery, Janelle Sousa, Assistant Professor, Division of Plastic Surgery, Kathleen Berfield, Assistant Professor, Division of Cardiothoracic Surgery, Mukta Krane, Associate Professor, Division of General Surgery, Peter Wu, Associate Professor, VA Puget Sound Health Care System, Tam Pham, Associate Professor, Division of Trauma, Burn & Critical Care Surgery, Nam Tran, Associate Professor, Division of Vascular Surgery, Estell Williams, General Surgery Chief Resident, Tobi Afolayan, General Surgery R2; and Deci Evans, Administrative Manager, Ruth Girma, Program Operations Specialist and Tyrone Jimmison, Director of Philanthropy, UW Medicine Advancement.

They have met regularly to determine the scope of their work, specific goals and necessary steps to achieve the goals. As is the case at the School level, their work is ambitious, multi-pronged and multi-year. The scope of their work is to:

- Work with leadership in the Department and Division to ensure the promotion of Diversity and Inclusion through a variety of methods;
- Review detailed data on current Department composition in faculty and teaching programs;

- Make recommendations on department faculty composition, advancement and future recruitment to the Chair and Leadership Council;
- Develop appropriate metrics for tracking Diversity and Inclusion (working the Department Chair and Chief Diversity Officer of the UWSOM);
- Assist in design and modifications needed in curriculum to ensure they reflect values of diversity crucial to the development of aware and culturally competent students and residents;
- Work with Education Leadership to initiate and promote diversity and inclusion processes to broaden access to the Department of Surgery educational programs;
- Create a Department Mission Statement that reflects the value of Diversity and Inclusion;
- Plan and organize Department-sponsored activities that celebrate Diversity and Inclusion.

The Council has worked diligently in these many areas and is proud to note it has made substantial progress. A Department of Surgery Mission Statement which embraces the value we place on Diversity and Inclusion was adopted:

"The Department of Surgery will provide compassionate and high quality patient-centered care, train future generations of surgical leaders and conduct research in a collegial environment which embraces diversity and promotes inclusiveness."

In addition, the Council has completed an inventory of statistics, activities and data that support our mission of Diversity and Inclusion. Several areas worthy of mention:

- A scholarship has been set up to send residents or young faculty to the Society of Black Academic Surgery (SBAS) meeting and courses;
- Creation of a database using results of a recently completed Department diversity landscape survey to further identify areas of importance, develop activities and measure progress;
- Creation of 3 scholarships for the UW Department of Surgery Sub-internship for medical students from across the US who are contemplating surgery as their specialty;
- Department of Surgery support for the Doctor for a Day program--Medical students volunteer at local area schools with largely diverse student populations to inspire enthusiasm for the medical profession, by allowing students to play doctor for a day;

Diversity and Inclusiveness

Continued from page 4

· Diversity and Inclusion work is now a part of the criteria for promotion in the Department.

The Department's Council on Diversity and Inclusion strives to build an environment where applicants for faculty or trainee positions can see the cultural competency of our staff in their work with teaching or interviewing, when conducting research, and when taking care of patients. We are indeed fortunate to have the commitment, passion and guidance of our Chair, Dr. Douglas Wood, who has set the strategic goals for the Council as:

1) Establish and report on best practices on diversity and inclusion in the department;

2) Work with divisional leadership to assure promotion of diversity;

3) Examine departmental composition and advancement to provide advice regarding recruitment and retention along with actions that assure that all members of the department have the opportunity to advance;

4) Develop programs, workshops, strategies, curriculum and activities, as well as interface with other UW programs, to support diversity;

The Department's Diversity and Inclusion Council strives to build a culture of diversity and inclusion that isn't just about accomplishing one project after another, but rather encouraging a daily look within to assess what each of us is doing to build inclusion, and ensuring that diversity and inclusion becomes a conscious a part of our thinking.

Department of Surgery Women's Council

Dr. Kristine Calhoun, Associate Professor, **Division of General Surgery**

The University of Washington Department of Surgery Women's Council was created by Dr. **Douglas Wood**, The Henry N. Harkins Professor and Chair, after a meeting he held with women faculty shortly after being appointed chair, and during which some departmental issues related to gender were identified.

In 2016, volunteer members from all divisions, ranks, geographic sites, and comprising both faculty and residents, started meeting monthly to identify issues of importance and focus. These volunteers included Drs. Eileen Bulger, Greta Bernier, Kathleen Berfield (pictured page 4), Kristine Calhoun, Shannon Colohan, Heather Evans, Sara Javid, Erin Lange, Lorrie Langdale, Lacey LaGrone, Elina Quiroga









Calhoun

Colohan



LaGrone







Lange



Javid



Sibulesky

Shalhub

(pictured page 4), Lena Sibulesky, Sherene Shalhub, and Nicole Zern. Our first task was an assessment of the state of the state, which we accomplished via a department-wide survey, investigating the impact of gender on perceived career barriers among surgeons.



This past February, I co-presented our findings with Drs. Shalhub and Zern at the inaugural Women's Council-sponsored Grand Rounds. This event will occur annually in March and coincide with International Women's Day, with plans to bring in national, regional and local speakers. Our inaugural presentation was well regarded and led to a number of individuals expressing interest in joining the council. New members will join in July and include Drs. Teresa Kim, Acting Assistant Professor, Susanna Shin, Assistant Professor and Judy Chen, Assistant Professor, as well as a number of residents. Our survey findings were additionally submitted in abstract form for presentation to the **American College of Surgeons Clinical Congress (ACS)** Continued from page 5

last October. Women leaders in other UW School of Medicine departments have been made aware of our work and are reaching out to collaborate, and I recently had the chance to present to the Dean's Committee on Women in Medicine and Science, where it was also well received.

In addition to our initial survey, the Women's Council is preparing another survey inquiring about promotion practices within the department, which will be distributed via RedCap later this month. The goal is to ultimately develop a promotion mentorship program, the first of its kind within the department. We were further asked by the chair to develop a formal policy addressing work-based issues for parental leave. We surveyed women faculty with children and from their responses, compiled suggestions regarding conduct pertaining to operating, clinic coverage, and call duties while pregnant. We also compiled suggestions with respect to leave and lactation support issues. That work, which was recently presented to the department's Leadership Council, is in draft form and currently being finalized for implementation department wide. Finally, we are moving forward with plans to collaborate more closely with the department's Diversity Council, realizing that strength comes from unity and that many issues intersect between these two groups. Preliminary dialogue with this council has been very rewarding and we look forward to continuing this collaboration.

As chair of the Women's Council, I have had the opportunity to work with many dynamic individuals I previously only knew in passing. We have begun to work more closely together to address issues important to us all. We are fortunate to work within a department that has placed emphasis on equality for all members and a willingness to address challenging and potentially difficult topics.

Carlos A. Pellegrini Diversity Visiting Student Internship Program

Dr. Elina Quiroga, Assistant Professor, Division of Vascular Surgery



In 2014, the **Association of American Medical Colleges** reported that although African–Americans comprised 13% of the nation's population, they accounted for only 4% of the physician workforce. Similarly, Latinos represent close to 20% of the US population, yet less than 5% of physicians are Latino. These disparities are even more pronounced among surgeons. Other underrepresented minority groups in medicine follow similar trends. Evidence

demonstrates that racial, ethnic and linguistic diversity in health care providers is correlated with better access to and quality care of minority populations. In order to fulfill our mission, the Department of Surgery aims to diversify the pool of outstanding surgeons trained by our institution, and one of the initiatives of the department's Diversity Council is to increase diversity within each of our four residency programs. Since 2014, we have provided an opportunity for underrepresented minority medical students interested in pursuing a career in surgery through the Carlos A. Pellegrini Visiting Internship Program. The program is named after Dr. Pellegrini in recognition of his continuous contributions to the personal and professional development of minority medical students, residents, fellows and faculty. The program not only gives medical students a chance to experience the exceptional training that we have to offer, but it also creates strong relationships with applicants, provides mentorship and guidance during their time with us, and demonstrates our strong commitment to diversity.

The **Carlos A. Pellegrini Diversity Visiting Student Internship Program** is now in its 5th year and it has become a model both locally and nationally. Several other departments in UW School of Medicine have launched successful Sub–Interships using our approach, and numerous Departments of Surgery across the country have reached out to us for advice and guidance as they emulate our work.

This year we have received applications from medical students interested in Cardiothoracic Surgery, General Surgery, Plastic Surgery and Vascular Surgery; three of those outstanding medical students will join us in late September for a four week clerkship.

The funded scholarship provides a stipend to help cover the cost of airfare, lodging and living expenses during the Sub–Intership and is open to applicants who demonstrate academic excellence, strong leadership and extracurricular experience. The clerkships are available to full–time fourth–year students who are in good standing at LCME–accredited U.S. medical schools. More information about the Carlos A. Pellegrini Diversity Visiting Student Internships Program can be found at: https://www. uwsurgery.org/educationintroduction/div-edu-opps/.

For medical students outside the US, our Department already offers a Certificate Program for Foreign Medical Graduates, one of very few in the country. After successful completion of the program, international medical graduates may then apply for a two-year preliminary position in the General Surgery residency program, which serves as a springboard for obtaining a categorical position and successful completion of surgical residency training at UW or other programs around the country. Several applicants from Latin America, Europe, Asia and Africa have successfully completed this program. More information can be found at: https:// www.uwsurgery.org/educationintroduction/residencyprograms_overview/general-surgery-residency-program/ apply/foreign-nationals/.