

## **Frequently Asked Questions about what Hennepin Healthcare is doing in response to recent photos, concerns about racism**

As we work to become an anti-racist organization that makes real progress on advancing health equity, we know that along with incremental successes we will also encounter new learnings, pain points, and challenges to overcome. We also know that these discoveries create even more pain for our team members and our community, who are already trying to heal from racism. These events, hard as they are, also provide an opportunity to realize our mission of high-quality healthcare for our community and enable us to reach our full potential as an organization.

We saw an example of that with the existence of Blackface photos that were shared publicly recently by a media outlet before the internal personnel review concluded and any employment actions could be determined based on the findings.

### **Did you take action in this case?**

Yes, we have taken strong action with the individuals involved.

### **Why did it take so long to take action in this case?**

As we address racism at Hennepin Healthcare, we are being more intentional. Although we are never able to discuss ongoing personnel matters, we have learned that there are times when we need to accelerate the process, without jeopardizing the integrity of the process.

### **When was this photo taken?**

We don't know the specific date; to the best of our knowledge these may have been taken 10 years ago. But whether it was 10 years ago or 10 days ago it is racist, wrong and does not represent the values that we aspire to at Hennepin Healthcare.

### **This happened soon after the controversy over the MPD training on excited delirium. Did Hennepin Healthcare make any changes after that?**

Yes, the person who created the training last fall and who served as medical director for the Minneapolis Police Department is no longer in that role. Also, we created a new education module. We involved many internal and external stakeholders in the process of creating and reviewing the module and we intend to offer it to the city. It will be up to the city if they want to use it. It was created in an anti-racism framework and provides needed context about why we no longer teach or recognize excited delirium.

## **Employees are describing a range of incidents that suggest racism is tolerated in the workplace. Is this true?**

Racism is within our walls. We try to be clear in our words and actions that we do not tolerate racism and are, in fact working on becoming an anti-racist organization, but I will admit that these stories, along with others we know are out there, tell us we have work to do. I believe that the open airing of these incidents – painful as it is – will help us get there. If you don't name it you can't fix it.

Please also understand that we are a very diverse organization with so many incredible team members working side by side to provide outstanding health care – often to very vulnerable populations struggling with homelessness, addiction, and trauma. We are trying to look like the communities we serve, and we are very proud of our team members. We must work to ensure that our patients, team members and visitors feel safe and valued. We will address any concerns that are brought to our attention – as well as those that are not. Our [Health Equity Department](#) and many other teams are fully engaged in doing this work and ensuring all 7000 see it as their work too.

## **What should patients know about accessing emergency medical care services after seeing the photo?**

Our EMS team is a critical part of the services we provide to our patients. This has been especially difficult for the individuals who continue to do the work within the department and for our community. We are grateful for their service, and we will continue to support the team as we all together address the racist issues we may encounter. Our aim is to establish a workplace where everyone feels safe.

## **What has Hennepin Healthcare done to address racism?**

Our board declared racism a public health emergency in the summer of 2020 and one of the first things we did was hire a [Chief Health Equity Officer](#) and create a department to support her work. Since then, we have:

- launched a comprehensive, yearlong, health equity educational program that all leaders are expected to complete. This training will eventually be extended to all team members to ensure a baseline knowledge of health equity, diversity, equity, and inclusion across our system.
- created a “Collectives” infrastructure of 14 groups of team members from across our system that will foster affirming social relationships, professional networks, development opportunities and a deeper sense of belonging in a space where diverse employees can be their authentic selves and be empowered to take action
- embedded diverse vendor goals into our annual plan – and we are making progress on these
- launched a [Talent Garden](#) program and offered our first youth summit entitled [Black Men with Stethoscopes](#) in December 2021 for young Black men to foster an interest in healthcare careers. Two more events – [Black Women with Stethoscopes](#) - are planned for

this spring. We are also offering internships and other opportunities to bring more People of Color into careers in Health Care

- developed an antiracism policy that is in final stages
- continued community conversation workgroups to keep us honest with our promises to the community
- increased resources to our violence prevention program, [Next Step](#), to assist victims of violence within our community
- continue to focus on recruiting and retaining a diverse workforce
- embedded diversity, equity, inclusion, and trauma-informed care training into new employee orientation
- defined employee experience and behaviors ensuring we all are focused on being diversity, equity, and inclusion advocates

### **What else has been done?**

The Health Equity Department was launched in the midst of COVID, so our first several months were spent ensuring equitable access to COVID vaccines. We did this by using data to identify and target patients who lived in zip codes that represented both the highest rate of COVID-19 positive patients and the highest risk based on their community need index (CNI) scores, which reflect the factors that contribute to health disparities.

We worked with trusted community partners to host vaccination sites in those communities to close the gap in access to vaccines and have administered more than 10k vaccinations to targeted populations so far.

We have had department-level education sessions (approximately 500 so far) on implicit bias, microaggressions, and racism. We also have created Health Equity Ambassadors to assist in bringing training to our teams.

The point of telling you this, is that we are seeing stories today of what we need to address in our culture, but we also want our community to know what we have done, how we continue to serve our beloved community – which is really our reason for existing as a public, safety net hospital.

### **What are the next steps?**

As a learning organization, we need to move forward on all fronts:

- finalizing the comprehensive health equity strategy
- educate to change perceptions and actions,
- evaluate our policies and processes through an anti-racism lens
- do the thorough and deep work of creating a culture of accountability.

We are going to hold each other responsible for both learning and for change so that as a community and as an organization we advance together. Our message is to ensure that “no one gets a pass.” This is everyone’s work, everyone’s responsibility, and everyone’s commitment.

**Equity statement**

We at Hennepin Healthcare believe equity is essential for optimal health outcomes. We are committed to partnering with our entire community, both internal and external, in achieving their fullest health potential by actively eliminating barriers due to racism, or any other consequence of social position or socially influenced circumstances experienced by people of color (POC).