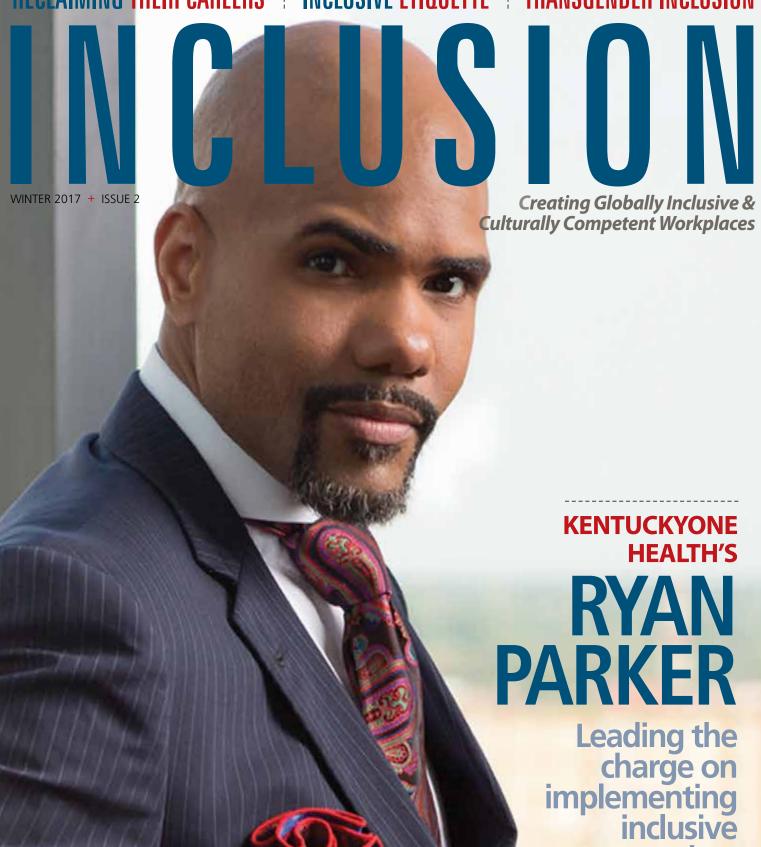
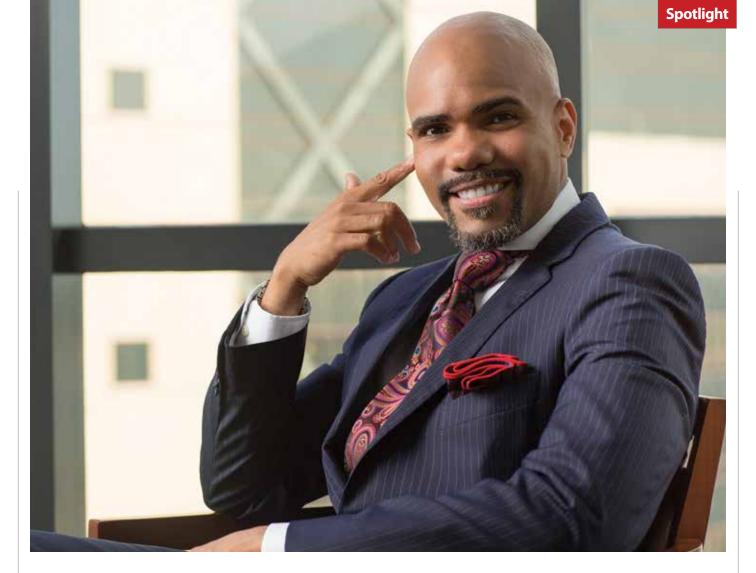
HOW BABY BOOMERS ARE RECLAIMING THEIR CAREERS

PRACTICING INCLUSIVE ETIQUETTE

THE QUEST FOR TRANSGENDER INCLUSION

practices





Ryan Parker

Division Vice President for Diversity and Inclusion, KentuckyOne Health

Ryan Parker uses diversity and inclusion work to help improve the health of all populations.

ENTUCKYONE HEALTH IS THE largest health-care system in the Commonwealth of Kentucky. Ryan Parker is responsible for building a strategy that enhances KentuckyOne Health's vision to be a nationally distinguished health system and a benchmark health-care system for diversity, inclusion, and health equity.

Parker has led national award-winning diversity and inclusion programs for organizations in both the health-care and the academic sectors. His credible reputation has led him to distinctive roles at Children's Hospital of

Philadelphia, the University of Pittsburgh Schools of the Health Sciences, and the Robert Wood Johnson Health System in central New Jersey—the 2015 winner of the American Hospital Association's Equity of Care Award. These experiences were preceded by time as a public school teacher where his passion for advocating for diversity and inclusion and serving the vulnerable began.

Parker's leadership has been recognized by several national publications and organizations. In 2015, he was named on Diversity MBA Magazine's list of Top 100 Executives Under 50. In 2014, he was recognized by *Becker's Hospital Review* as one of the nation's Top 25 Healthcare Leaders Under 40. And, in 2013, The Network Journal named him among the nation's top 40 Under-Forty minority executives. He serves on numerous boards—including the Louisville Urban League and Volunteers of America and is an active member of the Rotary Club of Louisville and the National Association of Health Services Executives. Parker graduated from Jacksonville State University in 1999 with a BS in psychology.

Study after study has proven that more inclusive organizations have higher employee engagement. In health care, this leads to better quality of care. **INCLUSION:** What will be some of the biggest issues and challenges in 2017 for a corporate diversity and inclusion leader like yourself? **Ryan Parker:** One of the greatest challenges for diversity and inclusion leaders is not a new one—it is the continued journey of moving our organizations beyond diversity to inclusion. And as many organizations are still grappling with diversity, inclusion is the real opportunity and remains the most difficult to achieve—and yet, the most rewarding to an organization's people and bottom line.

Presumably, when you hire, you want to be sure the potential candidates are a good fit for the company and its mission. How do you hire? What factors do you take into consideration and what questions do you ask?

"Fit" is a term for discussion. I've often said "the right fit" is the enemy of diversity, because it tends to lead toward more homogeneity—more of the same—and not diversity. So, in a recent discussion with our sourcing team about diverse talent sourcing, we discussed the term "fit" and how "the right fit" approach might be a blind spot on our journey toward achieving diversity when it is not functioning absent of bias—and that can be tricky. So, while we are looking for "fit," we are also looking for something different a potential employee brings to the table. Diversity is giving us a lens to look more closely for those unique characteristics that diversify, even, the "right fit" for our organization.

IN: What are some ongoing or special initiatives your company is engaging in now to maximize inclusion with your team?

RP: By far, it is the engagement with our board of directors. We have a highly committed and diverse board of directors. In fact, we've increased board diversity by 21 percent during 2016—exceeding national averages in the healthcare industry. We know their engagement is paramount to build meaningful and sustainable diversity and inclusion efforts, so we are thrilled.

IN: How do you measure success in terms of diversity and inclusion? Retention? Organizational alignment? Participation in inclusion activities?

RP: All of the above. We have evolving outcomes-driven dashboards in place—ranging from workforce measures to patient care measures. In health care, it's important for us also to know the impact of our diversity and inclusion journey on our patients—how they are perceiving their experiences in our facilities as well as our monitoring our performance in closing barriers in care and health outcomes for diverse and underserved populations. But, we think the best measure of success is the engagement of our workforce. Inclusion and engagement are two sides of the same coin. Study after study has proven that more inclusive organizations have higher employee engagement. In health care, this leads to better quality of care, which is the ultimate goal of our diversity and inclusion efforts. **IN:** In terms of diversity and inclusion, what are the biggest challenges your company faces and how do you plan on approaching them? **RP:** KentuckyOne Health is the largest healthcare system in our state, so we cover a broad geography. The diversity of where we are located—from urban Louisville to very rural parts of the state—creates a challenge to actively engage our entire workforce in one discussion that is meaningful and responsive to their specific market and local communities. Early on, we learned that being intentional to define diversity, locally, would be very important to ensure active engagement of our workforce on the journey. Keep in mind that even within homogeneity there is still a great deal of diversity—diversity of thought, perspective, and ideas, working styles, generations, etcetera and these areas of diversity can lead to some of the greatest challenges in the workplace. So inclusion still remains the greatest opportunity and the real work to help manage those differences. This challenge has created the perfect platform for us to place more intentionality around defining diversity broadly and engaging early on in discussions about inclusion. **IN:** As more and more Millennials join the job force, and as baby boomers slowly age, has this phenomenon provided challenges for you? RP: Yes—particularly when addressing reten-

tion of nurses. In the nursing profession,

there is an increase in employment of nurses under the age of 30, as well as an increase of that demographic in nursing schools. One study suggested that 91 percent of Millennials intend to change jobs within their first three years in the workforce. This is no different in health care. In fact, it seems exacerbated a bit in the nursing profession. This is not promising in health care, as high turnover of nurses can have implications on patient safety and the quality of care. More and more, focused strategies on retention of nurses are increasingly becoming important to our business and mission as a health-care provider. We are aggressively addressing this challenge and making progress. Inclusion, engagement, expanded growth and development opportunities, clearer career pathways, and becoming the employer of choice are our strategic approaches for addressing this challenge and, hopefully, shifting this paradigm.

IN: Would you say that your company exhibits a culture of inclusion? If you think it can improve, what are some of the challenges and how are you working to overcome them? **RP:** Aspirationally, absolutely—inclusion is at the core of who we are. It is the foundation of our core values of reverence, integrity, compassion, and excellence—but, like all places, we have opportunities. One of our greatest opportunities is being more inclusive and engaging with staff across all shifts. Health care is a 24-hour business, and, sometimes, engaging our evening, overnight, and weekend employees the way we engage our Monday through Friday daytime employees is a challenge. One way we are working to overcome this challenge is to be more innovative and engaging in our internal communications platforms—and engaging with our workforce in ways that work best regardless of their shift. We have employee feedback councils who help us create more engaging platforms, and we're very excited about that.

IN: How will your role change in the next five years? Will more be expected of CDOs?RP: As many organizations are in the midst of financial turnarounds—particularly in health care—CDOs will be required to do

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more, oftentimes with less, to ensure that our organizations see diversity and inclusion as foundational and a fully integrated business driver for operational excellence, or diversity and inclusion programs might be at risk. We will be expected to articulate the value and return on investment beyond the morality, ethics, and social responsibility case. All CDOs should be on an intentional journey of integrating diversity and inclusion as an operational business division beyond a human resources "people" strategy. If we fail to do this, we are not tapping into the true value of diversity, and the importance of the work becomes at risk of being diminished.

IN: For a number of years, practitioners of diversity and inclusion have been making the business case for D&I. Do you think this message is sinking in? Does your company's leadership view a culture of diversity and inclusion as a competitive advantage?

RP: The answer to this question is rooted in our response as diversity and inclusion practitioners, and if it's not sinking in, we have to shift our approach. At KentuckyOne, yes, the message is sinking in. The turning point was when we made the shift of positioning diversity and inclusion as a people-only strategy to a patient safety, quality of care, provision of service, employee engagement, and business growth strategy. So, today, we are very intentional to articulate our diversity and inclusion work as a key driver to our mission of improving the health of all populations and being an employer of choice—and our diversity and inclusion goals are explicitly built into our organization's operational goals and strategic priorities with metrics that articulate the return on investment. Building diversity and inclusion into the way the organization performs and talks about performance will elevate it from being a program to being a priority.

KentuckyOne Health's mission,"to deliver wellness, healing and hope to all—including the underserved,"is not just a mantra—it is who we are. Today, diversity and inclusion are the way we operationalize that mission into our day-to-day operations—top, down, and bottom, up. We're excited about the journey. IN