



**For Immediate Release**

**Monday, June 13, 2011**

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### **Reducing Disparities and Increasing Diversity a Priority for Connecticut Hospital Association**

Wallingford, CT – As part of its public commitment announced in 2009 to address racial and ethnic disparities in health outcomes, expand diversity in the governance and leadership of Connecticut hospitals, and create opportunities for supplier diversity, the Connecticut Hospital Association (CHA) released a progress report to its members today, highlighting its achievements to date.

Significant accomplishments include the announcement of a first-ever statewide “Diversity Collaborative,” modeled on the Institute for Healthcare Improvement’s successful clinical collaborative structure, hosting two Supplier Diversity Vendor Fairs concurrent with the 2010 and 2011 CHA Annual Meetings, and working with the Greater New England Minority Supplier Development Council to identify minority-owned vendors to offer products and services to hospitals. The update also cited progress in identifying and electing minority trustees to the CHA board; hosting *Partnerships: A Model for Addressing Community Health*, a program that focused on eliminating health disparities; and working with the Institute for Diversity in Health Management to develop orientation sessions for potential hospital trustees and education support for hospitals on addressing disparities and diversity issues.

“We’ve been working on this diversity initiative since we established a partnership with Connecticut’s NAACP in 2009 to look for ways to address some of these concerns. I’ll be candid – we have a lot of work to do,” said Jennifer Jackson, CEO of CHA. “But we have one of the widest-ranging hospital association initiatives in the country,” said Jackson who also serves on the board of the Institute for Diversity in Health Management, a national non-profit organization with a mission to expand healthcare leadership opportunities for minorities.

“We’ve got a lot of positive momentum and our membership is engaged and enthusiastic,” Jackson said. “These initiatives won’t be completed overnight, but we are committed to long-term substantive change, and we will share data and be held accountable.”

Specific progress noted in the report included:

- 1) Established a Subcommittee on Diversity and Cultural Competence to develop an action plan to improve diversity in hospital governance and senior management and an initiative to address hospital cultural competency needs and requirements.

- 2) Engaged a leadership development and strategic communications firm with a particular expertise in educating organizations about effective ways to enhance diversity to assist with CHA's diversity work.
- 3) Announced a statewide "Diversity Collaborative," modeled on the IHI's collaborative structure, which CHA has used successfully for several years with its statewide clinical collaboratives. The project structure allows hospitals to work together on identified improvement strategies, share ideas and progress through a project website, access a collaborative listserv, and participate in education sessions. Data collection and the use of metrics for accountability in tracking performance and progress in making sustainable change is a key component of this model.
- 4) Engaged a consultant with expertise in health equity and diversity issues to assist with outreach and networking for the Diversity Collaborative, which will launch with a kickoff symposium in September, featuring a guest panel of renowned experts, community partners, and stakeholders. The symposium will mark the start of a multi-year program of team engagement, conference calls, education programs, data sharing, and identification of and reporting on best practices and results.
- 5) Joined the Institute for Diversity in Health Management (IFD), the leading national organization focused on expanding healthcare leadership opportunities for ethnically, culturally, and racially diverse individuals, and increasing the number of these individuals entering and advancing in the field. CHA President Jennifer Jackson was appointed to the IFD Board of Directors in 2009.
- 6) Established a CHA Supplier Diversity Work Group to expand supplier diversity in hospitals by identifying product and service opportunities for Connecticut minority businesses to offer to hospitals.
- 7) Began working with the Greater New England Minority Supplier Development Council (GNEMSDC) to identify minority-owned business enterprise (MBE) partners. Twenty-four MBEs have been added to CHA's Group Purchasing Organization portfolio and CHA is continuing to work with GNEMSDC to create additional opportunities for MBEs.
- 8) Launched a dedicated website to promote these businesses (<http://www.chassp.com/>), and will be hosting a second Supplier Diversity Vendor Fair concurrent with the CHA Annual Meeting in June at which senior executives and purchasing decision makers will be able to learn more about the products and services offered by CHA's MBE partners.
- 9) Hosted *Partnerships: A Model for Addressing Community Health*, a program that focused on addressing community health needs, eliminating health disparities, and moving toward healthcare equity. Held in collaboration with the Connecticut Commission on Health Equity, Saint Francis Hospital and Medical Center and its Curtis D. Robinson Men's Health Institute, and Tuskegee University, this event focused on the prostate cancer screening and treatment initiative conducted by the Men's Health Institute, as well as its new research partnership with Tuskegee University.

10) Elected minority trustees to the CHA Board and continue to work with the Institute for Diversity in Health Management on structuring orientation sessions for potential hospital trustees and developing education support for hospitals on addressing disparities and diversity issues.

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The Connecticut Hospital Association has been dedicated to serving Connecticut's hospitals since 1919. Through state and federal advocacy, CHA represents the interests of Connecticut's not-for-profit hospitals on key healthcare issues in the areas of quality and patient safety, access and coverage, workforce, public health, and hospital reimbursement