Introduction
In May 2019, The Health Management Academy conducted a quick-hitting survey of Leading Health Systems regarding diversity of leadership. The eleven responding senior Diversity & Inclusion executives and Chief Human Resource Officers represent health systems with an average Total Operating Revenue of $8 billion that own or operate 165 hospitals with 36,891 beds and approximately 1.86 million admissions per annum.

Key Findings
- Most health systems (91%) track at least one diversity metric across their organization’s leadership. Over half of respondents (55%) track metrics across all levels of leadership.
- Many responding health systems are implementing an array of initiatives to improve diversity in leadership, however, more than half (55%) lack specific diversity benchmarks.
- Only 27% of respondents describe the gender representation of their health system’s Board of Trustees as equitable. Across all leadership levels, all respondents reporting poor gender equity indicate that females are underrepresented.

Results
Metrics for Tracking Diversity of Leadership
Leading Health Systems typically (91%) track at least one diversity metric in their organization’s leadership with only one respondent reporting they do not track any metrics for any leadership roles. The most common diversity metrics include ethnicity (91%), gender (91%), and age of leadership (73%). Fewer health systems track metrics such as education level (27%) or veteran status (9%). All health systems report tracking multiple diversity metrics, most commonly a combination of age, ethnicity, and gender (55%) (Figure 1). Almost one-fifth of health systems (18%) track education in addition to age, ethnicity, and gender.

Many (55%) responding health systems report that they track diversity metrics at all levels of leadership. The majority (91%) of health systems track diversity at both the C-suite and 82% at the SVP/EVP levels, whereas only 64% track diversity at the Trustee level. Moreover, 63% of health systems report that they also track diversity metrics for all other employees (i.e. non-leadership) at their organization (Figure 2).

Figure 1. What diversity metrics does your organization track for your health system’s leadership?

Figure 2. For which levels of leadership does your organization track diversity?
Diversity Benchmarks

Over half (55%) of responding health systems indicate that their organization lacks diversity benchmarks (Figure 3). Among systems that have specified benchmarks, health systems leverage industry standards such as PricewaterhouseCoopers’ Saratoga Institute benchmarks or government established benchmarks. Health systems will also utilize diverse slate goals, in which recruiters and hiring managers ensure a certain level of diversity within the selected candidate pool for a particular role.

Responding health systems report many diversity initiatives that have either been implemented or are in the process of being implemented in effort to increase diversity across leadership levels. Commonly, these initiatives involve setting clear diversity targets and goals and establishing the appropriate organizational structures to support these goals (e.g., hiring a Chief Diversity Officer, developing a system-wide Diversity Council). Additionally, health systems are focused on leadership development through implementing pipeline-building leadership programs and organizing employee resource groups and mentorship programs. Furthermore, health systems are prioritizing education, focusing on educating hiring managers about unconscious bias, and recording and distributing diversity data to organizational leadership on recruitment, hiring, promotions, and turnover for both applicants and staff.

Gender Equity

Gender equity is generally defined as 40-60% representation of each gender. Most health systems report C-suite (64%), SVP/EVP (64%), and Other Leadership (73%) teams as equitable, however only 27% of respondents describe their Board of Trustees as equitable (Figure 4). Across all leadership levels, 100% of respondents reporting poor gender equity indicate that females are underrepresented.

Specific strategies that health systems have employed to address the gender imbalance amongst leadership include educating hiring leaders, reviewing diversity metrics in succession planning, examining pay equity, utilizing employee resource groups to help develop diverse talent, and establishing leadership diversity councils to implement initiatives.