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Speaker 1 ([00:00](#)):

In this episode of Tim Talk, we'll get to know the members of the Northern Light Health, Diversity Equity and Inclusion council.

Tim Dentry ([00:08](#)):

Greetings one in all I'm Tim Dentry, president and CEO of Northern Light Health. I am thrilled to have you join us for kind of a different twist on Tim Talk. This week, we'll have a panel discussion of four guests, and they're more than guests. They're colleagues, and they're close associates on our Diversity Equity and Inclusion council. This is a dynamic diverse and talented group of individuals who are behind all the hard work that is happening around our Diversity Equity and Inclusion initiatives, a critical part of our culture of caring. I'll introduce each of them and then we'll talk first, Dr. Olamide Sobowale and OBGYN physician and system medical director for the Northern Light Women's Health service line. And also as a matter of fact, a return guest as she was on the very first podcast that we had. Thank you for being here, Dr. Sobowale.

Dr. Olamide Sobowale ([01:12](#)):

Thanks, Tim for having me.

Tim Dentry ([01:15](#)):

Next is Emily Tolman who after a successful career in nursing and nurse management is now the Northern Light Health director of health equity and access. So happy to have you with us, Emily.

Emily Tolman ([01:29](#)):

Thank you, Tim.

Tim Dentry ([01:30](#)):

Next is Mia Dubois, who also came up through the ranks of nursing. Is now the associate vice president of patient experience for Northern Light Health. Welcome Mia.

Mia Dubois ([01:40](#)):

Thank you, Tim. Thrilled to be here.

Tim Dentry ([01:44](#)):

Our fourth member of the Diversity Equity and Inclusion council, by the way of which there are 20 members and another return guest from season one. And I would say the fourth of the four people I'm introducing today as someone that I deeply trust and admire and respect all four, the fourth person is Melissa Skahan, vice president of mission integration at Northern Light Mercy Hospital. Thank you for joining us, Melissa.

Melissa Skahan ([02:15](#)):

Absolutely. It's a pleasure to be here, Tim.

Tim Dentry ([02:18](#)):

Thank you. Thank you one and all. So to start, I think it'll be great if we could go around the virtual room here and have you share with our audience a little bit about your backgrounds and perhaps you could share with us why you are a member of this Diversity Equity and Inclusion council and how this work inspires you. Dr. Sobowale let's start with you. And if all of you could keep in mind answering this question, what do you want our listeners to really know?

Dr. Olamide Sobowale ([02:52](#)):

Well, thank you for that lovely introduction, Tim. I'll start by saying so I'm Olamide Sobowale, and my background is I'm Nigerian by birth and I've lived in a couple of different countries, Canada, and now in the US as well as England. And I got my first job out of residency, actually in Maine. And I thought I wouldn't be here very long. And here I am bought a house this summer, this past summer, and here I am. And in this course of being part of Eastern Maine Medical Center, which is where I work in my practice there, I had the opportunity of becoming a member of the Diversity Equity and Inclusion advisor council. And to be honest, when I was asked if I wanted to be part of it, I was a little bit skeptical. I didn't really feel like I needed to be part of the council.

I didn't really think that necessarily it would be very effective to be honest, I had my own preconceived notions of what this council was going to be. But one of my mottos in life is you don't get to complain about things and then not do anything about it. So if you want to complain, you have to put in some effort too. So I said, "All right, I'm on this. I'll get on the council, let's see what this is all about. And honestly, I've been really, really impressed and really happy with what we've done in the council. And I think the biggest thing that I would take from the council that I always tell my colleagues and people who ask, "What do you even do on that thing? Who is on it? And why do you guys meet?" Is one thing that you said when we first started, Tim. And that was that we are not just people to sit around in a meeting and talk about things, but we're here to make a difference and we're here to actually affect change.

So if you have an idea, if you have input, then please bring it forward that we're all here on equal footing, as people with different backgrounds, different genders, different experiences. And we all need to be respectful of those experiences, but also try and make Northern Light as a system inclusive and welcoming to people. So I think we've done a lot of actually good movement with this council and I'm very proud to be part of it. So that's my little story.

Tim Dentry ([05:03](#)):

Terrific. Thank you, Dr. Sobowale.

Dr. Olamide Sobowale ([05:06](#)):

No problem.

Tim Dentry ([05:06](#)):

Emily, please.

Emily Tolman ([05:08](#)):

Good afternoon. So I've had the great pleasure of working at Northern Light for over 20 years in various roles from bedside nursing to leadership roles, to educational roles. And one consistent theme that resonates with me is the ability for patients and families to receive care. And when I think about that, I think about, they need to receive care when they need it, how they need it without any barriers being

present. And throughout the themes through my journey in nursing career and management experience is access opportunities and resources must be available to achieve one's highest priority of health. And that's not always given to patients I'm that advocate to make sure that we are looking at every patient, every community.

My current role has allowed me to look at that and look at developing targeted outreach strategy and education surrounding this. I'm one of the newest members of the DEI council. I joined the council in late October, and I was thrilled because I was going to be able to have the ability to collaborate and discuss how social needs, physical environment, health behaviors, all influence health equity and health outcomes. With this role and my passion, I am hoping along with this council that we'll be able to discuss some of these issues. Health equity and access is about making a community difference by truly being involved.

Tim Dentry ([06:40](#)):

Thank you, Emily. Mia.

Mia Dubois ([06:45](#)):

Thank you. So when I look back at my professional career and what's brought me to being here at Northern Light, one thing that's been consistent is that I've always had a passion for helping others become their best version of themselves. So at times that's been assisting the direct care provider through their growth and development. Sometimes it's been process improvement work, but that's always been a driving factor for me is to really help others become their best selves. And I also have a passion for purpose-driven process improvement. I love process improvement work, and really getting down to the grassroots of problem solving together with others.

As a first generation American, I grew up seeing struggles of my parents as they acclimated to American culture. Both of my parents immigrated to America from Finland as young adults. My mother has a very strong accent. It's very clear that she is from away and she's very tightly tied to her culture and her Finnish community. My father, however, has worked very hard to fit into this culture. And I never really gave it much thought growing up. It wasn't until I was an adult when we were having a conversation and somebody asked why my sisters and I never learned to Finnish language. And I hadn't really thought much about that either, but my father was very passionate with his answer. And he shared the bullying that he experienced as a young adult with having broken English as a young boy and how many physical altercations he had to endure because of English not being his first language. And it was because of that he said he will never let his children speak that language outside of the home, which was eye opening, because as a child, I was like, "What?"

I couldn't believe that was actually occurring, but it was very much true for him. So that really motivated me and it changed my perceptions and it really made me want to join this group. I know that we at Northern Light are on a journey of inclusion and that was a journey that I definitely wanted to be a part of. So hopefully that does not happen to other community members. When I think on your question, Tim, about what do we want our listeners to know, for me, it's really to ask the hard questions and be ready to listen to the answers. So it's really about having the courage to ask and then listening with an open heart and open ears.

Tim Dentry ([09:17](#)):

Thank you. Thank you. Melissa.

Melissa Skahan ([09:19](#)):

Yeah, absolutely. I've been at Mercy for 15 years. So over that time I've had the privilege of working very closely with the new Mainers, population in Maine, people from all over the world. And I think one of the things that I'm so mindful of is that continuous learning. There does not seem to be periods of time at Mercy, where I'm not constantly learning about new cultures about new healthcare needs, about new traditions and about new desires from within the community that we both encounter. I am also in awe of the resiliency of the human spirit. When I think of the stories associated with many of the people that I have the privilege to serve, it's amazing that they are standing before.

I always think of the work of Northern Light Health and the work of Northern Light Mercy in Portland as a deep seated commitment to make it better, whether it is healthcare or other aspects of the systems that interface with new Mainers. I also think it's so important that we continue to ask ourself as Maine continues to get more diverse, that we can be sure that everybody who crosses a Northern Light threshold is welcome and feels welcome and everything that they experience elevates their healthcare and positively influences their life and that we hold ourself to that truth. I've had wonderful opportunity. I continue to learn each and every day and look forward to continued growth and development within the new Mainer community, within Northern Light Health.

Tim Dentry ([11:10](#)):

Thank you, Melissa. That's terrific. And thank you all four of you. One of the personal values and benefits I always get, and I just so much look forward to not only these talks, but for our listeners right after this, we get into our DEI council meeting and we have a full agenda and a lot more people will join us and we'll get some more work done on these lines. But I always think, wow, if we did not have an open-mindedness a curiosity to learn about other people's stories and openness to listen, engage and find joy in other people's stories, what a loss, what a deficit that is. And especially, I know all of us look through the COVID lens and different degrees of thickness of that lens, but it's changed so much.

And I hope that it has changed a lot of people so much that they realize there's so much beauty and value in other people's stories. And you can just feel so much more reassured as a human being and that's taking the time to listen. So thank you for sharing that. I now have a question for each of you. It's a slightly different question. So we'll go around the room again. We'll start, Emily, with you. This is about the work of the Diversity Equity Inclusion council. Understanding that our audience might not be familiar, most likely is not as familiar with the inner workings of the council. So our audience, I think could benefit from hearing, Emily, a broad overview of the group, the council and its work.

Emily Tolman ([12:54](#)):

Thank you, Tim. I would love to give an overview of the Diversity Equity and Inclusion council. There are internal and external membership comprised of frontline staff, care providers, and leaders. This council fosters actions, creating an inclusive work and community environment for all. One of the key takeaways that I've taken from this council from day one is, Tim has always instilled in the council that this is a safe place for uncomfortable conversations to become comfortable. And I think every time that we have these council meetings, that's always at the forefront of the council members. So I really enjoy that piece of this council and how important it is to all of us. We look at creating and implementing diversity inclusion strategies amongst our healthcare system, and also working with community partnerships. We also discuss, identify and address any emerging issues that impact culture, surrounding diversity inclusion. And most importantly, we are looking at our education and onboarding of our staff around Diversity Equity Inclusion, making sure that everybody is educated and look at policies and procedures to make sure that we are instilling our mission and values around DEI.

Tim Dentry ([14:13](#)):

Very good. Thank you, Emily. That's that's a great overview. And one of the specific areas, so this question will be for Dr. Sobowale, policy change that was spearheaded by the DEI council was the provider anti-discrimination policy that you had a lot of input on Dr. Sobowale, obviously we followed your lead on that significantly. Could you talk about that a bit?

Dr. Olamide Sobowale ([14:40](#)):

Yeah, I'd be happy to. So this is one of the policies that came out actually early on from the council. And I think it was actually early of last year when it got finalized and then put into the system. And this policy basically stemmed out of a lot of concern from our employees about discrimination that's directed to them, whether it's because of their gender, race, religion, or any other difference, I guess, between them and a patient. And we thought that was a really good jumping point or a really good starting point anyway, to work on in the council, which was really nice, we took it in a staged fashion. We reviewed what we wanted the purpose of this policy to be, how it will be put into effect. And what I really like about the policy is there's an appendix that actually gives some sentences or talking points on how you would go about maybe deescalating a situation with a patient or even approaching the staff members that were in that situation.

Because sometimes maybe if it's about race, let's just say it's about race, that people feel uncomfortable addressing that provider to say, this patient is asking for another provider because you're black or because you're brown or whatever it is. So there are talking points that are included in this policy. And I think that's actually a really, really nice point part of the policy. Not just saying here, we want you to make sure you protect our employees from this kind of discrimination and it lists all the different types, but also how do we do that and how do we go about deescalating it for the patient? How do we go about trying to talk with the patient to let them understand that within Northern Light, this is what we stand for and this is what we want to emulate for their community, whether it's a patient or it's an employee, we are going to protect that whatever perceived difference is seen, because we want everybody to feel like they can come and get taken care of and be respected.

That policy was put into effect and it was made even to be quite specific, which I also really liked because I think when you leave too much generalities and policies, people can take the [Libby 00:16:48] to say, "Well, it didn't really say I had to follow up with the patient. It didn't really say that I had to tell the patient that they were incorrect in using that slur against that provider." And it really does go into some specifics in what we expect of behaviors from patients, from employees, whoever it is in a situation. So I'm hoping that we don't have to use this policy very often obviously, but I really, really do appreciate as a black female physician that it's there so that I can also feel that when I'm put in a really awkward situation, it's not just Dr. Shobowale is saying that this patient is making her uncomfortable, but there are steps to say, "Okay, let's acknowledge this. Let's figure out what's going on and let's move forward in the best way for both people, the patient and the provider."

Tim Dentry ([17:33](#)):

Terrific. And that was a, not only fabulous description of how we went about that, but I still... And thank you for sharing that now because I rolled through in my mind what we went through to get it into place and that kind of a thing. Right. And to this day, I feel so good about that because it showed that we weren't just talk.

Dr. Olamide Sobowale ([17:57](#)):

Right. Exactly.

Tim Dentry ([17:58](#)):

We were going to take some actions and it was also to send a message out to our entire Northern Light workforce that this is what we stand for. Wasn't just for someone to use in the event that something happens like that. It was a message. So thank you. You described that perfectly. Thank you. Mia, you've done some work on the gender identity task force. Would you walk us through some of that?

Mia Dubois ([18:26](#)):

Yes, absolutely. So the best part of my job in patient experience is I have the luxury of talking to our patients, talking to our communities and hearing about their experiences that they get receiving care. What I learned through some of those conversations is that we had some work to do as far as using patients preferred name and their correct gender identity. And what I learned beyond just our need to do a better job with acknowledging it was the pain that happens when we fail. So the pain that occurs with that patient, when we fail to recognize what their preferred name is or what gender they identify with. And it's very damaging. So that's been a very big eye opener through this work. What we know is that about 28% of transgender and gender diverse people, they've postponed medical care when they needed it because of discrimination or disrespect that they have seen firsthand.

And that's a number that we don't want. That's not keeping our communities healthy and safe. So what we've been doing is we've developed a fairly large task force. That's really dove into this and looking at all the different avenues that we have to address. So first and foremost, we have some education coming. That's really working on the language, the terminology, and the importance of using it. The importance of why is it such a big deal to use those pronouns and that preferred name. We've also worked on capturing this information in our electronic medical record and making sure that it flows to other parts of the medical record as well. So that way, when the patient presents and they are being seen that we're using their correct name and not a dead name that will create trauma for them.

There's been a lot that we've done so far. We've updated our patient wristbands for the inpatient unit demographic bars worked on our patient letters. So when we're sending them appointment reminders at home, we're using the correct name on those letters and our registration forms. So it's been a robust group that's been working really hard to make sure that we get this right, and that we are listening to our patients and our communities, and we're hearing their feedback and we're doing something about it, which is really exciting.

Tim Dentry ([20:45](#)):

Thank you, Mia. It's so great to hear that kind of positive feedback. And I receive letters in my office from families and patients who are expressing their gratitude for that kind of sensitivity. That's what it is. It's caring, it's love.

Mia Dubois ([21:01](#)):

That's what it's all about.

Tim Dentry ([21:02](#)):

Yes. So thank you. I think it would also service very well to remember that DEI is not just occurring at an overarching organizational level, but there's a lot of great work happening at each member organization too. And so many examples of leaders and individuals from all over the state that are part of Northern

Light Health that are rising and making contributions to more diverse, equitable, and inclusive culture of our organization. And I will just go ahead and say it, it always seems though like Mercy is leading the way. And we've all learned from Mercy. And they're great things at Mercy for so many reasons. Melissa, perhaps you could shed some light on some of your initiatives projects at Northern Light Mercy.

Melissa Skahan ([21:50](#)):

Absolutely. In 2019, Charlie Therrien, president at Mercy, held listening sessions with our staff really focused on diversity, equity and inclusion. And from there, we learned that our employees of color, many of them knew Mainers did not view Mercy as a place of opportunity. They viewed it as a wonderful community, often entered in low wage roles, and then did not see frankly, career advancement in a lot of clear ways. Really took that as a call to action. And we have launched what I would describe as a high intensity language acquisition program on site. So we have ESL teacher who provides direct instruction four days a week at Mercy. We have app based learning that adds to that level. What we know from working very closely with the new Mainer community is access to language learning, digital literacy skills is fractured and often out of reach.

So we're seeking to really address that. So people have the ability to advance quickly. It is remarkable to see every day at three o'clock at Mercy Hospital, a group of wonderful longtime employees gather with a teacher. They have clear masks on so they can see their pronunciation. And it's amazing to watch how quickly people are progressing. We did pre-test, we'll do post-test, and many of these employees are housekeepers, we're helping them transition into registered apprenticeships so they can become medical assistance, CNAs, or truly have any career at Mercy that they want. The beauty of the new Mainer population in greater Portland is we have large numbers who have recently arrived from the Congo and Angola, and they are highly educated and really just waiting for us to solve that gap of language acquisition. And as Northern Light Mercy, we're committed to really be the first high intensity program in Southern Maine and really help people advance quickly.

So excited to watch where this goes. We have just in the last month or so, watching really lots of new hires that are from all over the world. I think there has been a different level of energy and commitment, and I would attribute it to this council and Tim's leadership to really have us continue to look for opportunities. We also are working with a large group of providers in Southern Maine to provide onsite healthcare at hotels, where people are being housed as they come into the city, lots of good work. The future is bright. As we continue to understand how to support what I would see as a incredible opportunity for workforce development and continued diversification of Northern Light Health. The potential and the beauty is amazing to watch.

Tim Dentry ([25:24](#)):

Thank you, Melissa. Before we start to wrap up, I just want to make sure I always offer to our guests. If there's anything else you would like to touch based on or express. So I'll pause for a second to see if anyone would like to add anything.

Mia Dubois ([25:45](#)):

Sure. I'd love to add some of the work that we're doing with asking patients their opinions on how we're doing with recognizing their diversity and recognizing their religious beliefs with our patient experience surveys. So that's something we started doing this year, which is a great way for us to do a real touch base on how is their experience of care and how are we doing? So just another example of how we're asking those hard questions and we're listening and we're ready. You take action on it.

Tim Dentry ([26:14](#)):

Thank you, Mia. That's great. And for a little background to our listeners, there are actually questions that are very specific to our sensitivity in providing care to the individuals in their individuality. And we were one of last time I checked, when we started this, this past year, we were only one of five hospitals, five health systems in the United States that were using that kind of correlation. So we do take a very close look at that. Thanks for pointing that out. Thank you all so much. This has been very informative, but more than that enjoyable. And I'm very grateful for all of you and what you've expressed. Before we conclude, I would like to share two further thoughts, just brief thoughts. I was asked recently, this is actually a town meeting we had, we had about 600 colleagues on that call just yesterday.

And I was asked how we can advance Diversity Equity Inclusion, which the questioner, I think, thought it was great that we're doing it, but how do we do it without getting mixed up in that terrible word politics? You know what, I answered it and I reflected upon it after that, obviously, because that's what I do. I think of my best answers, at two o'clock in the morning, the next day. But I actually came up with the same answer generally speaking. And that is that it's not politics to me, it's values. And it's respect and it is embracing our imperfections and it is also really good, I'm going to use a word that our listeners might not like that I don't use all the time, but it's really good business. And that is if we can show that we are this welcoming and this sensitive, then job satisfaction is going to be better and we're going to be more able to recruit people from away and people won't think twice about coming to us for care. In fact, they'll seek us out for care for all the right reasons.

It's not about politics. It's about respecting love. That's number one. I feel better getting it off my chest. Secondly and beautifully, we have opened our thinking to explore now gender equity and inclusion. Listeners I'll start to close on this comment. Less one thinks that this is an exclusive focus on some for Diversity Equity and Inclusion is actually an inclusive focus for all. So thank you for joining me for this important discussion. Guests, thank you. And thank you to you, our podcast listeners as well until next time. I'm Tim Dentry, encouraging you to listen and act and promote our culture of caring, diversity and inclusion. Thank you.

Speaker 1 ([29:26](#)):

Thank you for listening to this episode of Tim Talk. If you enjoyed this podcast and would like to learn more about this subject, you can find additional information at northernlighthouse.org/podcast.