



Diversity, Equity, and Inclusion Plan

Michigan Department of Health and Human Services

Developed by: MDHHS Diversity Committee

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Michigan Department of Health & Human Services

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Diversity, Equity, and Inclusion Plan

Mission

To promote and foster a culture that values diversity, equity, and inclusion throughout the Michigan Department of Health and Human Services and the diverse communities we serve in order to achieve our highest potential.

Vision

Diversity, as reflected in our leadership and throughout our workforce, offers a valuable range of experiences and perspectives. Our diverse workforce will be an essential asset for developing and providing health and human services that are culturally proficient to address existing and emerging health and social issues.

Definitions

Diversity:

The range of human differences, abilities, experiences, and perspectives.

Inclusion:

A culture that fosters diversity, equity, support, and respect within every facet of organizational services and activities.

Equity:

Fair and just treatment, access and opportunities for all people while building better outcomes for historically and currently disadvantaged populations.

Systemic Inequities:

Unequal outcomes built into a system that will produce inequality even in the absence of individual biases. Some examples include, but are not limited to, racism, sexism, heterosexism, ableism, and ageism.

Introduction

In 2015, the departments of Community Health and Human Services merged forming the unified Michigan Department of Health and Human Services (MDHHS). Prior to the merger, both departments had developed and were implementing their own diversity plans. In order to create a unified plan, a committee was formed in 2016 with representation from all administrations within the department. This dedicated team worked diligently to develop a unified proposal that clearly demonstrates the department's continued commitment to eliminate systemic inequities and promote diversity, equity, and inclusion. The result of committee's work is this Diversity, Equity, and Inclusion plan. Our committee recognized that a lack of workforce diversity and inclusion is often the result of past and current practices - systemic inequities - which must be addressed.



Diversity, Equity, and Inclusion Plan

This document represents key actions the committee is recommending the department take toward achieving diversity, equity, and inclusion in the areas of Leadership, Culture and Climate, Recruiting and Hiring, Training and Professional Development, and Service Delivery. Each of these action items will be subject to thorough financial and policy reviews.

Committee Members

Lance Bettison – Human Resources, Dr. Sharon Bland-Brady – Disability Determination Services, Ashiya Brown – Medical Services Administration, Mike Derosé – Human Resources, Nickco Dixon – Michigan Rehabilitation Services, Dale Freeman – Field Operations Administration, Stacie Gibson – Office of Workforce Development and Training, Vicki Grant – Human Resources, Michele Harper – Office of Workforce Development and Training, Mary Beth Kern-Collins – Legal Affairs, Geralyn Lasher – External Affairs and Communications, Tracie Lewis-Jennings – Michigan Rehabilitation Services, Tari Muniz – Aging and Adult Services Agency, Colin Murad – Workforce Engagement and Transformation, Shelly Murrell – Workforce Engagement and Transformation, Jemar Sutton – Children’s Services Agency, Rashmi Travis – Population Health Administration, Jessica Van Winkle – Financial Operations Administration, Sheryl Weir – Policy, Planning, and Legislative Services, Brant Wimbush – Office of Workforce Development and Training/MAGE, Lynda Zeller – Behavioral Health and Developmental Disabilities Administration

For an updated list of Council Members visit the [DEI Intranet Page](#)

Statement of Purpose

This proposed plan was developed to embody the values of diversity, equity, and inclusion as well as align with the Strategic Priorities of the Michigan Department of Health and Human Services. This work is necessary to improve outcomes for employees, communities, stakeholders, and customers by addressing inequities at a systemic level. Upon implementation, it will improve the understanding and mutual respect of those our employees work for, with, or around; improve customer relations; make MDHHS a more competitive inclusive employer in the job market; boost employee morale, professional development, and retention; encourage multiple perspectives to ensure creative problem solving; allow greater transparency; and ensure that all cultures, backgrounds, and experiences are valued in our ever changing diverse workforce.

Equity Approach

Our approach to achieving diversity, equity, and inclusion is rooted in principles of racial equity. We have chosen to have an intentional but not exclusive focus on race as a way to address systemic racism and other forms of oppression and exclusion. A racial equity approach allows us to design policies, practices, and strategies that result in fair and equitable opportunities for everyone. Using this approach compels us: 1) to understand the historic and current drivers of health and social inequalities e.g. racism, sexism, heterosexism, ableism, ageism; 2) to identify how MDHHS contributes to, and can

deconstruct these inequalities; 3) to work in partnership with the communities we serve to achieve equity; 4) to use statistical data to assess and monitor the impact of diversity, equity and inclusion initiatives on the workforce; 5) to monitor the effectiveness of our efforts; and 6) to ensure sustainability. This approach will be utilized by all administrations within MDHHS.

A key element of the department's strategy is to train in and encourage the use of an equity assessment tool that will guide the decision making process for evaluating the potential impacts of existing and future policies and programs. Best practice indicates that an equity assessment process should include the following lines of inquiry:

- **Proposal** - What is the policy, program, practice or budget decision under consideration? What are the desired results and outcomes?
- **Data** - What's the data? What does the data tell us?
- **Community Engagement** - How have communities been engaged? Are there opportunities to expand engagement?
- **Analysis and Strategies** - Who will benefit from or be burdened by your proposal? What are your strategies for advancing equity or mitigating unintended consequences?
- **Implementation** - What is your plan for implementation?
- **Accountability and Communication** - How will you ensure accountability, communicate, and evaluate results? ¹

Opportunities and Challenges

There are already a number of existing efforts this proposal will support and collaborate with including, but not limited to:

- The Office of Workforce Development and Training has established a Race Equity Team that is working on multiple strategies to address systemic inequities and advance equitable outcomes
- Department Leadership's Strategic Alignment Team who have identified Equity as a priority in 2018
- The Health Equity Steering Committee whose work has been improving the department for over 15 years

The MDHHS Diversity, Equity, and Inclusion Plan provides additional opportunities as well as recognizes potential challenges. Below are some strategies intended to proactively address barriers to successful implementation:

- Ensure buy-in and support from all department leaders and supervisors.

¹ Nelson, J. & Brooks, L. (2015). Racial Equity Toolkit: An Opportunity to Operationalize Equity. Government Alliance on Race and Equity. Retrieved February 3, 2018 from: http://racialequityalliance.org/wp-content/uploads/2015/10/GARE-Racial_Equity_Toolkit.pdf.

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- Commit to the efficient use of available budgetary and human resources to accomplish plan goals while advocating for greater allocations as needed.
- Establish clear metrics and measurement tools to track the impact and effectiveness of the diversity, equity and inclusion plan.
- Promote a culture of individual responsibility as a key element of systemic change.

An essential part of the success of the proposed plan is the creation a **Diversity, Equity, and Inclusion Council**. This group of employees appointed by department leadership will be led by the newly created Diversity, Equity, and Inclusion Officer recommended in this proposal. The Council will oversee implementation of this proposal and ensure an ongoing commitment to the principles of this proposal on a permanent basis. The Council will serve as an advisory body to the MDHHS Director, Chief Deputy Director, Human Resources, and executive-level leaders in fostering an environment of diversity, equity, and inclusion throughout the agency. The Council will work to develop relationships with internal and external stakeholders and serve as advocates to promote and share information throughout and outside the agency in regards to diversity, equity, and inclusion initiatives.

Indicators for Success

Leadership Outcomes

- Leaders at all levels have completed the established Diversity, Equity, and Inclusion leadership training.
- Leadership develops and implements strategies and prioritizes resources to ensure Diversity, Equity, and Inclusion Plan objectives are met to achieve fair and equitable outcomes.
- Appoint a Diversity, Equity, and Inclusion Officer responsible for the implementation and improvement of the Diversity, Equity, and Inclusion Plan.
- Leaders will support the efforts of the Diversity, Equity, and Inclusion Council.

Culture and Climate Outcomes

- Employees are aware and respectful of the department's diversity, equity, and inclusion efforts.
- Identify organizations with experience eliminating systemic inequities to help us strengthen our diversity, equity, and inclusion initiatives.
- Communication with our customers occurs in the language of their choice and meets National Culturally and Linguistically Appropriate Services Standards.²
- Feedback from customers, community partners, stakeholders, and employees is incorporated in our decision-making and implementation procedures.

² U.S. Department of Health and Human Services, Office of Minority Health. (n.d.). National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care. Retrieved February 6, 2018 from <https://www.thinkculturalhealth.hhs.gov/assets/pdfs/EnhancedNationalCLASStandards.pdf>.

Recruiting, Hiring and Retention Outcomes

- Our workforce, including leadership, is diverse and talented.
- Hiring managers receive education and assistance to ensure that our hiring practices are consistent and transparent.
- Applicant pools are diverse and reflect the demographics of the communities we serve.
- Positions that serve communities with limited English proficiency are filled by staff fluent in their language.
- Prospective and current employees are aware of our reasonable accommodation policies, procedures, and resources.

Training and Professional Development Outcomes

- Our employees are engaged in equitable work practices, such as designing and delivering programs in a culturally and linguistically appropriate manner, and are committed to our department's diversity, equity, and inclusion goals.
- A core group of diversity, equity, and inclusion subject matter experts has been established to support training and professional development implementation throughout the department.
- Employees have received diversity, equity, and inclusion training and are prepared to establish these principles as core priorities for how the department carries out its mission.
- Employees are able to identify and reduce implicit bias and systemic inequities.

Service Delivery Outcomes

- Review current and future Policy with Diversity, Equity and Inclusion (DEI) lens and develop a department wide Culturally and Linguistically Appropriate Services policy (CLAS).
- Eliminate systemic bias in our department's policies, contracts, programs and procedures.
- Provide Service Delivery team members with diversity, equity, and inclusion training in preparation to look at the department's policies, programs and contracts with a DEI lens.
- Ensure Service Delivery areas can identify and reduce implicit bias and systemic inequities in our policies, programs and contracts.
- Collaborate with MDHHS Stakeholders in revising the Contract RFP process.
- While the State of Michigan Department of Health and Human Services does not give preferential treatment to any person or group, consistent with Executive Directives 2019-08 and 2019-09, the department will reduce or eliminate barriers to participating in the state procurement process by Geographically Disadvantaged Business Enterprise Vendors and Service Providers.
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Conclusion

The Michigan Department of Health and Human Services will continue to hold Diversity, Equity, and Inclusion as essential values to support our core Mission, Vision, and Values. Addressing issues of diversity, equity, and inclusion is the work of us all. As an organization we will implement recommendations in this proposal through the commitment by department leadership, the Diversity, Equity, and Inclusion Council, and action teams consisting of representation across the department.

Systemic inequities cannot be eliminated by the actions of a few. Our success is dependent on employees and partners of MDHHS taking strong positive action for the culture to change. This proposal provides employees throughout MDHHS the tools and education to build a more culturally inclusive workforce that is accountable to the communities that we serve.