Graduate Medical Education (GME) Diversity Policy for Recruitment of Residents/Fellows, Faculty and Staff

Background: West Virginia has a population of approximately 1.8 million and is a highly rural state with one of the oldest populations in the country. Geographically, it is the only state that rests entirely within the Appalachian mountain region. Historically, large numbers of its citizens have been employed in the extractive industries—mainly timbering and coal mining. This lack of economic diversity has resulted in a weak economy, poor socioeconomic status, and low educational attainment. The state’s demographics reflect a small percentage of traditionally underrepresented in medicine.

Policy: The WVU School of Medicine is the flagship institution of medical education, healthcare, and research for the state of West Virginia. As a land grant institution, our goal is to improve the health and wellness of West Virginia residents. The School endeavors to select a gender-balanced, diverse, and tolerant graduate student body, faculty, and staff. Our priority is to recruit key, value-added, underrepresented in medicine groups that include African-Americans, Hispanics, LGBTQ, and Native Americans/Pacific Islanders. The WVU School of Medicine also aims to recruit residents/fellows who are included in the socioeconomically and educationally disadvantaged rural Appalachian population.

The School’s endeavors are congruent with the strategic plan of the School, the Health Sciences Center, and the University. The School believes the recruitment and accommodation of key value-added groups greatly enriches our educational and research missions; the environment for our students, residents/fellows, faculty, and staff; and our goals in improving the healthcare of the citizens of West Virginia.

This policy is implemented to ensure there are no quotas or set-asides. Regardless of an applicant’s characteristics, they are considered in the same competitive pool using the same application of University policies and procedures. Each graduate medical education program is required to have their own program specific Diversity Policy as well as monitor their diversity against goals and national statistics for their specific program. Furthermore, GME will evaluate recruitment efforts centrally by monitoring the number of offers made to our defined value-added groups, the number of individuals who decline offers, and the number of individuals who choose to be employed by or be a resident/fellow at West Virginia University’s School of Medicine.

Academic and Learning Environments

Graduate Medical Education (GME) ensures its educational program occurs in a professional, respectful, and intellectually stimulating academic and clinical environments; GME recognizes the benefits of diversity; and promotes resident’s/fellow’s attainment of competencies required of future physicians.

Diversity/Pipeline Programs and Partnerships

GME has effective policies and practices in place and engages in ongoing, systematic, and focused recruitment and retention activities to achieve mission-appropriate diversity outcomes among its
residents/fellows, faculty, senior administrative staff, and other relevant members of its academic community. These activities include the use of programs and/or partnerships aimed at achieving diversity among qualified applicants for medical school admission and the evaluation of program and partnership outcomes.

Approved by GME Taskforce: 12/06/2018

Approved by GMEC: 12/14/2018
Curricular Content

GME faculty will ensure that the graduate medical curriculum provides content of sufficient breadth and depth to prepare graduate medical trainees for entry into the contemporary practice of medicine.

Cultural Competence and Health Care Disparities

GME faculty will ensure that the graduate medical curriculum provides opportunities for residents/fellows to learn to recognize and appropriately address gender and cultural biases in themselves, in others, and in the health care delivery process. The graduate medical curriculum includes instruction regarding the following:

- The manner in which people of diverse cultures and belief systems perceive health and illness and respond to various symptoms, diseases, and treatments.
- The basic principles of culturally competent health care.
- The recognition and development of solutions for health care disparities.
- The importance of meeting the health care needs of medically underserved populations.
- The development of core professional attributes (e.g., altruism, accountability) needed to provide effective care in a multidimensional and diverse society.

Approved by GME Taskforce:

Approved by GMEC: