



# LEVERAGE

ISSUE 9  
FALL 2023

## GETTING THE 'S' PART OF ESG RIGHT

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## The time for action has arrived

There seems to be a consensus that some progress on health equity has been made. Governments, businesses and other stakeholders have adopted the language of diversity, often with ambitious plans for

carrying out policies through action. The White House has kept equity at the forefront of healthcare policymaking. Conferences have been held, papers and books have been published on this issue. And yet, by almost any metric, there has been little change in the lives of those without equal access to healthcare, nutrition and employment, nor has there been much progress on ensuring that healthcare leaders reflect the diversity of the communities they serve.

A few recent data points:

- An examination of documents and strategies of public health departments covering the 30 most populous U.S. cities, conducted by the Sinai Urban Health Institute and the American Medical Association found “uneven progress and even resistance” to acting on equity, even though 23 of those departments had committed to the AMA policy dedicated to achieving specific and measurable equity goals. (That policy declared “racism as a public health threat.”)
- Black women are still three times as likely to die from labor complications as White women, the Centers for Disease Control and Prevention reports. “Multiple factors contribute to these disparities, such as variation in quality healthcare, underlying chronic conditions, structural racism and implicit bias,” the CDC said.

- Just 5.7% of physicians in the U.S. are Black, despite the fact that Blacks represent 12% of the populace.
- The American Hospital Association’s latest Health Care Governance Survey of more than 900 hospital and health systems found that the percentage of boards with at least one non-Caucasian member rose from 58% in 2018 to 68% in 2022. At that rate of increase, it would take decades to achieve diversity goals.

Senior executives and governing boards, still mostly white and male, seem to want to understand how to improve and enhance care and access for communities of color, but there is often no one in the room to inform those decisions who understands those communities.

We at TLN aren’t waiting decades. We have ramped up our efforts to accelerate the achievement of diversity in the C-suite and Boardrooms. We’ve revamped our Healthcare Executive Leadership Program. Now called Beyond Boundaries: Accelerating your C-Suite Journey, it features a rigorous 6-month curriculum, enriched learning objectives and a Capstone Experience designed exclusively for each cohort.

We are hosting an annual event designed to disrupt the status quo on diversity, equity and inclusion. The Black Healthcare & Innovation Summit: Igniting Disruption will bring together policy leaders, innovators and healthcare professionals to focus on using technology and advocacy to make real change happen more quickly and effectively. Come join us in Phoenix Dec. 6-7 and become a part of changing how healthcare is governed, led and disrupted!

*Antoinette (Toni) Hardy-Waller*

Antoinette Hardy-Waller  
Founder and CEO

# Disrupting the status quo

The Black Healthcare and Innovation Summit – Dec. 6-7 in Phoenix

The Black Healthcare and Innovation Summit: Igniting Disruption is a groundbreaking event poised to make a significant impact on the healthcare ecosystem. Taking place Dec. 6-7 in Phoenix, it's a highly anticipated gathering of visionaries, innovators and health care professionals seeking to address longstanding disparities faced by black communities in healthcare. With the focus on technology and advocacy, the Summit brings together a diverse array of stakeholders, from policymakers and healthcare providers to entrepreneurs and community advocates, all driven by the common goal of making tangible progress in the pursuit of healthcare equity.

Attendees can expect thought-provoking panel discussions; keynote speeches from prominent figures such as Wright Lassiter III, CEO of CommonSpirit Health and Michele Richardson, Vice Chair of Advocate Health; and interactive workshops that delve into the intersection of healthcare and racial equity. By fostering collaboration and sparking conversations, this event will push the boundaries of what is possible in delivering equitable and inclusive healthcare.

[Click here to register.](#)



## Advancing the 'S' in ESG

*Black board members' unique role in efforts to make health equity a reality*

By Yele Aluko, MD, EY

While corporations of all types are increasingly under pressure from regulators and investors to demonstrate their commitment to a sustainable environment, there is some confusion in the health industry about what ESG really means. ESG stands for Environmental, Social and Governance. Because the entire phrase is about sustainability, people often mistakenly think the “S” refers to sustainability. While sustainability means different things to different people and organizations, it most often refers to the preparedness of organizations for withstanding threats to workforce resiliency and business continuity over the next 10 years and beyond. Global and local factors are converging on the urgency for sustainability, and an evolving corporate culture is prioritizing it.

The purpose of ESG is to raise standards and accountability to justify corporations’ “social license” to operate. ESG is a framework of regulatory oversight to credential and promote companies that have shown proven value to society. In a more granular business context, sustainability is about whether the company has an ESG strategy designed to innovate business models that deliver products and services that contribute to sustainable development.

Truthfully, many organizations initially posted their ESG commitments without any plan for immediate change, waiting to see what their peers were doing, or not doing, in this area. Assessing that progress is a harder task in the not-for-profit world, where organizations are less at-risk from regulators and investors.

What’s changing now is that ESG is increasingly not just a marketing tool – it’s becoming a part of companies’ fiduciary duty. The “S” in ESG stands for “social,” and is a reflection on the maturity of a company’s relationships with its employees, the residents of the communities it serves, and the governments and other stakeholders of the ecosystem within which it operates. Social speaks to processes, strategies and accountability for human health within the workforce and in society. “S” activities target objectives that include diversity, equity, and inclusion; access to quality healthcare; employee health and safety; health equity and more.

In healthcare “S” activities are impacted on both sides by the “E” and the “G,” specifically in the framework of human health and health equity and the disproportionate impact of climate change and other natural disasters on vulnerable populations.

Health industry organizations are well-positioned to impact multiple aspects of the “S” in ESG and create value for internal and external stakeholders. Health systems that take ESG seriously start by aligning the board with the purpose of the projects; creating a governance structure that is accountable for measuring and reporting; having a willingness to publish annual reports displaying their ESG activities; and setting priorities such as equal access to care for all, mitigating climate change and improving population health.

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Health equity programs are only beginning to scratch the surface of real change. While alignment efforts are underway, current ESG reporting efforts are marked by inconsistencies. There are more than a dozen ESG reporting approaches in use today, each with different definitions, indicators and methodologies.

There are a few leading health industry organizations that are developing a long view of the road to success and looking at health equity as a more of a business opportunity than a social obligation. Black health industry board members are uniquely qualified to drive sustainable accountability for “S” impact, but their lens must be seen to be broader and holistically value-driven, tasked with responsible stewardship of organizational strategy, priorities and resources. If you have a board chair or CEO who seeks to bring in a minority member as window dressing, it won't take long in the interview process to ferret that out, at which time it is wise to walk away.

Black board members must be well-rounded executives able to speak with authority on complex corporate topics as well as bringing in a viewpoint on DEI and health equity that is steeped in relevant lived experience. Thus, their first job is to understand the critical issues facing the industry and its key stakeholders across the value chain, relative to the organization.

By showing knowledge of both business and DEI, Black board members position themselves as valued assets who create a competitive advantage for the board, amplifying the shared expertise of the broader board membership. Some boards might have one or two diverse members, but I see this changing. More organizations are aware of the business value that diversity brings to the boardroom and are acting on it, guided by the advice of people who reflect all of the communities being served, especially disadvantaged communities that most need help.

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## Congrats to Cohort 6!

The 6th cohort of TLN's Healthcare Board Initiative (HcBI) completed its 6-month program with a flourish at an educational and celebratory event in downtown Chicago Sept. 28. This final session was a comprehensive and inspiring experience for tenured C-level executives, equipping them with crucial knowledge and skills needed to excel in the boardrooms of healthcare organizations.

The education came from discussions led by leading experts on critical topics in healthcare governance. The program culminated with mock board interviews, allowing participants to put their newfound skills and knowledge into practice.

“The speakers brought relevant and applicable experience and insight that is useful in the board readiness process,” said participant Jon-Michael Williams. Added fellow participant Adé Lawal: “The HcBI program condenses topics and knowledge that could take many years to learn or may never even be learned as a prospective or active board member.”





# LEADERSHIP IS A TEAM GAME

## Strong relationships, trust and group dynamics are keys to long-term success

By Christina Coplen, Spencer Stuart

Leadership isn't just about one person's capabilities and actions. It is a multi-layered system with an individual at the top. Better outcomes for stakeholders are the result of great team dynamics. The CEO is responsible for meeting boards' expectations and setting team goals, but the tactical work of improvement comes from a well-chosen C-suite.

Team building must be baked into evaluating candidates for an organization's top job. Do they have the capacity and character to leverage current talent and new hires who bring the right mix of capabilities and values to make a strong leadership team? Of course, you look to prior results, education and references. The capabilities a leader has developed are fairly self-evident – what we call above-surface qualities.

Then if we think about the intangibles – what's below the surface – we see some bigger differentiators, like capacity and character. Capacity – what someone has the potential to do versus what they have already done – and character – how they are likely to respond when stretched beyond what they have done in the past – reflect how well a leader will respond to changing conditions and lead their team. Increasingly, effective leadership is not just about where you've been and what have you done, but more importantly, what is the nature of your character? What are your values? Do you make the tough decisions? What is your ability to engage your team and give them the credit they deserve?

As they think about their teams, leaders should consider whether the right people are on the team, whether team members are aligned on a clear vision and mandate, and whether everyone understands their individual and collective responsibilities. Leaders also need to consider the group dynamics within their team. Do they trust one another? Are there similar values? Can they have the tough conversations that get the right outcomes for the organization? High-performing teams that really deliver are able to say “yes” individually and collectively to those questions.

To ground this in the real world, let's think about the pandemic. COVID-19 forced organizations to think differently about how they get things done. The organizations that excelled had great team dynamics from

the C-suite to the most remote clinic. They fostered an environment where people trusted their coworkers and jumped into action, even with imperfect information. Companies I have worked with had every available staff, even HR, chasing down PPE and other needs. Employees and leaders had the innate belief that they were working as a team for a greater good.

The last piece of the leadership puzzle is the organizational component. At the highest level, there is the company strategy and organizational structure. The underlying elements are purpose and culture. Purpose provides a “north star” for the organization, while the right culture can capture the imagination and energy of people and ignite their potential. With a strong sense of team, people are comfortable going to another department and sharing ideas. That's because when you make a request, you know what you are asking for gets done.

Think about this as our journey as leaders. How are we driving culture within our organizations? Teams are not piles of resumes or names on an org chart. What matters is how ingrained is the culture of teamwork, and whether leaders are ensuring that, below the surface, the components of performance are meshing.

The pandemic fundamentally changed how we think about work and our place in any organization, and this has implications for leaders. For women, especially single mothers or fathers, remote work or hybrid office/home arrangements have allowed them to come back to the workforce without sacrificing time with young children. And yet, remote work is also changing organizational dynamics and how performance and promotions are considered. The challenge for organizations will be to find ways to onboard new employees and foster a high-performing culture in this new work environment.

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