

Recruiting and Retaining Women Leaders at Lehigh Valley Health Network (LVHN)

Melanie R. Francis MS

USF MCOM- LVHN Campus, melanie.francis@lvhn.org

Follow this and additional works at: <http://scholarlyworks.lvhn.org/select-program>



Part of the [Medical Education Commons](#)

Published In/Presented At

Francis, MR. (2016, March 9). *Recruiting and Retaining Women Leaders at Lehigh Valley Health Network (LVHN)*. Poster presented at: The SELECT Capstone Project in the Kasych Conference Room, Lehigh Valley Health Network, Allentown, PA.

This Poster is brought to you for free and open access by LVHN Scholarly Works. It has been accepted for inclusion in LVHN Scholarly Works by an authorized administrator. For more information, please contact LibraryServices@lvhn.org.

Recruiting and Retaining Women Leaders at Lehigh Valley Health Network (LVHN)

Melanie Rae Francis

Lehigh Valley Health Network, Allentown, PA

Introduction

Over time, the number of women in the workplace has grown substantially. In 1970, women made up just over a third of the workplace, and in 2012 women made up just under half of the workplace. Specifically in education and healthcare, this percentage was 77.4% (Majority Staff of the Joint Economic Committee, 2010). Despite this advancement, women have not made significant movement towards executive leadership in healthcare. The American College of Healthcare Executives (ACHE) report in 2012 on career attainments of men and women healthcare executives stated that “even though both gender groups could ascend the organizational hierarchy, about 11 percent of women healthcare executives compared with 22 percent of men, had achieved CEO positions” (American College of Healthcare Executives, 2012).

Problem Statement

The purpose of this study was to identify the intentional initiatives to increase the recruitment and retention of women leaders at a large healthcare system based on interviews with key stakeholders and to report the change in percentage of women leaders over time.

Methods

This project is a case study within an institution to catalog the intentional initiatives at a large healthcare system and to assess the change in women leaders over time. The study was reviewed by the Lehigh Valley Health Network Institutional Review Board (IRB) and was deemed exempt from oversight by the IRB. Intentional healthcare system initiatives were identified through semi-structured interviews with key stakeholders of the healthcare system. The following three questions were used to guide the interviews: “What initiatives are you aware of at the Lehigh Valley Health Network to help promote the recruitment and retention of women leaders,” “What limitations are there to the advancement of women leaders in the network,” and “What do you think the Lehigh Valley Health Network can do in the future to advance the recruitment and retention of women leaders?” For the purpose of the interview questions, initiatives were defined as intentional actions of the healthcare system or of members of the healthcare system. Leaders were defined as supervisory roles and included the job titles of administrator, physician practice leader, director, chair, vice president, and senior vice president. Gender diversity in leadership was analyzed through two approaches. The first approach evaluated the Employer Information Report sent annually to the Equal Employment Opportunity Commission. The percentages of women leaders in each position (as defined above) and in total were analyzed for the fiscal years 2013-2015.

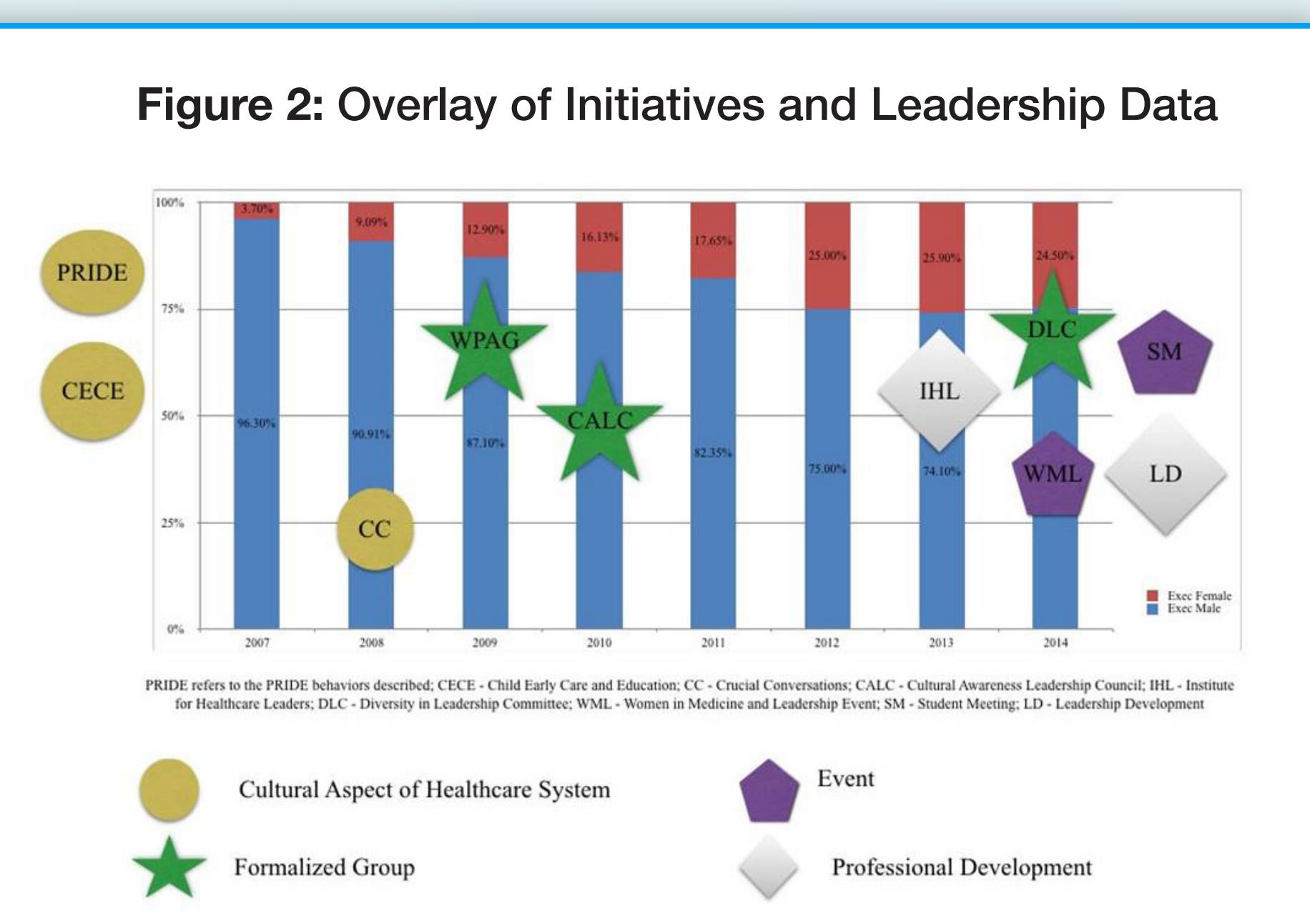
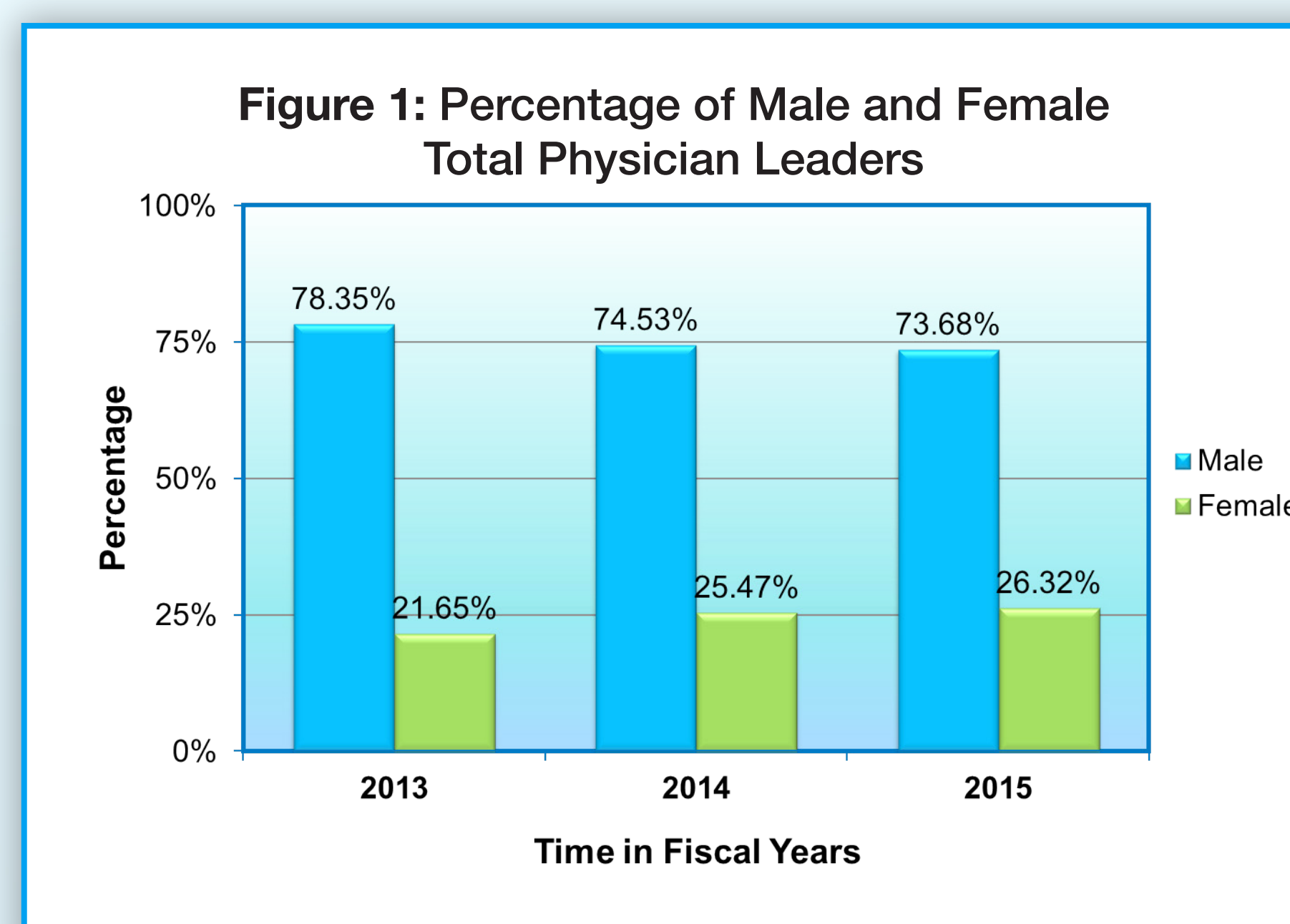
Results

The seven in-person interviews conducted with key stakeholders throughout the large healthcare system were designed to elicit the intentional initiatives carried out by the large healthcare system over the past eight years. Table 1 describes the characteristics of the key stakeholders who were interviewed. Table 2 shows the twelve initiatives that were named by the key stakeholders and the number of key stakeholders who discussed each initiative. Table 2 also shows the category each initiative falls into, as themed by the authors. The four categories of initiatives are formalized groups, professional development, events, and cultural aspects of the healthcare system.

The first set of quantitative data stems from the EEO report from 2007-2014. Human resources data for fiscal years 2013-2015 was analyzed for yearly percentage of females leaders, and there was an increase in female leaders overall. When evaluating physician leadership, the total physician leaders (practice leaders, department chairs, division chiefs) increased from 21.64% to 26.32%, as demonstrated by Figure 1. Figure 2 demonstrates the change in percentage of men and women at the executive and senior management leadership level from 2007-2014. During this time, the percentage of women leaders increased from 3.70% to 24.50%. The initiatives catalogued are overlaid across the bar chart based on when the initiative started.

	Number	Percent
Gender		
Male	2	28.57%
Female	5	71.43%
Advanced Degrees		
MHA or MPH	1	14.29%
MBA or MMM	2	28.57%
MD	3	42.86%
MSN	1	14.29%
Other Master's Degree	2	28.57%

Initiative Name	Number of Key Players Who Discussed Initiative	Category or Theme
Women Physician Affinity Group	6	Formalized group
Institute for Healthcare Leaders Program	5	Professional development
Diversity in Leadership Committee	4	Formalized group
Women in Medicine Department Meeting	4	Event
Informal but mentorship/sponsorship	4	Professional development
PRIDE Behaviors	3	Cultural aspects of the healthcare system
Cultural Awareness Leadership Council	2	Formalized group
USF SELECT Student Meeting	2	Event
LVHN Daycare	1	Cultural aspects of the healthcare system
Financial support of women to conferences	1	Professional development
Crucial Conversation skills	1	Cultural aspects of the healthcare system
Leadership training	1	Professional development



Conclusions

This study provides an in depth look at one healthcare system’s journey to tackle gender disparity in the healthcare field, particularly as it pertains to leadership. The data shows the percentage of women leaders in the healthcare system has increased overall in the past eight years, though the growth has not been as dramatic as anticipated. These findings demonstrate the continued difficulties of creating a healthcare system with diverse leaders despite intentional effort. This work describes twelve initiatives to help facilitate the growth in women leaders and can be adapted to other healthcare systems. This project addresses the SELECT competencies of health systems and leadership by evaluating how one health system (LVHN) is addressing the gap in leadership between men and women. Gender equity is one type of leadership disparity that is currently being addressed at a national level, and this project described the way it is being addressed at this Network.

© 2016 Lehigh Valley Health Network