



RESOLUTION: 18(20)

SUBMITTED BY: Diversity, Inclusion, & Health Equity Section  
Emergency Medicine Residents' Association  
District of Columbia Chapter  
Puerto Rico Chapter

SUBJECT: ACEP Membership and Leadership

**PURPOSE:** 1) Set benchmarks for improving racial/ethnic and gender diversity of its members, committee members, councillors, Council Officers, and Board of Directors; and 2) encourage community and academic emergency medicine groups to collect and publish demographic data about its members and set benchmarks for improving racial/ethnicity and gender diversity amongst its members.

**FISCAL IMPACT:** Budgeted resources for developing reports and encouraging other emergency medicine groups to collect and publish demographic data. Potential unbudgeted costs for obtaining demographic data from other sources for use in comparing ACEP's data to assist with setting benchmarks.

- 1 WHEREAS, Diverse organizations have been shown to be more productive and satisfying to its members<sup>i</sup>;
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- 4 WHEREAS, A diverse ACEP membership and leadership will provide the collective perspective and diverse
- 5 set of experiences to adequately address the disparities in health care and health outcomes; and
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- 7 WHEREAS, ACEP is committed to increasing diversity and inclusion, including multigenerational diversity
- 8 within the organization<sup>ii</sup>; and
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- 10 WHEREAS, ACEP collection of member demographic data was found to be inadequate and incomplete by
- 11 the ACEP Diversity and Inclusion Task Force in 2017; and
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- 13 WHEREAS, ACEP does not routinely publish granular member demographic data; and
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- 15 WHEREAS, ACEP does not set benchmarks for improving the diversity of its membership and leadership;
- 16 and
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- 18 WHEREAS, ACEP does not encourage community or academic emergency medicine groups to collect or
- 19 publish demographic data about its members, or set benchmarks for improving their diversity; and
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- 21 WHEREAS, The Leadership Diversity Task Force (LDTF) was assigned by the ACEP Board to fulfill the
- 22 following objectives: 1. Review the national ACEP Board of Directors nominating process(es), both formal and
- 23 informal, and recommend best practices. 2. Survey current pipeline programs within Council component bodies (i.e.
- 24 chapters, sections, outside organizations) to identify successful initiatives and make recommendations to replicate best
- 25 practices to improve diversity within ACEP leadership. 3. Identify barriers to becoming a councillor, Council leader,
- 26 and member of the national Board of Directors and suggest ways to eliminate these barriers. Include considerations
- 27 such as age, gender, race, religion, LGBTQ, and practice type; and
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- 29 WHEREAS, In June 2018, the Board of Directors approved the LDTF's recommendations: 1. Collection of
- 30 demographic data, including the proportion of underrepresented populations within ACEP's overall membership and
- 31 leadership (including the Board of Directors, Council, sections, and committees) and including, but not limited to,
- 32 domains such as gender, race, ethnicity, sexual orientation, and age. 2. Reviewing diversity data every three years and

33 presenting the findings to the ACEP Council to determine whether efforts have been effective in promoting increased  
34 diversity within ACEP leadership and to inform future initiatives to increase diversity; and

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36 WHEREAS, Two years after the adoption of these recommendations, ACEP has yet to effectively  
37 operationalize these measures as requested by the ACEP Council; and

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39 WHEREAS, ACEP sets the philosophical and ethical standard for our specialty and must hold itself  
40 accountable for evaluating and addressing its lack of diversity; and

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42 WHEREAS, Only with structure and transparency will these ongoing barriers to inclusion be torn down;  
43 therefore be it

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45 RESOLVED, That ACEP set benchmarks for improving racial/ethnic and gender diversity of its members,  
46 committee members, councillors, Council Officers, and Board of Directors; and be it further

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48 RESOLVED, That ACEP encourage community and academic emergency medicine groups to collect and  
49 publish demographic data about its members and set benchmarks for improving racial/ethnicity and gender diversity  
50 among its members.

<sup>i</sup> Paul Gompers and Silpa Kovvali, “The Other Diversity Dividend”, Harvard Business Review, July-August 2018, pp 72-77

<sup>ii</sup> Rebecca Parker et al, “Why Diversity and Inclusion Are Critical to the American College of Emergency Physicians’ Future Success,” Annals of Emergency Medicine, Jan. 27, 2017, Vol 69, Issue 6, P 714-717

## Background

This resolution requests ACEP to: 1) set benchmarks for improving racial/ethnic and gender diversity of its members, committee members, councillors, Council Officers, and Board of Directors; and 2) encourage community and academic emergency medicine groups to collect and publish demographic data about its members and set benchmarks for improving racial/ethnicity and gender diversity among its members.

A comprehensive report of ACEP’s membership is available in the Council meeting materials as directed by Amended Resolution 12(19) ACEP Composition Annual Report. The report includes demographics of councillors and alternate councillors by chapter, ACEP’s committee and section leaders, Board of Directors, and general membership stratified by age, gender, race/ethnicity, education, board certification, career stage, and employment environment. The data is limited to the extent that members provide this information in their membership profile. Many members choose not to answer certain profile questions, which can account for a higher number of “not specified” or “unknown.” This report will serve as the foundation for comparison of the data in future years.

An infographic of the [demographics of ACEP’s Board of Directors](#) is posted on the ACEP Website.

As mentioned in the Whereas statement, ACEP has not established benchmarks for improving diversity of members and leaders in the College. Such benchmarks would need to be set by the Board of Directors.

ACEP is committed to increasing the diversity of members in all leadership positions in the Council, the national Board of Directors, committees, sections, and chapters. It is important for residents, young physicians, and others who represent a minority of members of the College, to become active in their chapters and sections, seek appointment or election as a councillor or alternate councillor within their chapter (approximately half of the ACEP chapters elect councillors and alternate councillors and half appoint them) or section, and to apply for and be selected to serve on national ACEP committees. It should be noted that committee members are selected from the applications submitted by members who are interested in serving. Committee members are appointed based on their qualifications and subject matter expertise.

The Nominating Committee's role is limited to vetting candidates submitted by component bodies or self-nominations for leadership positions elected by the Council, which include the Board of Directors, President-Elect, Speaker, and Vice Speaker. No candidates have ever been excluded from nomination because of gender, ethnicity, political or religious beliefs, or sexual orientation.

Amended Resolution 14(18) Diversity of ACEP Councillors directed ACEP to strongly encourage chapters to appoint and mentor councillors and alternate councillors that represent the diversity of their membership, including, but not limited to residents, fellows, and young physician members. A notice was sent to chapters on March 27, 2019, reminding them of the adopted resolution. A follow up message was sent to chapters on February 17, 2020.

Resolution 12(18) Nominating Committee Revision to Promote Diversity amended the Council Standing Rules to provide further guidance to the Nominating Committee regarding candidate qualifications to increase leadership diversity.

Amended Resolution 7(16) Diversity in Emergency Medicine Leadership directed the ACEP Board of Directors to work in a coordinated effort with the component bodies of the Council to develop strategies to increase diversity within the Council and its leadership and report back to the Council on effective means of implementation. The resolution was addressed through the work of the Diversity & Inclusion Task Force, the Leadership Development Advisory Group (now formalized as the Leadership Development Advisory Committee), the Leadership Diversity Task Force (LDTF), and the National/Chapter Relations Committee. The Board of Directors accepted the final report from the Diversity & Inclusion Task Force in September 2018 and the final report of the Leadership Diversity Task Force in January 2019. The Diversity, Inclusion, & Health Equity Section continues to work on the strategies developed by the Diversity & Inclusion Task Force.

### **ACEP Strategic Plan Reference**

Goal 2 – Enhance Membership Value and Member Engagement

Objective G – Promote/facilitate diversity and inclusion and cultural sensitivity within emergency medicine.

### **Fiscal Impact**

Budgeted resources for developing reports and encouraging other emergency medicine groups to collect and publish demographic data. Potential unbudgeted costs for obtaining demographic data from other sources for use in comparing ACEP's data to assist with setting benchmarks.

### **Prior Council Action**

Amended Resolution 12(19) ACEP Composition Annual Report adopted. Directed that ACEP provide the Council with an annual report on the demographics of councillors and alternate councillors on a chapter-by-chapter basis, as well as the demographics of ACEP's committee and section leaders, Board of Directors, and general membership stratified by age, gender, race/ethnicity, education, board certification, career stage, and employment environment.

Amended Resolution 14(18) Diversity of ACEP Councillors adopted. Directed ACEP to strongly encourage chapters to appoint and mentor councillors and alternate councillors that represent the diversity of their membership, including, but not limited to residents, fellows, and young physician members.

Resolution 12(18) Nominating Committee Revision to Promote Diversity adopted. This Council Standing Rules amendment added further guidance regarding candidate qualifications to increase leadership diversity.

Resolution 11(17) Diversity of ACEP Councillors – Bylaws Amendment not adopted. The resolution sought to amend the Bylaws to encourage chapters to appoint and mentor councillors and alternate councillors that represent the diversity of membership, including candidate physician and young physician members.

Amended Resolution 7(16) Diversity in Emergency Medicine Leadership adopted. Directed the Board of Directors to work with component bodies of the Council to develop strategies to increase diversity within the Council and its leadership.

**Prior Board Action**

Amended Resolution 12(19) ACEP Composition Annual Report adopted.  
January 2019, accepted the final report of the Leadership Diversity Task Force.

Amended Resolution 14(18) Diversity of ACEP Councillors adopted.

September 2018, accepted the final report of the Diversity & Inclusion Task Force.

May 2018, approved the Leadership Diversity Task Force recommendations to collect demographic data, including the proportion of underrepresented populations within ACEP's overall membership and leadership and review the diversity data every three years and presenting the findings to the ACEP Council.

April 2017, approved the Diversity & Inclusion Task Force's recommendation to distribute a survey to the membership on diversity and inclusion to be administered by the American Association of Medical Colleges to the membership.

Amended Resolution 7(16) Diversity in Emergency Medicine Leadership adopted.

**Background Information Prepared by:** Sonja Montgomery, CAE  
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