The palliative care team will be surveyed at various points over the next year to assess the impact of initial and ongoing trainings. Education on topics of DEI and antiracism including microaggressions and bystander training will be integrated into faculty development. DEI and antiracism should also be a focus of palliative medicine fellowship training for the upcoming generation of specialists. Interdisciplinary palliative care team members at a large academic institution were surveyed. All team members were sent an anonymous survey link via RedCap and given two weeks to complete the survey. Following survey completion, team members had clinical time blocked and were invited to participate in an interactive, 2-hour virtual training on health equity presented by the Center for Health Progress.

**KEY POINT**

Education on diversity, equity, inclusion, and anti-racism is important for palliative care teams.

**BACKGROUND**

- The United States is experiencing a season of civil unrest that can transform into a movement that will reshape our societal institutions.
- Cultural sensitivity training and implicit bias training should be augmented by learning that provides a deeper understanding of how people are impacted by race.
- Providers must be educated on race and racism, to deconstruct health care inequities for patients, and to help educate trainees on race and racism as a way to impart change.
- This education must be "intentional" and “go beyond…online modules.”

**AIMS**

- Assess baseline attitudes and climate regarding diversity, health equity, inclusion (DEI), and anti-racism on an interdisciplinary team.
- Evaluate the impact of anti-racism multimodal education efforts.

**METHODS**

- Interdisciplinary palliative care team members at a large academic institution were surveyed.
- All team members were sent an anonymous survey link via RedCap and given two weeks to complete the survey.
- Following survey completion, team members had clinical time blocked and were invited to participate in an interactive, 2-hour virtual training on health equity presented by the Center for Health Progress.

**RESULTS**

- Survey response rate was 74% (28/38).
- 80% (20/25) of respondents agreed or strongly agreed that the team has a strong commitment to DEI.
- No respondents felt that there was too much emphasis on DEI.
- 72% (18/25) of respondents reported personally experiencing microaggressions.
- 76% (19/25) respondents reported witnessing microaggressions by team members or staff.

**CONCLUSIONS**

- The palliative care team climate is accepting of efforts to promote DEI and anti-racism.
- Despite strong commitment to these issues, most team members have witnessed or experienced microaggressions, suggesting a need for continuing education.
- Education on topics of DEI and antiracism are important in palliative care to improve the care for a diverse population living with serious illness.

**RESPONDENTS**

<table>
<thead>
<tr>
<th>Role</th>
<th>Physician, NP, or PA = 20 (80%)</th>
<th>Other = 5 (20%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time in Role</td>
<td>Fewer than 10 Years = 4</td>
<td>10+ Years = 13</td>
</tr>
<tr>
<td>Gender</td>
<td>Female = 20 (80%)</td>
<td>Male = 5 (20%)</td>
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</tbody>
</table>

**MICROAGGRESSIONS**

In general, over the last 12 months working with the palliative care team I personally have experienced microaggressions

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Never</th>
<th>Rarely</th>
<th>Sometimes</th>
<th>Often</th>
<th>Unsure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Count</td>
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<td>4</td>
<td>6</td>
<td>12</td>
</tr>
</tbody>
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In general, over the last 12 months working with the palliative care team I have witnessed microaggressions by team members or staff

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**REFERENCES**