



# HEALTHCARE MUST EVOLVE TO **INCLUSION AND** **INDIVIDUALITY**

---

How your response to the Cultural  
Demographic Shift™ will get  
you there.

October 2017

© Glenn Llopis Group 2017. All rights reserved.

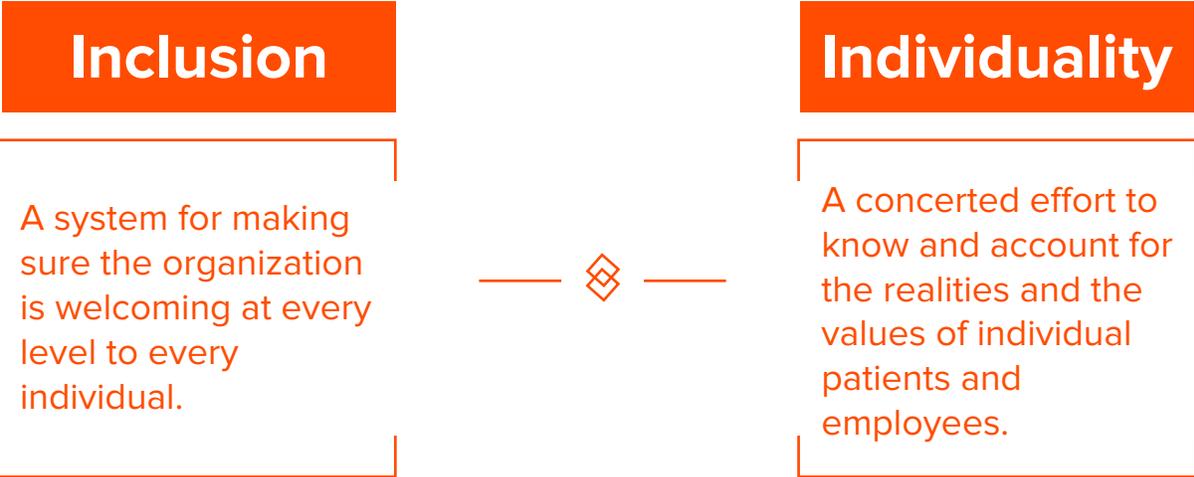
# The Cultural Demographic Shift™ is the most significant shift of the 21<sup>st</sup> century.

Your response to it is the key to meeting the biggest challenges in healthcare today.

In this report you'll learn **why and how.**

It all comes down to seeing and serving people as individuals.

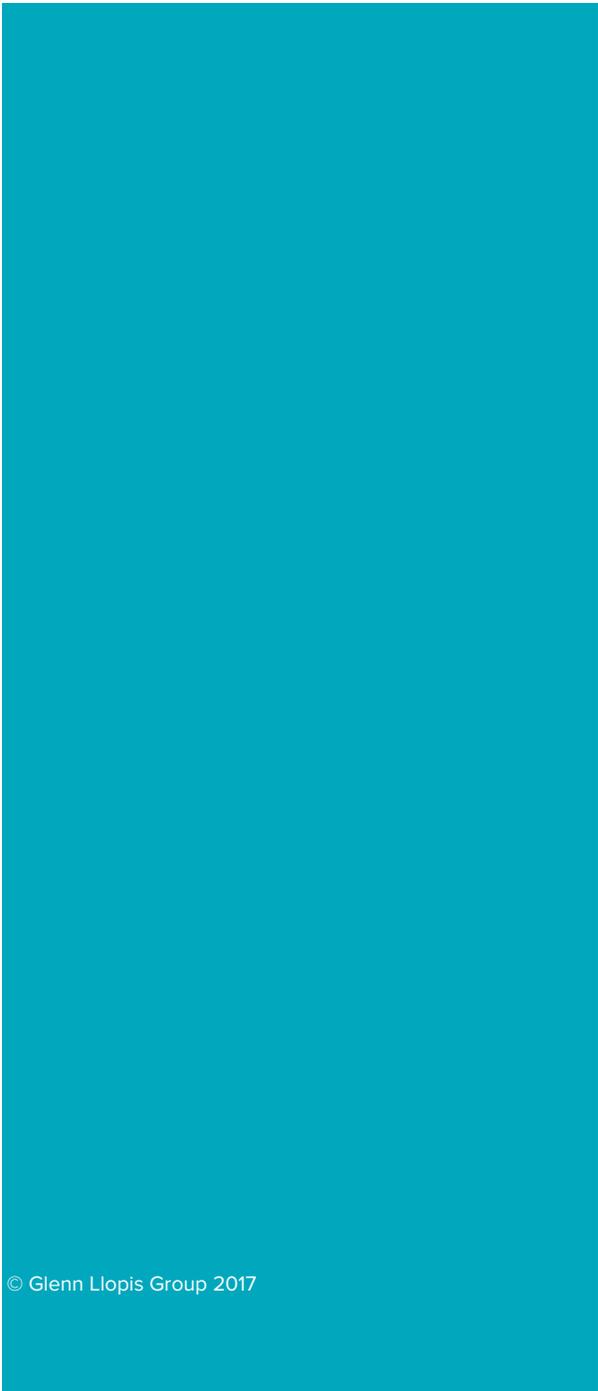
Then designing systems to make sure those individuals are included at every level.



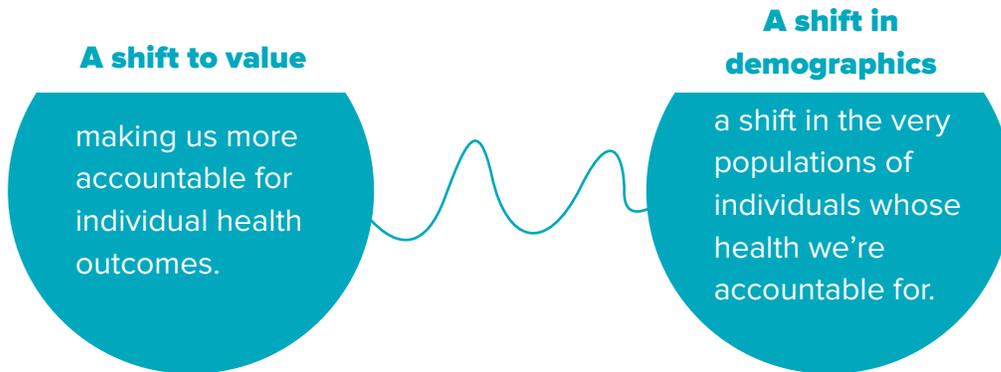
# Table of Contents

<b>1. WHAT'S GOING ON?</b>	4
1.1 Two Massive Shifts	5
1.2 Identity Crisis	6
1.3 The Opportunity	7
1.4 Defining the Cultural Demographic Shift	8
1.5 The Power of Inclusion	9
I. Buying Power	10
II. Identity Power	11
III. Millennial Power	12
1.6 The Typical Response: Diversity	13
1.7 The Better Response: Inclusion	14
<b>2. WHY INCLUSION AND INDIVIDUALITY? –</b>	
<b>Here's What You Stand to Gain</b>	15
2.1 Understanding	16
2.2 Agility	17
2.3 Energy	17
2.4 Connection	18
<b>3. HOW –</b>	
<b>Invest in the Following Four Core Areas</b>	19
3.1 Leadership	21
3.2 Workforce	22
3.4 Patient Experience	23
3.5 Preventive Care	24
<b>4. GET STARTED –</b>	
<b>Solve for the Burning Issues and Drive Growth</b>	25
4.1 Go Further	30

# WHAT'S GOING ON?



# Two Massive Shifts are Happening Simultaneously



**How can we improve the health of people if we don't even know them?**

**How can we know them if we don't see them as individuals?**

Consider the hottest burning issues facing healthcare providers, payers and physicians today:

- Improving patient experience and quality of care
- Reducing re-admissions
- Reducing costs and increasing efficiencies
- Achieving actual community benefit (not just compliance community benefit)
- Moving closer to individualized care and precision medicine
- And, as noted above: moving from a fee-for-service system to one based on value that rewards health outcomes rather than services rendered

Whether or not the industry can accomplish these ambitious goals comes down to how well we serve individuals. We have to move from thinking of groups, like cancer patients, to:

- The 24-year-old teacher who was just diagnosed with breast cancer, who is new in town and lives far from family members who could support her through treatments.
- The 50-year-old corporate executive who just received the same diagnosis, yet has multiple family members in town and also the financial resources to explore treatment and other support options.

**The challenge: our system is built around services, not individuals.**

*“Healthcare is all about this big transformation from fee-for-service to value-based payment—and it’s all going to be based on the Cultural Demographic Shift,” said John Nackel, Founder, Chairman and CEO, Three-Sixty Advisory Group. “You can’t do one without the other. Preventive services, understanding that consumer, treating the patient based on their preferences—all of those things move us [in that direction].”*

## Two Massive Shifts are Happening Simultaneously

Think about it: if you're paid by the test, you'll conduct more tests. Your business model will be centered around performing tests more efficiently, with various departments perfecting their own specialized tests. There will be billing codes, skills training, and benchmarks tracking the milestones toward a higher volume of tests. This is not a judgment of character, this is simply the result of a system performing according to its own rules.

How can we serve individuals when we don't even really know them—and we don't even know how to get to know them?

### **We're in the midst of an identity crisis – a lack of individuality for patients and employees.**

Healthcare providers have spent decades building business models focused on increasing volume. It's no wonder we have a system that treats a 24-year-old diagnosed with breast cancer the same way it would treat a 50-year-old with the same diagnosis.

The system is built in a way that makes it hard for institutions to see and treat people as individuals. No matter how much an individual doctor or nurse may care for patients as the unique people they are, those same doctors and nurses (and all care providers) still have to function within a system built around billing codes and line items and volume.

And it's not just patients who feel unknown.

Employees and leaders at all levels—in all industries, not just healthcare—have lost their identities and sense of individuality. That's because most companies promote people for doing what they are told to do, inside the box they are given. It's all about the business controlling and defining the individual.

But employees want to feel like they're having an impact as individuals, that they're making a difference, that they have influence, and that their professional growth and the company's growth are aligned. Without that, they will never perform and contribute at their highest levels.

Layered on top of everything: people don't feel appreciated for who they are, what they stand for, their values, and their unique needs and differences:

- Minority populations (defined in a later section as shift populations™) don't feel their identities are valued or understood.
- Non-shift populations feel their identities are increasingly threatened.

**Everyone is tired of not being known and feeling like they have no influence in the doctor's office, in the workplace, and in the marketplace.**

# The Opportunity

## **Learn how to let the individual define the business.**

It starts with centering your growth strategy around inclusion and individuality.

### **How?**

Invest in the Cultural Demographic Shift. This report will show you how.

### **Why?**

The process of investing in the [Cultural Demographic Shift](#) creates a way to operationalize individuality throughout your organization to drive growth—making inclusion a competency that people can practice at every level.

Along the way, not only do you connect better with shift populations, but you create a way for all individuals to gain the influence they seek.

The impact of the Cultural Demographic Shift has taught us that it's becoming less about the business defining the individual, and more about the individual defining the business.

---

## **You already experience individuality in many ways.**

Think of the personalized experience of buying and getting recommendations from Amazon, or requesting a ride-share that shows up within minutes, after showing you a picture of the driver and the car beforehand so you can feel comfortable about the service you are about to use.

This is starting to happen in healthcare, as people have more say in how and when they access care and where and from whom they get health and lifestyle information. They can choose a clinic or telehealth over a hospital, and they can find culturally relevant information via online resources such as

[Healthy Hispanic Living](#).

# Defining the CDS

## The Cultural Demographic Shift is the most significant shift of the 21<sup>st</sup> century.

The Cultural Demographic Shift (CDS) is what happens when large cultural segments of the population reach numbers sufficient enough to have a significant effect on what we do and how we act.

Historically these cultural segments have been called diverse, minorities, immigrants, multicultural, and more. So why call them “shift populations”? Because not only are their numbers shifting our overall population demographics, as individuals they are (or should be) shifting our thinking. Too often they’ve been viewed as people who lack the ability to favorably affect the U.S. economy. But in this section you’ll see that’s not true. In fact, they wield tremendous influence as they introduce the importance of why inclusion and individuality, not diversity, are becoming powerful forces in business and society for all populations.

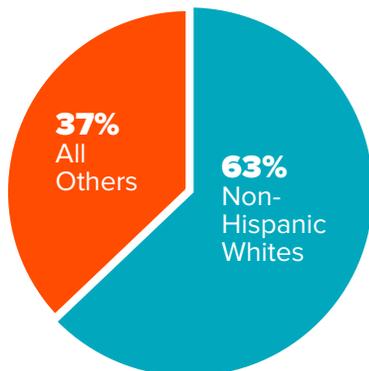
The Cultural Demographic Shift is the biggest and most significant marketplace shift of the 21<sup>st</sup> century because it is testing our ability as leaders and organizations to serve one’s unique individual needs while concurrently identifying like-mindedness within individual differences.

The CDS is forcing leaders and organizations in search of sustainable growth to shift their mindset about all people:

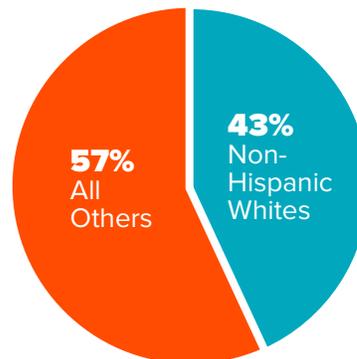
- from melting pot to mosaic;
- from cost center to profit center;
- from tactical initiatives to growth strategies;
- from compliance activities to change management and transformation.

**This shift is happening, whether you’re ready for it or not.**

U.S. Population as of 2012



U.S. Population as Projected for 2060



Source: U.S. Census Bureau

## Defining the CDS

---

According to the [U.S. Census Bureau](#), the United States is projected to become a majority-minority nation for the first time in 2043. While the non-Hispanic white population will remain the largest single group, no group will make up a majority:

- The non-Hispanic white population is projected to peak in 2024, at 199.6 million, up from 197.8 million in 2012. Unlike other race or ethnic groups, however, its population is projected to slowly decrease, falling by nearly 20.6 million from 2024 to 2060.
- Meanwhile, the Hispanic population would more than double, from 53.3 million in 2012 to 128.8 million in 2060. Consequently, by the end of the period, nearly one in three U.S. residents would be Hispanic, up from about one in six today.
- The black population is expected to increase from 41.2 million to 61.8 million over the same period. Its share of the total population would rise slightly, from 13.1 percent in 2012 to 14.7 percent in 2060.
- The Asian population is projected to more than double, from 15.9 million in 2012 to 34.4 million in 2060, with its share of nation's total population climbing from 5.1 percent to 8.2 percent in the same period.

Source: U.S. Census Bureau Press Release, December 12, 2012

### To Serve Shift Populations, We Have to Evolve

Shift populations do not always feel welcomed by the healthcare industry. They tend to associate doctors with hospitals and hospitals with a place to die, not a place to get better. This is why many first-generation Hispanics would rather have a major surgical procedure performed back in their mother countries than in the United States. Patients want to see people who look like them, can communicate with them, and understand their unique needs (which are influenced by their cultural heritage) when they go to the doctor's office.

#### Why does any of this matter?

Addressing the Cultural Demographic Shift goes hand-in-hand with improving health outcomes.

How else can an organization:

- Know why there are gaps in patient participation and compliance?
- Know how to manage costs in a way that doesn't diminish the experience for patients, employees or communities?
- Know why it struggles to build a diverse and inclusive workforce?

**In fact, you can't even begin to bring value to a population of people you don't even know.**

**Ultimately, healthcare is about the individual patient in the room and the people who care for him or her.**

## Defining the CDS

---

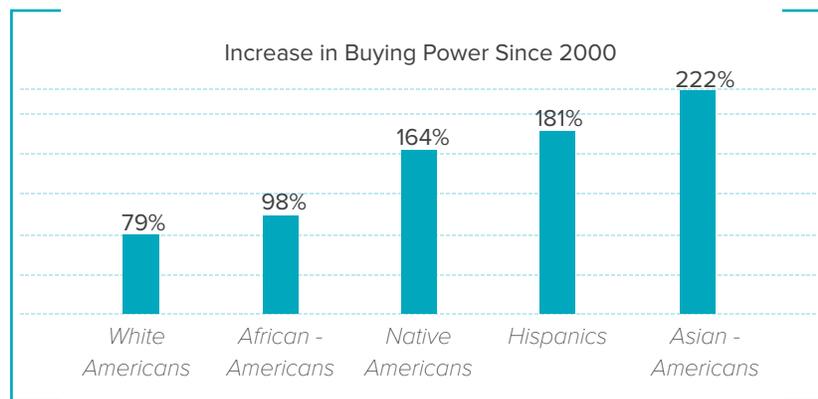
The key is to get out of the frame of mind that sees inclusion as an expense and embrace it for what it is: it's a strategy for growth.

### The Power of Inclusion

There is a perception that shift populations lack influence and weaken the economy. But the opposite is true in three important ways.

#### 1. Buying Power

Consider the shift population economy. According to a report published by the [Selig Center for Economic Growth](#), shift populations are making the fastest gains when it comes to buying power in the United States: since 2000, the buying power of Asian-Americans increased 222 percent, for Hispanics it increased 181 percent, for Native Americans it increased 164 percent, and for African-Americans buying power increased 98 percent. For comparison, during that same period the buying power of whites increased 79 percent.



Source: Selig Center for Economic Growth Press Release, March 2, 2017

#### 2. Identity Power

Because shift populations are increasing in number and buying power, their presence and influence are growing. They are not just patients but also consumers—with the ability to choose healthcare providers based on who makes them feel known and understood. With the ability to choose comes the ability to impact a healthcare system's revenue. This is helping non-shift populations to recognize their own identity crisis, and to think more critically about their own influence, overall distinction, and how they should be served.

**Members of all demographic groups want their individuality recognized.**

### 3. Millennial Power

Marketers and advertisers allocate more than one-third (34 percent) of their total media budget to reach millennials, even though millennials only account for one-quarter of all consumer spending, according to data from Advertiser Perceptions ("Mobile Advertising Study - Wave Three," January 2016), as reported in [eMarketer](#).

But consider this: according to Paul Keckley (The Keckley Report October 2, 2017, "My Take: Millennials aren't Buying What We're Selling"), millennials are "more ethnically diverse, more technologically savvy and more educated than their predecessor generations. There are 76 million of them—a fifth have immigrant parentage and the majority have friends with a different ethnic background."

The Keckley Report goes on to say that when it comes to healthcare, millennials think it should be more about health and less about treating the sick; they "dabble in alternative health and almost a fifth come from ethnic traditions that favor non-Western methods of care."

The more you invest in making sure shift populations are included at every level of the organization and every level of care, the closer you'll get to also connecting with the coveted millennial audience. In fact, the millennial audience is a shift population unto itself—much like the growing LGBTQ community, military veterans, and other groups whose unique needs and differences are fueling the focus on individuality.

---

**Language inclusion is not always about communicating with non-English-speakers.** *"One of the biggest risk factors facing us today is sedentary lifestyle, leading to weight gain and obesity," said Harlan Levine, M.D., Chief Strategy Officer and Chief Executive, Medical Foundation, City of Hope. "So we're taught to say things like: 'join a gym, go out and get exercise.' Well, if you're a single parent with two jobs living on the third floor, the word is **activity**. Telling someone to join a gym doesn't really resonate with them. If you can't communicate in a way someone needs to hear the information, you're not going to be effective."*

# The Typical Response – Diversity

Organizations recognize the need to be more diverse, so the first step they take is usually tactical—focused on initiatives managed separately in various silos of the organization, all based on achieving compliance.

## The Diversity Approach is Transactional

Patients	Employees	Communities
Document translations	Meeting representation quotas	Outreach initiatives designed to meet official Community Benefit obligations
Interpreters on hand	A focus on cultural differences	Local market education and awareness
Cultural competency	Unconscious bias training	Local government compliance

It's often a numbers game that begins in Human Resources with diverse hiring. Then it moves to Community Benefit with outreach to at-risk groups or neighborhoods. Then Marketing and Branding tout the diversity milestones.

### Cost-Center/Tactical Traditional (Siloed) Workplace



## The Typical Response – Diversity

---

Each of these initiatives is desirable and important. But when the approach is transactional, with stand-alone initiatives that are not tied to organizational growth strategies, those activities remain peripheral and at risk of being cut at the first sign of budget constraints.

But most important, unconnected initiatives simply don't achieve the full potential of what a true inclusive strategy can accomplish to drive growth.

A compliance approach is often viewed as an insult by shift populations and, as a result, that approach slows engagement and depletes trust. Wouldn't you rather harness the potential of shift populations to influence growth and make economic contributions to society?

Diversity is about compliance (which is fine and important), but inclusion and individuality can solve for both **compliance and growth**.

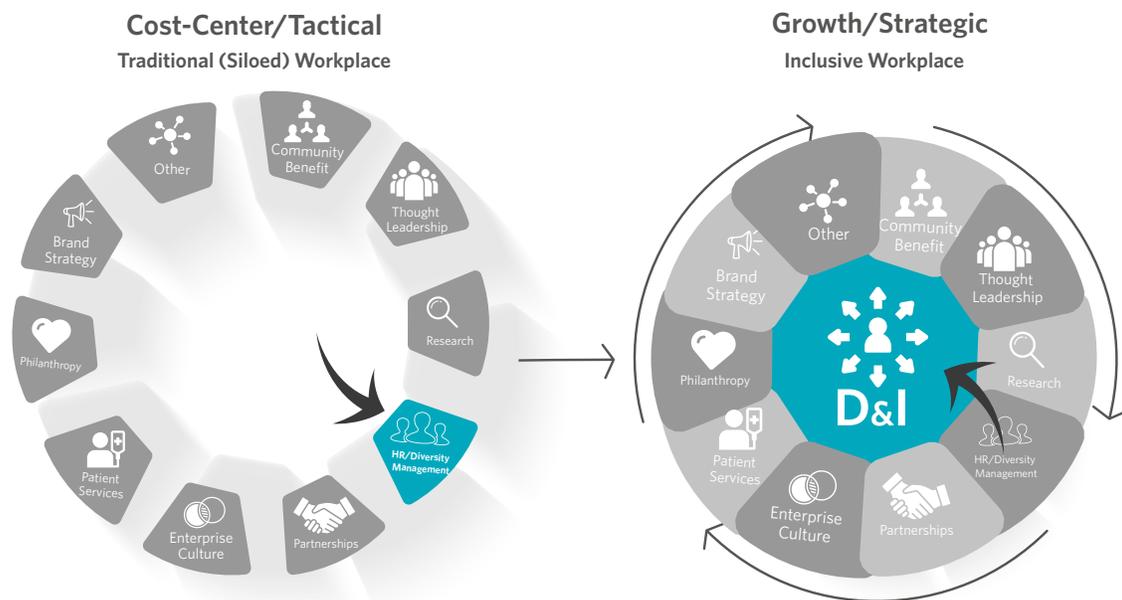
# The Better Response – Inclusion

Organizations recognize the need to be more diverse, so the first step they take is usually tactical—focused on initiatives managed separately in various silos of the organization, all based on achieving compliance.

## The Inclusion Approach is Individual

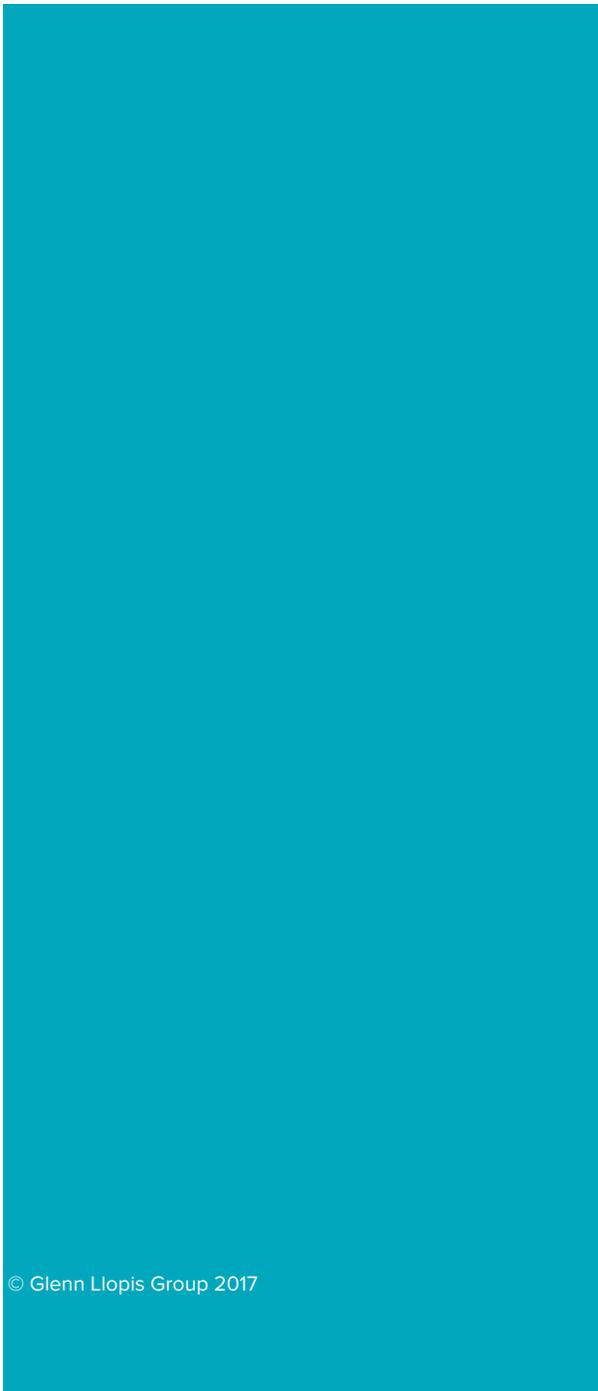
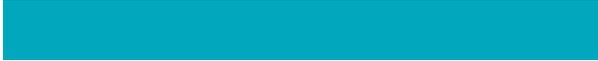
Patients	Employees	Communities
<p>Methods in place for getting to know them as individuals, for understanding how their health is shaped by family, community, lifestyles.</p>	<p>Ways to help them recognize what it is they solve for and how they contribute to growth as individuals with passions, distinction and expertise.</p>	<p>Methods for regular involvement with people and leaders, to better understand the community drivers of health and wellness.</p>

The Cultural Demographic Shift has revealed that people don't want to assimilate—they want to be who they really are. This means that we need to get to know each other all over again.



*“The Cultural Demographic Shift isn’t just translating documents,” said Joseph C. Alvarnas, M.D., Senior Medical Director, Community Practices, City of Hope. “It requires that we deeply change who we are and the nature of what we deliver. We have an extraordinary opportunity to change people’s lives.”*

# WHY INCLUSION AND INDIVIDUALITY?



# Here's What You Stand to Gain

## Learn how to let the individual define the business.

If you do the work to understand the Cultural Demographic Shift and genuinely explore how your organization can respond, your organization and its leaders will gain:

**Understanding**

**Agility**

**Energy**

**Connection**

### Understanding

Gain a greater **understanding** of the people in your communities, their cultures, their family relationships, their lives.

○ Therefore:

- You know what they expect from their experience with you.
- You learn how to manage costs in a way that doesn't diminish the experience for patients, employees or communities.
- You understand what other community factors are affecting their health.
- You learn how to help them be more compliant with follow-ups and how to motivate them to seek care earlier and be advocates for their own health and the health of their families and communities.

---

*Kevin Barnett, Dr.P.H., M.C.P., Senior Investigator for Public Health Institute, calls on us to "be fundamentally engaged institutions. The insular past is behind us. Those who lead the way to be engaged across the board with city and county officials, with community development agencies, with looking at how we pressure our political leaders around livable wages, affordable housing, healthy food access, walkable neighborhoods—are exactly the kind of work that we need to begin to do. These our outside the delivery of medical care services, but they are fundamental drivers of people's health and wellbeing."*

## Here's What You Stand to Gain

---

### Agility

**Develop the most important skill in an ever-changing industry: agility** – how to learn about people in your communities, and how to see opportunities in differences and turn them into growth strategies.

○ Therefore:

- As you learn how to better reach shift populations, you gain the skills and organizational processes to be better able to evolve along with your populations as they change over time.
- Those same skills and processes also help prepare your organization to be ready for gender and age diversity.
- You learn which aspects tend to vary by culture or demographic (i.e., who tends to be the decision-maker in a household, their attitudes toward hospitals, etc.).

---

*“When you engage with people in a way that invites them to tell you their story, that really changes the whole paradigm of what it means to be of service, what it means to care for people,” said Betty Ferrell, Ph.D., M.A., R.N., F.A.A.N., F.P.C.N., C.H.P.N, Director and Professor, Division of Nursing Research and Education, Department of Population Sciences, City of Hope.*

### Energy

**Spark energy with a workforce that reflects the diversity** of your communities and marketplace.

○ Therefore:

- Your workforce is better able to communicate with patients and communities.
- They serve as role models so younger people can see opportunities in both clinical and non-clinical careers.
- They help patients and patients’ families feel seen, heard and respected.

---

*“It begins with trust,” said Robert W. Stone, President and CEO of City of Hope. “I think that trust in this context goes a lot deeper. Will people access the care that we provide? To do so, they have to trust that they will be seen, that they will be heard, that they will be understood. And part of the challenge for us both in being culturally sensitive and building a representative workforce is having people who can communicate with these populations in a way that is meaningful, and can understand the patient’s unique individual needs.”*

## Here's What You Stand to Gain

---

### Connection

Achieve **connection** with people on a personal level.

- This is necessary for building a workforce of people who reflect the diversity of your community and share the organization's values.
- This is necessary for achieving true precision medicine.
- This is necessary for us to get to know each other again.

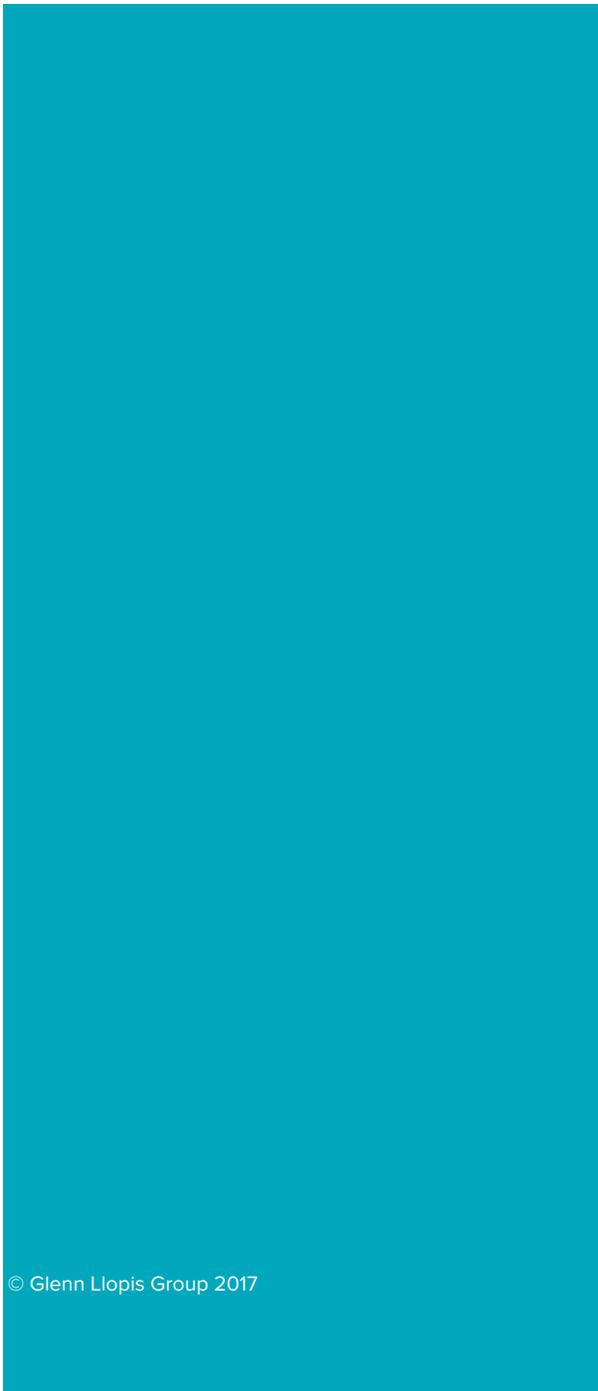
*"Healthcare is an innately human profession, a meeting between two humans at a moment of vulnerability," said Joseph C. Alvarnas, M.D., Senior Medical Director, Community Practices, City of Hope. "The most empowering thing we do for patients is we listen. We have to understand the intimacy, the privilege to participate in these moments. This is how we create healthcare that's about a **person**."*

These benefits overlap every silo, every individual initiative, every burning issue your organization is trying to address.

That's why the future of healthcare is about inclusion and individuality.



# HOW?



# Inclusion & Individuality - How?

**Shift your focus from diversity to inclusion and individuality if your goal is to drive growth.**

Do this by **investing in the following four core areas** to create distinction, strengthen your competitive advantage, and ultimately improve the patient experience and overall quality of care.

**Leadership**

**Workforce**

**Patient Experience**

**Preventive Care**

---

*“The organizations that will lead this transformation of healthcare will have certain characteristics that will be common,” said Robert W. Stone, President and CEO of City of Hope. “They will be systemic thinkers—they’ll do away with the old siloed way of thinking. At the end of the day, they’ll put patients and their individual needs at the center. In so many ways, that’s what the impact of the Cultural Demographic Shift is about. It’s about putting people’s needs front and center.”*

*The examples on the following pages were shared by experts at the Healthcare Executive Leadership Forum, held September 19, 2017, at City of Hope in Duarte, California.*

## Inclusion & Individuality - How?

---

### Leadership

**Empower all individuals to have more influence.**

- Shift and non-shift
- Employees, leaders, patients, community leaders, community partners

All employees want to feel like they're having an impact as individuals.

### Ideas and Insights:

- **Make diversity a business capability:** At CVS Health, Chief Diversity Officer David Casey has adopted this definition of diversity: "Any collective mixture that's characterized by differences, similarities, and their related tensions and complexities." As he explained: that definition is clinical on purpose, because it is a business capability, it's not just a set of initiatives or projects. According to Casey: "A Chief Diversity Officer is similar to a Chief Information Officer. It's the CIO's job to make sure the organization has the technology strategy, and that everybody in the organization has the technological tools they need to get their jobs done. It's the same in Diversity. My team's job is to make sure we have an enterprise Diversity strategy, and then we equip all of our colleagues and our leaders with the tools they need to leverage it and manage it in their daily work."
- **Form strategic external partnerships:** "We can't do this alone," said Harlan Levine, M.D., Chief Strategy Officer and Chief Executive of the Medical Foundation, City of Hope. "We're a healthcare company, we're a cancer enterprise. Part of focusing on the consumer and understanding the individual is to understand the genetics of a person. So we set out to affiliate with one of the leading precision medicine enterprises in the country, Translational Genomics Research Institute (TGen). They're now part of the City of Hope family."
- **Discover your leadership identity:** The Glenn Llopis Group (GLLG) helps healthcare executives identify their leadership identities, so they can reach their potential in the organization. Leadership is about the desire to be significant, not just successful. As a leader, what do you solve for? It seems like the answer should be simple, but it's not. Most leaders struggle to answer the question. It requires clarity about what gives you distinction and how you influence the evolution of the business as a leader. Knowing what you solve for allows you to influence more and be more accountable to others about what they can expect from your leadership.

## Inclusion & Individuality - How?

---

### Workforce

**Create inclusive cultures and teams in which all individuals can strengthen, showcase and harness their full capabilities.**

“We need to be building enterprise leadership that’s diverse, and at the same time we need to be building a pipeline,” said Carolyn Wiesenhahn, Senior Vice President of Human Resources for CVS Health. “And both of those converge on creating a culture that feels inclusive, that feels welcoming, that feels like a place where people can succeed coming from different backgrounds.”

### Ideas and Insights:

- **Fill the pipeline:** Kety Duron, Chief Human Resources and Diversity Officer for City of Hope, described some of their initiatives in this area: “We bring K-12 students to the lab and expose them to different experiments. We also create a path for high schoolers looking at STEM jobs, showing them how important it is to work in science roles, and how exciting it can be. Today we have 4,014 young adults come through the program, and 79 high schoolers. Now we want to meet their parents. We want to convince them that careers in STEM or healthcare are the right careers.”
- **Examine the way you assess talent:** CVS Health Chief Diversity Officer David Casey suggested that leaders examine the gaps in their ability to assess an individual’s capability versus experience when hiring. He challenged the audience of healthcare executives to learn how to get away from relying on experience alone as an indicator of qualifications, and move toward individual capability and ability.
- **Create a space where people feel safe to be their whole selves at work** and won’t be judged. David Boyd Williams, Director of Global Diversity for Sodexo, said the company has a saying: “Bring your whole self to work.” The idea is that people shouldn’t have to hide certain details about their lives when talking around the water cooler. For example: “What’d you do this weekend?” “Oh, I hung out with my best friend” (who just happens to be my same-sex husband). “At Sodexo we’ve found the productivity levels of employees who have been able to be out and open about their sexuality in the workplace translates to higher engagement rates—one of our highest engagement rates is the LGBTQ population within Sodexo. So we see this as part of our strategy to drive engagement.”
- **Sponsorship** was another idea shared by Boyd Williams. At Sodexo, senior leaders identify high-performers—not just those who’ve performed well in the past, but also those who show potential, and assume accountability for their advancement in the organization.

## Inclusion & Individuality - How?

---

### Patient Experience

**Build connection and trust with patients by asking good questions.**

Then listen to their answers. It boils down to this: recognizing people as individuals.

### Ideas and Insights:

- **“What are the three things in healthcare that matter to you today?”** Jack Cox, M.D., M.M.M., Senior Vice President and Chief Quality Officer at Providence St. Joseph Health, suggested asking that question and then writing the answer on the patient’s medical record so everyone who picks up the record gains a deeper understanding of the individual in that moment. When the patient returns at a later date, follow up: “Are these three things still important? Or have they changed?”
- **City of Hope asks about four dimensions of people’s lives:** physical, social, psychological and spiritual. “We ask about their physical wellbeing, and also about things like anxiety, depression, and about living with uncertainty,” said Betty Ferrell, Ph.D., M.A., R.N., F.A.A.N., F.P.C.N., C.H.P.N, Director and Professor, Division of Nursing Research and Education, Department of Population Sciences, City of Hope. “We ask ‘who cares for you, and who do you care for?’ We ask about roles and relationships. And spiritually—we want to know about the spiritual wellbeing of every patient and family caregiver.”
- **Design for your patients:** CVS Health learned that their Hispanic customers will come to the CVS MinuteClinic® with multiple family members. So the company sacrificed valuable shelf space in the CVS y más stores in order to make the MinuteClinics large enough to accommodate more people. “We understand the experience is different [for Hispanic customers], so we need to make our stores different,” said Carlos Ojeda, Director of Category Management & Marketing for CVS Health.

## Inclusion & Individuality - How?

---

### Preventive Care

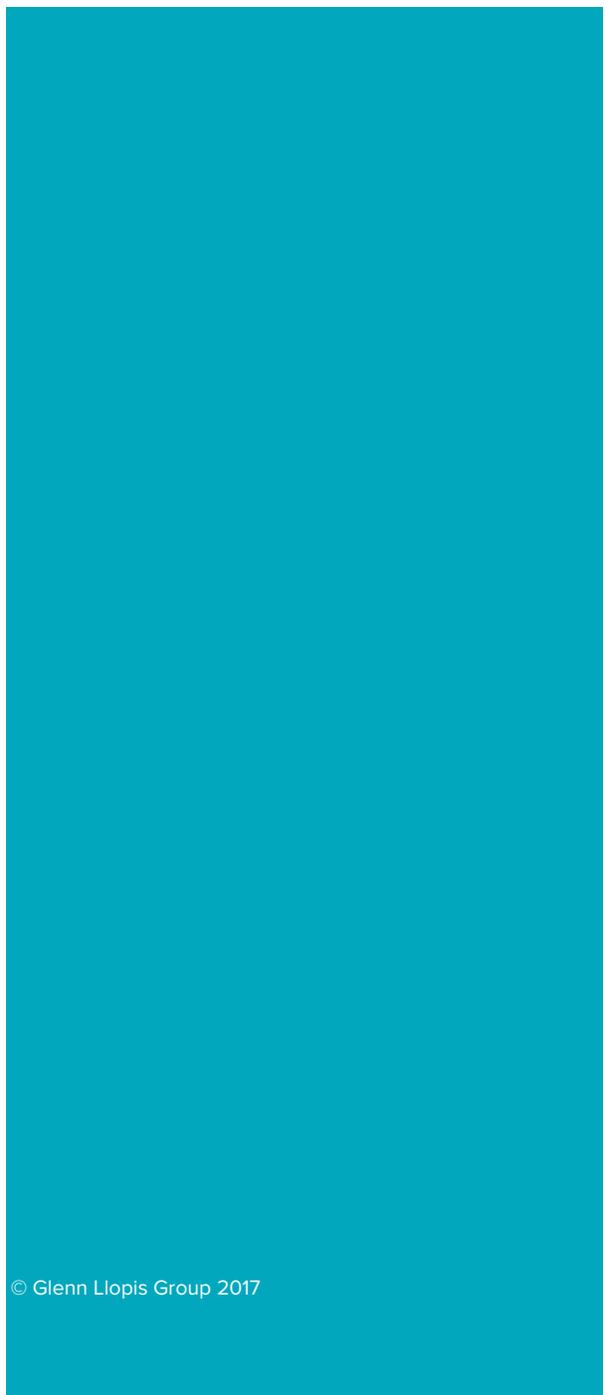
**Be proactive in getting to know people and their communities.**

“A person’s **place footprint** is as important as their genetic footprint” as a determinant of health, according to Somava Stout, M.D., Executive Lead for 100 Million Healthier Lives at the Institute for Healthcare Improvement. “Human beings are social and, in part, their health is determined by the peers that they’re around and the culture that they’re around—as well as the demographics, and structures, and systems of the place that they live in.”

### Ideas and Insights:

- City of Hope created a **Spanish-speaking patient family advisory group** (El Concilio), to help the organization learn how to improve the experience for patients and for their family members and caregivers.
- CVS Health took **steps to get to know Hispanic consumers** (patients), with the goal of getting people more engaged with their health through the pharmacy. As a result, CVS Health launched CVS y más stores, tailored for customers in Hispanic communities. The company started with 12 pilot stores in Miami, which turned out to be the most successful pilot project in the company’s history, then expanded the concept to California. They’re working on building trust first with beauty products: “The matriarch is usually the one making healthcare decisions for the family,” said Carlos Ojeda, Director, Category Management and Marketing, CVS Health. “If she trusts where she goes shopping for over-the-counter health and beauty, she’ll eventually trust the pharmacy—and that’s where we want to get her, where she can engage with her healthcare.”
- City of Hope offered employees **a chance to learn about care for transgender people**, with a 1-hour panel where people told their stories of being transgender. “It was very informative, there was written information, it gave providers language to use, it dispelled misconceptions,” said Betty Ferrell, Ph.D., M.A., R.N., F.A.A.N., F.P.C.N., C.H.P.N, Director and Professor, Division of Nursing Research and Education, Department of Population Sciences, City of Hope. “But most important, it was about listening to people’s stories.”

# GET STARTED



# Marketplace shifts get our attention.

They require us to think and act differently, and that's not easy. In fact, almost immediately it starts to feel overwhelming.

When GLLG explored the impact of the Cultural Demographic Shift with a large group of executives who participated in the American College of Healthcare Executives (ACHE) Senior Executive/Executive Program, we asked them: what would this kind of shift require? Their response: strategies for growth and change management. They also named these as realities their organizations need to address:

- Patient populations need new services
- Employees must redefine the business
- Consumerism: our patients are in the driver's seat
- We need to better understand our communities
- Individuality is the new normal
- We need to start truly listening
- We are experiencing a shift in the balance of power

They understood the magnitude of what it takes to change leaders' mindsets and to change an organization's approach to growth at its core.

Given those realities and everything addressed in this report, it's clear the Cultural Demographic Shift changes how we:

- Plan for growth
- Allocate capital management and financial resources
- Create new products, brands and services
- Design the most effective workgroups and organizational teams
- Engage with our employees, patients and communities
- Create the right strategic partnerships to strengthen our readiness and intellectual capital to best serve this shift (and the growth that comes with it)

**That's ambitious and can feel overwhelming.**

## Marketplace shifts get our attention.

### It starts small, and it starts with you.

Someone in your organization leads Diversity & Inclusion (for most organizations, that falls within the realm of the Human Resources department). GLLG recommends that you consider this seemingly simple—yet incredibly significant—change:

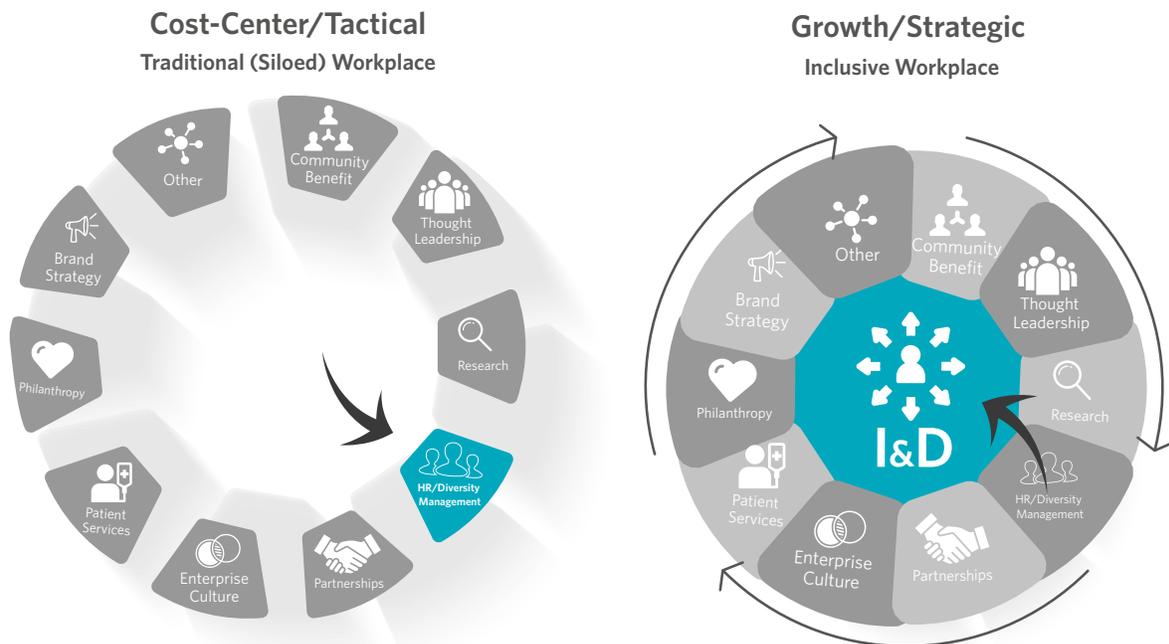


This is how a **shift** in mindset begins.

### Next, help this new growth mindset start to infiltrate every part of the organization.

Take steps to **move** I&D from a stand-alone silo...

to the **center** of your organization's growth strategy.

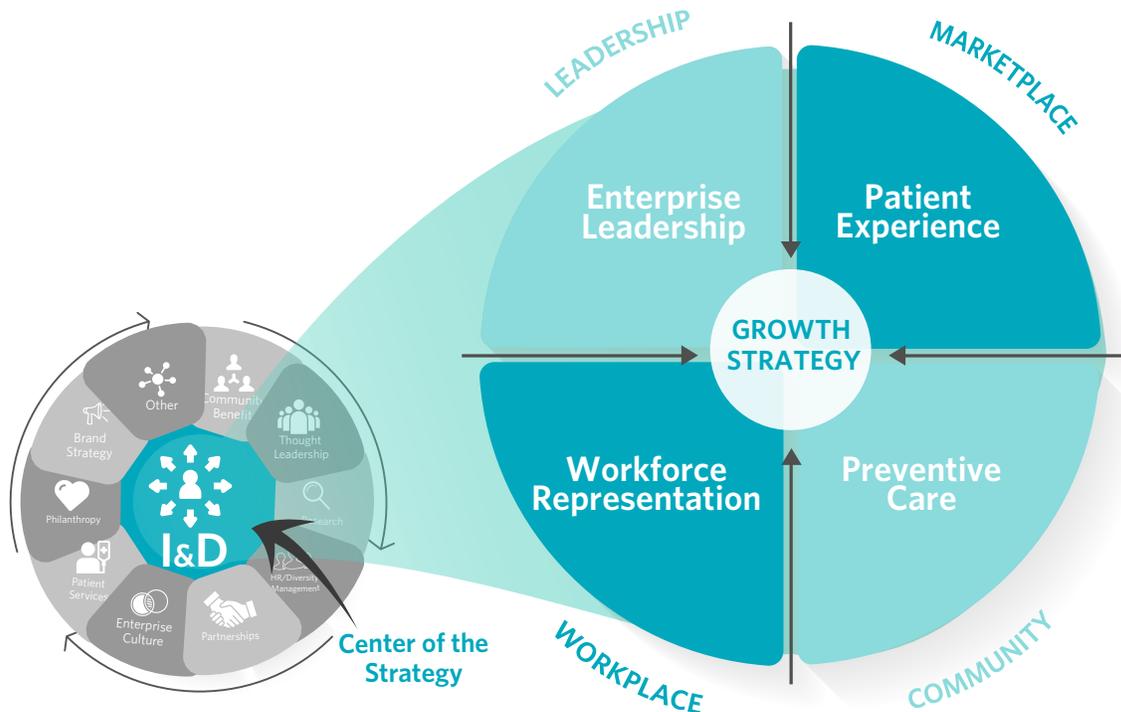


## Marketplace shifts get our attention.

**But what does the center look like?**

### **At the Center: All Four Core Areas**

They are interconnected and interdependent. They depend on each other to get to their respective and desired outcomes faster.



Do this by identifying enterprise-wide performance metrics that take into account what you've learned about the Cultural Demographic Shift, and that are represented in each of the four core areas discussed in this report. Though the Inclusion and Diversity journey begins in HR, over time the performance metrics should be owned and governed across every department and functional area.

### **You're on your way.**

When we start responding to the Cultural Demographic Shift by solving for the unique needs of the individual at a broader, more holistic enterprise level, that's when a new growth mindset starts to permeate the organization. That's when we start to harness the growth that is possible by achieving genuine **inclusion** and **individuality**. Why? Because individuals define our businesses, and we must learn to let them influence more if we are to continuously evolve and achieve distinct competitive advantage in the workplace and the marketplace.

## Marketplace shifts get our attention.

---

### Inclusion

A system for making sure the organization is welcoming at every level to every individual.

### Individuality

A concerted effort to know and account for the realities and the values of individual patients and employees.

*Following are some recommended next steps that will help you begin this process.*

### Getting the Change Management Process Started

- **Find your motivation:** You're reading this, so you're likely interested in the Cultural Demographic Shift. Why? Let that be your own starting point.
- **Share your thoughts** with each of the following (one-on-one or together, as appropriate): someone above you, someone at the same level but from a different part of the organization, someone lower than you, and at least three members of shift populations (preferably representing multiple levels and various departments).
- **Evaluate** how well your organization is practicing inclusion and individuality. The following two assessments will help you identify your baseline:
  - [Workplace Serendipity Assessment](#)
  - [Diversity of Thought Assessment](#)
- **Start small and build some proof points.** Start by defining two to three measurable and attainable metrics. Know what success looks like for your organization—invite people throughout the enterprise to partner with you. Don't mimic what your competitors are doing. Take ownership in support of your enterprise strategy.
- **Look for partners** outside the organization. Build your network among other healthcare providers, payers, and the broader healthcare delivery ecosystem.



[www.glennllopisgroup.com](http://www.glennllopisgroup.com)