



**November 10, 2022**

**Road Map Bulletin: Spotlight on Patrice Gordon-Poyser, Supplier Diversity Manager, Mount Sinai Health System**

Happy Thursday, Mount Sinai Community –

*Recently, our very own **Patrice Gordon-Poyser**, Supplier Diversity Manager, Mount Sinai Health System was featured in [Modern Healthcare](#), discussing Mount Sinai's supplier diversity program, which you may remember learning about back in [March](#). In honor of the article, we met up with Patrice to get an in-depth look at her work.*

**How did you come to Mount Sinai? How did you get involved in supplier diversity?**

I have led the Supplier Diversity Program since March 2021. I first came to work at Mount Sinai as a contract analyst in July 2019 to help write product, service, and other agreements on the Supply Chain team. I had some background in supplier diversity reporting from a prior job, so when Mount Sinai decided to launch their supplier diversity program in 2020, they asked me to write the contract for the consulting group that would help design the program. Then, Mount Sinai asked me to work with the consulting group and help implement the program.

**Can you walk us through a typical day at work as a Supplier Diversity Manager at Mount Sinai?**

Every day, I interact with vendors from the underrepresented supplier space, which includes any vendor that's a minority-, woman-, or veteran-owned business, businesses that are in historically underutilized business zones, and other small businesses that are otherwise diverse. When these businesses approach us about opportunities to become Mount Sinai vendors, I'm the one they talk to.



The other parts of my day are dedicated to informing my colleagues here at Mount Sinai about our initiative and working with them on a departmental level to understand what they're buying and who they've been buying from historically, and to help them identify opportunities to convert some of

those dollars to underrepresented businesses. To do that, I first look at which of their contracts are coming up for expiration, then I find reputable, comparable vendors in those same categories from underrepresented backgrounds to suggest.

Some departments' expenses stay pretty uniform over time, so it's easier to identify similar vendors in the same category and diversify their supply. But for other departments, their spending is more fluid—they might have different initiatives or events year to year, so it takes a bit more time to identify those opportunities to bring in underrepresented vendors.

Outside of my day-to-day work, I facilitate larger training sessions to inform people about our supplier diversity initiative and work with other teams to learn how the supply chain team can be a resource to them.

### **What's something that's surprising or challenging that you've found while doing this work?**

With supplier diversity in general, one of the biggest challenges is getting buy-in from departments and leadership. While I wouldn't say this is a surprise, I've been grateful for the support I've received at Mount Sinai. It has been a bit easier to implement this program here because I have the support of Mount Sinai's leadership and the backing of my team.

### **What's your overall goal for supplier diversity at Mount Sinai?**

My goal is for supplier diversity to be so ingrained in departments' spending that it's on par with our spending with other vendors, to the point where we shouldn't even have to evaluate whether we are inclusive enough. It should become second nature, where we open ourselves to underrepresented vendors instead of just those vendors that are known names in the health care space.

### **How is the larger health care industry moving as a whole when it comes to supplier diversity?**

Supplier diversity isn't a new movement in of itself, but it is gaining momentum in health systems, especially private health systems. In New York State, there's a state-mandated goal for government agencies to spend at least 30 percent with minority- and women-owned businesses and 6 percent with service-disabled veteran-owned businesses. However, for nonprofit health systems like Mount Sinai, we don't have those mandates unless we're using funds from a state grant.

But, as a health system, we've been very intentional and committed to this work, and I think that's why we've seen so much success. For example, on Wednesday, November 16, Mount Sinai is partnering with the New York & New Jersey Minority Supplier Diversity Council to host the [2022 Healthcare Symposium's Supplier Diversity Fair](#) at our corporate offices. We'll have sessions where prospective businesses can learn more about what it means to become a vendor and how they can connect with Mount Sinai and other health systems.

We thank Patrice for sharing her experience and insights with us and look forward to hearing more about the great work she and the Supply Chain team are doing. And as always, we invite you to join us at an upcoming event.

All the best,  
Angela and Shawn

## Join Us for Upcoming Events

Visit [Mount Sinai Daily](#) to see a full list of events for Native American History month, including:

- **Group Visit to the Smithsonian's National Museum of the American Indian** – The Office for Diversity and Inclusion will be hosting two days of learning as we browse the museum's collections and delve into history on **Saturday, November 12 or Sunday, November 13 at 1 pm**. Register [here](#).

**Chats for Change: Preparing the Next Generation of Health Care Professionals to Achieve Health Equity** – Join Chats for Change on **Tuesday, November 15, at noon** to explore areas for improvement in premedical and medical education to inform how future physicians care for and advocate for diverse patient populations. This discussion will also examine how to better prepare our future health care leaders for advocating when they experience injustice. Chats for Change is a production of the Icahn School of Medicine at Mount Sinai's Racism and Bias Initiative. Register on [Zoom](#).

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