Visit to NHS’s Lothian ‘Leading Better Care, Leading Across Difference’ programme

Three members of the Committee visited NHS’s Lothian’s ‘Leading Better Care, Leading Across Difference’ programme on 9 November. They met with participants along with facilitators and managers in order to discuss the programme and some of areas relating to the Committee’s inquiry.

The programme has initially been funded for 5 years by the Big Lottery Fund.

Why the programme was set up

- The programme was set up partly in response to evidence that nurses and midwives from BME backgrounds were struggling to progress into promoted roles. It was outlined that this was one of the only courses of its kind in the United Kingdom.

- NHS Lothian tries to reflect the population that it is serving by having a diverse workforce. Evidence has suggested that patients have a higher satisfaction rate when treated by a diverse workforce.

- Many present told of their multiple attempts to gain a promoted post to no avail. One person present told how she had applied for a promoted post 6 consecutive times with no success.

- The general consensus was that in applying for promotion individuals would get an interview but then not go on to get the promotion.

- People felt discouraged when they continuously did not achieve promotion and sometimes felt they ‘did not want to bother’ applying again and that they wanted to give up.

- Examples were given of people who had struggled for years to get a promotion in Scotland before moving to England and achieving promotion relatively quickly.

- It was noted that many of those present were highly qualified with multiple degrees, masters and PhDs.

How the programme works

- The programme comprises 5 full study days and several half day reflective sessions. The reflective sessions provide an opportunity for those participating in the course to meet up and discuss what they have learned.

- The programme is in its first year, commencing in Jan 2015 and its 6th cohort, of students are currently working through it. 38 BME nurses have joined the programme, in addition to 46 managers and mentors.
Many participants heard about the programme through word-of-mouth or contact with the facilitators. The programme is also advertised on the intranet, by poster and leaflet.

Participants are also offered mentors; managerial and mentoring training is offered to managers. However, there has so far been a lower than expected uptake of these courses. That said, the numbers are in line with projected numbers from the Big Lottery project plan.

Mentors play an important role. They are external to the area of work of the mentee.

After each cohort has completed the programme, the group continues to meet informally and become a peer support group. Facilitators also have regular meet ups with all participants and mentoring support continues long term.

The programme is currently funded until 2019, with clear outcomes to be achieved each year.

**Benefits of the programme**

- Workforce planning data shows an increase in promotions by 5% in BME nurses from 2012/13 to 2014/2015, some of this can be attributed to the programme.
- Many felt that the programme had given them confidence, resilience, knowledge and leadership skills.
- It was considered that by learning from the programme people could improve themselves and become more confident and as a result would be able to provide the best patient care.
- The group discussed issues such as people reacting negatively to their accents, perhaps claiming not to understand them. The programme has helped participants to manage situations such as this.
- It was considered that by volunteering to be mentors, people would learn more about the challenges facing ethnic minority nurses and midwives and could, as a result, educate other people on these issues.

**Further planned action**

*By NHS Lothian*

- Further work could be done within NHS Lothian to promote the positive effects of the programme. At present, uncertainty and even some negativity has been expressed about the programme. For example:
  - There was an element of some managers questioning why the programme was being made available to BME staff; some considered this to be positive discrimination.
However, whilst some people are initially against the course being run, they are often swayed by the statistics which illustrate the need for action in order to increase the number of BME nurses at higher grades.

One participant explained that he hesitated to take part in the programme for fear of isolating himself from his colleagues.

- It was felt that the success of the programme needs to be measured and fed back to senior managers so they can fully appreciate how worthwhile it is. As the programme commenced in January 2015 data is currently being collected and analysed and will be fed back to managers.

- It was suggested that the programme should be replicated across the NHS and other organisations. Best practice and learning should be shared across Scotland.

On a wider scale

- The general view expressed was that we should talk about difference and learn to embrace people’s different cultural backgrounds. Diversity should be celebrated rather than ‘integration’ emphasised.

- The importance of post-interview feedback for jobs or promotions was discussed. In many cases this was considered to lack useful detail or be hard to obtain at all.

- Training is already provided to interview panels on how to give feedback. However, it appears that good feedback is not being consistently given, so this needs to be explored.

- The group felt it was important that publications from Scottish Government Health Directorates need to send a visible and positive message about BME staff at a senior level. An example given was the 20:20 Vision, which has white nurses in senior uniforms on the cover and BME nurses in lower grade uniforms.

The picture elsewhere

- Although there was some suggestion that the picture for BME nurses and midwives is better in England, reference was made to Middlesex University research entitled “The snowy white peaks of the NHS.” The research suggests that as in NHS Lothian there is a lack of BME staff in senior roles south of the border.

- Reference was also made to NHS England’s recent introduction of the Workforce Race Equality Standard (WRES). This standard requires organisations to demonstrate progress against a number of indicators of workforce equality, including a specific indicator to address the low levels of BME Board representation.