

# Towards Inclusion at UHMBT: Improving BME colleague Experience

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Becoming a truly inclusive employer and service provider is a really important part of providing the best possible care to our patients. Our 'Towards Inclusion' Strategy, developed following internal and external stakeholder involvement, sets out our approach. Additionally our behavioural standards framework, written for our colleagues, by our colleagues, sets out what should and should not be expected of each other as we go about our daily lives interacting with colleagues, patients, citizens and relatives. These documents are not 'door stops' – they are important – they have helped us to spark interest, and generated interest across the Trust and beyond – including the development of seven colleague inclusion networks, each with nominated executive support.

## THE NHS WORKFORCE RACE EQUALITY STANDARD

The national NHS Workforce Race Equality Standard (WRES) has given us a great platform to really demonstrate a new way of working, in partnership with colleagues – using data to drive discussion, to develop action plans in partnership and make sustainable improvements for our staff and ultimately our patients.

Colleague experience data from the first year of WRES reporting in 2015 made it clear that we had a problem. Black and Minority Ethnic (BME) staff were more likely to undergo a formal disciplinary investigation; less likely to be appointed once shortlisted for a job; were under-represented in leadership roles; were reporting significantly more bullying, harassment and discrimination; and had greater perceptions of unfairness in career progression opportunities.

Why does this matter? If you haven't read Roger Kline's 2014 Snowy White Peaks it is well worth a read/ revisit. Inclusion matters. BME inclusion matters. It makes a difference to patient care.

## THE POWER OF LEADERSHIP AND PARTNERSHIPS

Professor Michael West talked at one of our leadership workshops about the three principles of compassionate leadership: Listening with fascination, showing compassion and understanding, and taking intelligent action. All of which have been at the heart of our inclusion work. We have LISTENED (really listened, not just superficially) to colleagues to understand their experiences in our organisation. We have invested time in understanding what other NHS employers are doing, what has worked, and what hasn't in relation to inclusive leadership and changing organisational culture. We have looked outside the NHS to other public/private sector organisations in order to bring back best practice examples to translate into reality at our Trust. Our (very privileged) involvement in the NHS Employers Equality Partner Programme has really helped.

We have shown COMPASSION AND UNDERSTANDING. We are now talking about difference. We are being open and transparent with sharing the data that shows the differing experiences for different groups. We have invested time in seeking out and involving colleagues who have had bad experiences and have worked together to drive improvements.

We are now ACTING WITH INTELLIGENCE to make IMPROVEMENTS. Developing and enabling inclusive leadership at all levels with colleague inclusion networks (BME, LGBT+, Disability, Forces, Gender Equality, emerging Carers and EU colleague support networks, and over 180 Personal Fair Diverse Champions. Networks are led by colleagues, for colleagues. In partnership with these networks we develop annual action plans to improve colleague experience for different groups.

## THE POWER OF SHARED LEARNING

'Musts' for us have been talking about difference, talking about diversity, talking about the benefits to patient care that true inclusive practice brings. We have tried to open people's eyes about current difference of colleague experience through education, challenging perceptions and behaviours, and celebrating good practice.

We have rolled out a number of learning opportunities related to inclusion. These include basic Equality and Diversity and Behavioural Standards eLearns for all staff and a face to face Inclusive Behaviours Programme (developed in partnership with CETAD at Lancaster University) with over 1800 colleagues participating so far. In addition we thread inclusive leadership through all of our leadership development programmes. And going further, Senior Leaders have been invited to attend one a series of masterclasses led by Eden Charles, national Inclusion expert in the coming months.

Our first ever Annual Inclusion Conference focussed on Race Equality – where we learned from experts in the field. Yvonne Coghill the national NHS WRES lead has visited us to lead a workshop with colleagues. We share with all colleagues our position, progress and the actions we are taking to improve BME colleague experience each year as part of our annual reporting for inclusion.

We have received really positive feedback about our Reverse Mentoring programme. The first cohort has seen BME colleagues mentor Executive and Non-Executive Directors – helping them to understand their different backgrounds and experienced. Cohort 2 will be open to all senior leaders to apply for.

As well as supporting each other and working with the Trust to improve colleague experience for everyone, our BME colleague network work hard to celebrate diversity and raise awareness of different cultures. One example is the hosting of the first every UHMBT Diwali Gala in the autumn – a great celebration open to all colleagues and their families. More events are planned and we hope to see new faces getting involved in the future.

## THE POWER OF ACTION

As well as these learning opportunities, there are many other improvement actions we have taken. A few examples are:

- 27 colleagues have participated in the NHS Leadership Academy development programmes 'Ready Now' or 'Stepping Up' for BME leaders.
- One of our consultant colleagues is a national WRES Expert – advising us on best practice approaches to address WRES indicators
- 3 UHMBT colleagues (2 BME network members) have completed a Coaching for Inclusion programme
- 3 BME network members have undertaken ACAS Investigation and Mediation training
- Our BME network is represented on the Trust's Behaviours at Work Joint Working Party – working together to address bullying, harassment and incivility.

This is a journey – it will take time to close the gaps between the colleague experience of different groups, but as a Trust we are now:

- Open about the challenge

- Talking about difference
- Actively working with colleagues and managers at all levels to make improvements

Through being open and honest, and acknowledging that BME employee experience was disproportionately bad, we have worked hard to develop relationships and identify new ways of working. We have made progress in some of the metrics – representation in leadership positions being one. However BME colleagues remain much more likely to experience of bullying, harassment and abuse and discrimination.

We truly believe that recognising, valuing and harnessing a diverse workforce, will enable us to provide the best possible employee and patient experience.

To quote Joel O'Loughlin, who spoke at our Race Equality conference:

'It's not the difference that makes the difference, but the difference the difference makes'

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