

South East Nursing and Midwifery Professional and Leadership Development: Global Majority 90 Day Leadership Challenge

30th April 2024

Welcome!

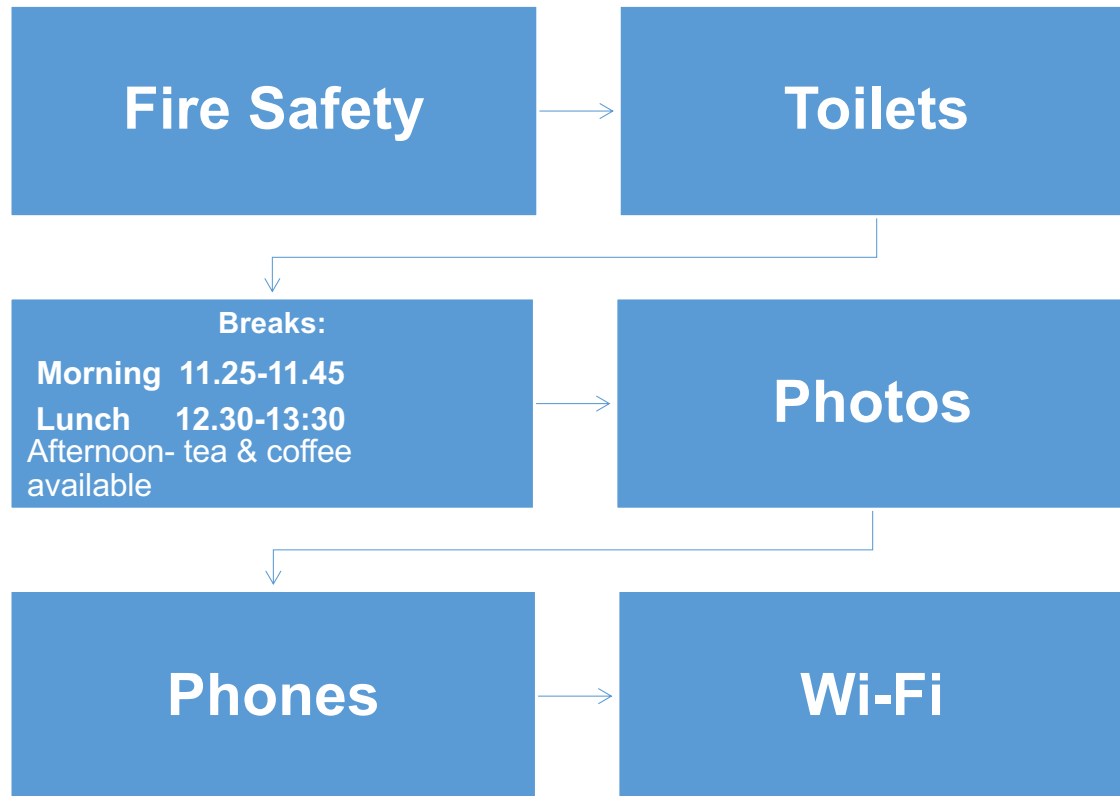
We will be starting the session at 10am



Scan here to access the
programme of events, presenter
bios and more



Some housekeeping!



Social Media – While we encourage you to share your experiences on social media, do take into consideration that we are in a pre-election guidance period.

SCAN QR CODE FOR EVENT WEBPAGE














Welcome and Introductions!

**Andrea Lewis – Regional Chief Nursing Officer, NHS England
South East**



Meet The Team

<p>Natalie Percival Regional Director of Nursing-Professional and System Development</p>		<p>Elizabeth Carter, BA(Hons), MBA Transformation Lead NHS England</p>		<p>Fortune Mhlanga Regional Strategic Advisory Group Lead</p>	
<p>Wendy Keating Regional Assistant Director of Nursing- Professional and System Development</p>		<p>Amira Gorani Transformation and Quality Improvement Manager</p>		<p>Jeanette Williams Head of Staff Experience and Engagement Workforce, Training & Education Directorate, NHS England -SE</p>	
<p>Nick Hubert Business Administrator NHS England South East</p>		<p>Mark Edgerton Director, Wellbeing at Work</p>		<p>Arend Welmerts CEO Ninety Days Ltd</p>	

Aims of the day

By the end of the day we hope we have:

- Inspired each other
- Shared learning and ideas
- Identified what we can do best together across the region-and how
- Made a difference
- Held each other to account
- Committed to making improvements
- **Determine our 90 Day Leadership Challenge**



10:00 - 10:15

Welcome and introductions

Andrea Lewis - Regional Chief Nursing Officer, NHS England South East

10:15 - 10:45

“Too Hot to Handle” - why concerns about racism are not heard or acted on

Roger Kline - Research Fellow, Middlesex University Business School

10:45 - 11:05

Next steps in implementing the **Combatting Racial Discrimination Toolkit** and progress

Joan Saddler - *Director of Partnerships and Equality, NHS Confederation*

Leadership Sponsorship Programme

Elizabeth Carter - *Nursing Professional Development Lead,
NHS England*

11:05 - 11:25

Questions and discussion with the panel

11:25 - BREAK

11:45- 11:50

Reconvene

11:50 - 12:00

EDI Improvement Plan and accountability

*Jeanette Williams - Head of Staff Experience, Engagement and EDI, NHS England
South East*

12:00 - 12:25

National Strategic Advisory Groups and Examples of Good Practice and Ideas for Adoption

Pieter Joubert - AHP Strategic People Lead

Fortune Mhlanga - Regional Lead for CNO, CMidO Strategic Advisory Group

12:25 - 12:30

Explaining the afternoon plans

90 Days Team

12:30 - LUNCH

13:30 - 13:45

Reconvene and energiser

13:45 - 15:45

Actions to progress: agreeing the 90 day challenge

90 Days Team

15:45 - 16:00

Close and commitment

Andrea Lewis - Regional Chief Nursing Officer, NHS England South East



Our approach for the day

How we create a safe learning environment:

- Open and honest
- Respectful and kind
- Engage
- Commitment
- Constructive challenge



Mark Edgerton - Introductory Session

What lights the fire...





“Too Hot To Handle” – Why concerns about racism are not heard or acted on.

**Roger Kline – Research Fellow, Middlesex University
Business School**



TOO HOT TO HANDLE?



**WHY CONCERNS ABOUT RACISM
ARE NOT HEARD... OR ACTED ON**

SE Region Webinar 30th April 2024

Roger Kline

Research Fellow, Middlesex University Business School

@rogerkline

Question to be asked:

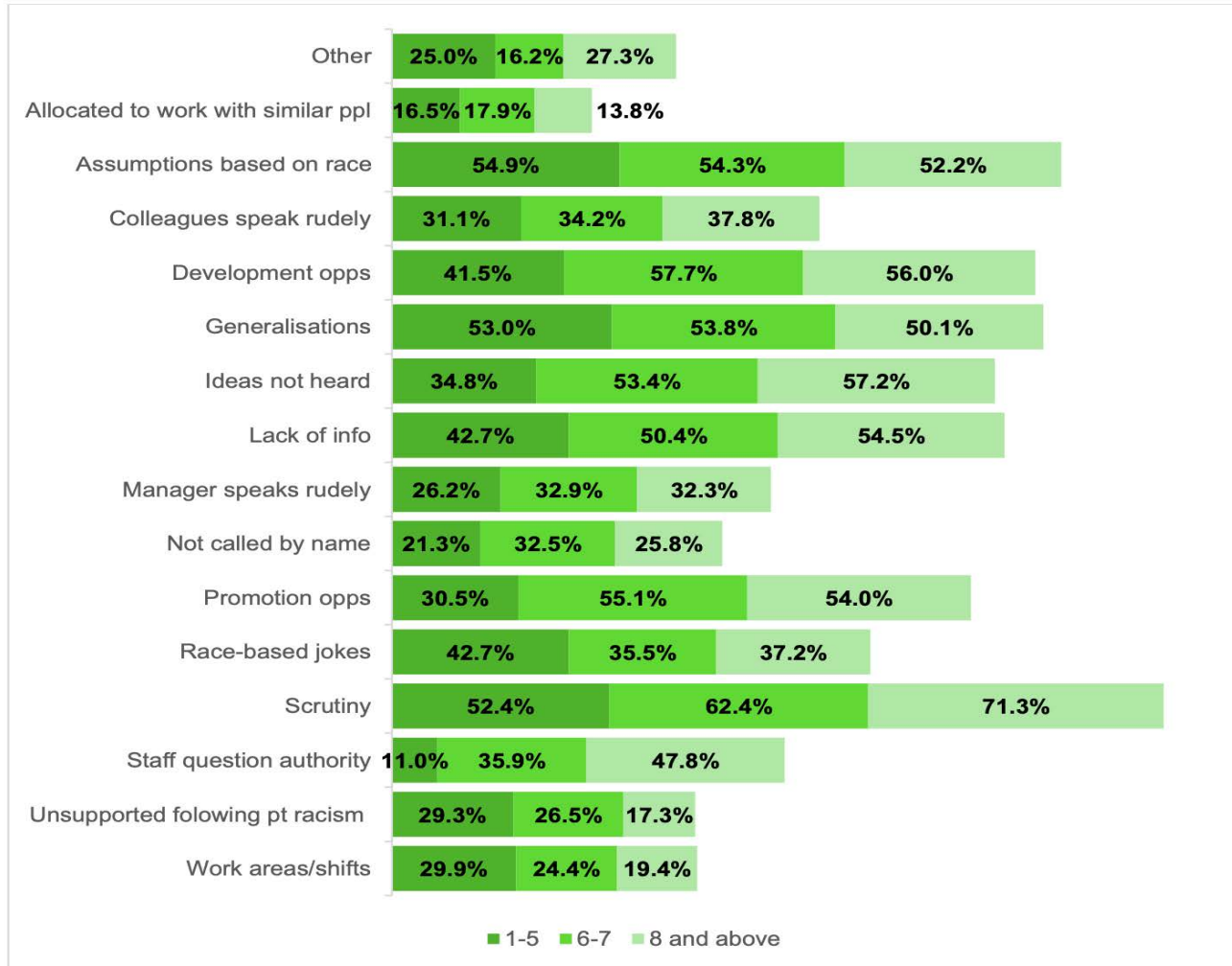
- What confidence do your organisation have that it:
- understands the scale of workplace race discrimination within it
 - your leadership understands how it is sustained
 - and has confidence that its strategy to address it has some reasonable likelihood of being successful – and if so why?

Why another report.....

- Not our intention to 'prove' racism
- The report captures the experiences of staff (over 1300) when trying to raise racism within the NHS
- It brings together **Employment Tribunal findings** as learning for the NHS in the failings in how they respond to racism
- It draws on wider research about the experience of staff raising concerns of any kind
- It makes recommendations on what the NHS and others can do to be more intentional and to take racism seriously



Fig 3: If you have experienced racism, what form did it take? (by band grouping)



Findings

- Racial assumptions and stereotypes widespread
- Lack of development opportunities
- Relationships with colleagues are often littered with micro-aggressions – including notably scrutiny by managers
- Barriers to raising concerns – and minimisation of issues raised
- Too little support from those who are there to offer it - Freedom to Speak Up Guardians, HR and Trade Unions
- Raising concerns seen as pointless and risking retaliation



Employment Tribunals

- We reviewed a number of key NHS Employment Tribunal cases involving race discrimination and noted the common themes identified by Tribunals about NHS employer failings
- Eva Michalak (2011), Eliot Browne (2012) Richard Hastings (2016), Michelle Cox (2023), Adelaide Kweyama (2023) Olukemi Akinmeji (2023), Princess Mntonintshi and Ubah Jama(2023) and Samira Shaikh (2023)



Common failings... Part 1

- **Discrimination is rarely admitted**
- **Very little direct discrimination is overt** or even deliberate. Discrimination is demonstrated by surrounding circumstances and the previous history.
- **Employers generally look at events individually** but should consider cumulative patterns of behaviour.
- **Employers often set a high bar** - needing to see '*deliberate*' *discrimination* thus failing to recognise real but covert discrimination.
- **Courts regularly criticise HR staff** for falling short of the expected standard in race discrimination cases and that may itself be an act of discrimination

Common failings, Part 2

- **Investigations and hearings** where race may be a factor are notoriously poor quality and prone to bias – having a **commissioning manager, investigator, or HR adviser who is Black or of minoritised heritage** is no assurance investigations will be robust or unbiased.
- Employers repeatedly seem insufficiently aware of the **legal framework** of burden of proof in discrimination cases
- **NHS employers have a responsibility for contract staff** – both as complainants or as those who may be discriminating.
- A refusal to be alert for the likelihood of **retaliation** if concerns about racism are raised

A flawed approach to race discrimination in employment relations inc. EDI

- A primary reliance on policies, procedures and training to address culture is unevicenced
- Employers rely on individual staff to raise concerns and so focus on tweaking policies and procedures. But research strongly suggests it is the failure to hear, listen and act appropriately that is the crucial problem deterring staff raising concerns of any kind e.g. bullying, patient safety
- That failure is compounded by the fear of talking about race and racism
- There is a flawed understanding of how bias and discrimination can be mitigated
- Insufficient attention to inserting accountability at every stage
- Too many leaders fail to lead, set standards, model them, and act as allies holding themselves and others to account

Persistence of racism: staff experience

- Denial – organisations deny racism, even when it is obvious
- Stereotypes – several cases found that managers often used stereotypes to describe individuals and their behaviours
- Fear – of discussing 'race' and racism
- Defensiveness
- Reluctance or refusal to acknowledge race as an issue
- Minimisation of harm – employers fail to recognise or acknowledge the harm of racist situations
- Lack of empathy – employers more likely to empathise with the alleged party – rather than the victim
- Assumptions of fairness – policies and processes are often used as means to demonstrate fairness

Recommendations

- Leadership is crucial. Talk about racism.. Get uncomfortable, increase competence
- Getting comfortable with staff speaking up – don't dismiss their concerns
- Set standards to address everyday racism and take accountability if they are not adhered to
- Be proactive and preventative – look for racism - don't wait for individual staff to raise it
- Stop doing things that make little difference – follow the research
- Recognise the shortcomings of diversity training in isolation
- Develop staff capabilities and sustained peer review – especially in areas li HR and FSUG
- Be alert to retaliation



Further reading

- Too Hot to Handle (2024)
- No More Tick Boxes (2021)
- Paradigm Lost (2023)

Thank you
@rogerkline

Next Steps in Implementing the Combatting Racial Discrimination Toolkit and Progress

**Joan Saddler – Director of Partnerships and Equality, NHS
Confederation**

Leadership Sponsorship Programme

**Elizabeth Carter – Nursing Professional Development Lead,
NHS England**



Sponsorship Update

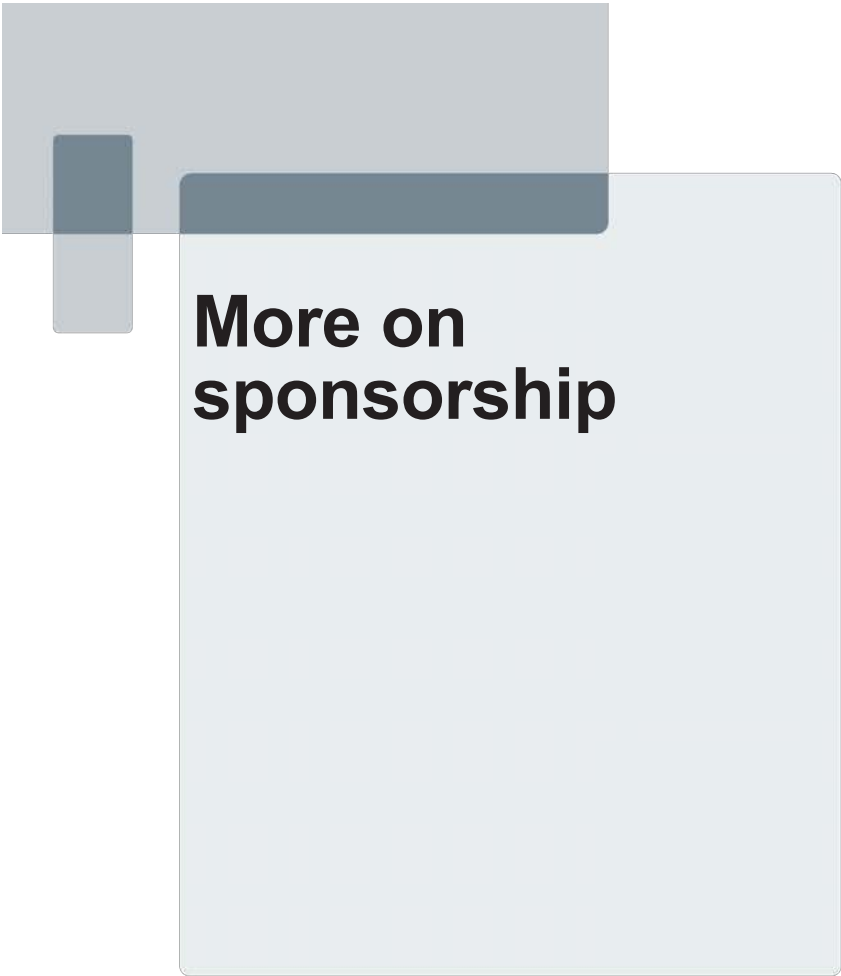
Elizabeth Carter
Nursing Professional
Development Lead, NHSE

Getting to Equity

- Sponsors can help Global Majority nurses and midwives who, in spite of completing many other programmes and qualifications, have not been able to cross over into senior leadership.
- Work with Sponsors to help them to understand the role that they have to play in progressing the careers of Global Majority nurses.
- The programme equips them with the knowledge, skills, mindset and motivation to connect to sponsorship together seek out career opportunities.

- What about our band 7s? [Equity Now!](#)

- What about our bands 5 and 6 and their matrons? [Gen Equity](#)



More on sponsorship

[How to find the person who can help
you get ahead at work | Carla
Harris \(youtube.com\)](#)



National Outcomes: Sponsorship

- Getting to Equity: 4 cohorts, Band 8c and above. 252 sponsors and sponsorees
- Equity Now: Bands 7-8c, 114 participants
- Gen Equity (Leeds Teaching Hospital and Gateshead) 2 cohorts, bands 5 and 6 and matrons, 58 participants
- Commissioned 4 new workstreams to follow on:
 - Sponsorship Programme (Mar 24 and April 24)
 - Alumni support (Regional events plus national event)
 - Practical resources to support bands 5/6 and their matrons
 - Circles safe spaces

Going forward – working with the regions.....

During 23/24 we commissioned:

- Inclusiviti to deliver 2 cohorts for the main sponsorship programme.
 - Through discussions with the regions, widening the scope to Band 7
- Ninety-Days Health to deliver 7 regional events for the alumni of our various programmes and work with them to reflect other initiatives past and current.
- SHM Productions to work with us and the service to co-design and co-develop a **facilitator toolkit** to enable organisations to adopt a train the trainer approach with regards to raising awareness and educating staff in tackling racism and ensure equity of behaviour and practice.
- Empathy Museum to develop the Circles approach, creating safe spaces, to support conversations on race.

Inclusiviti

CEO Aduke Onafowokan

www.adukeonafowokan.com
www.inclusiviti.com



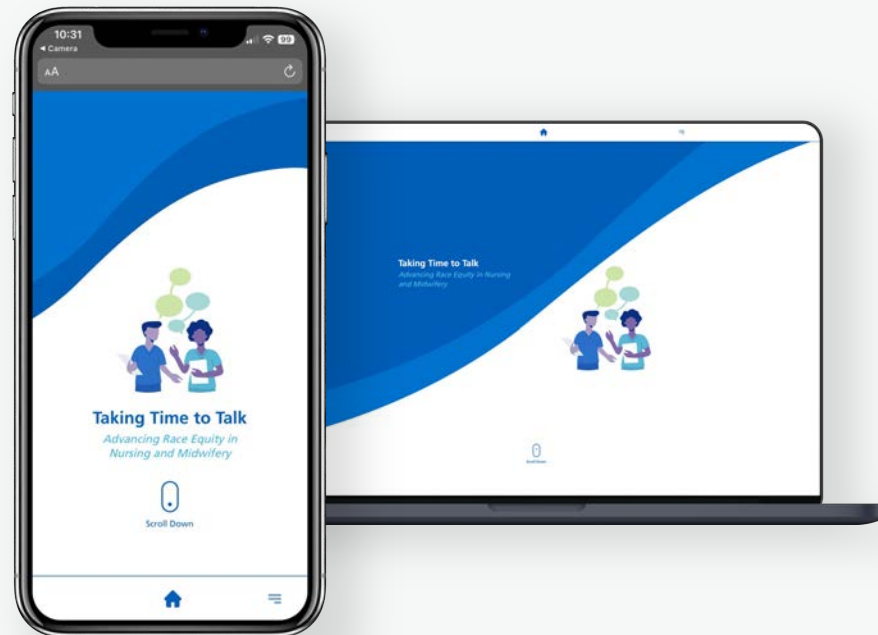
Taking Time to Talk: Resource & guide

Scan the code to
access the full
resource



<https://sandbox.dev-shm.net/splashscreen>

Password:
Takingtim3totalk!





Questions and Discussion with the Panel

Time for a Break!





Reconvene & Quick Energiser

Mark Edgerton





EDI Improvement Plan and Accountability

**Jeanette Williams – Head of Staff Experience, Engagement &
EDI, NHS England South East**





England

**Southeast Regional & System EDI Plan
Update**

April 2024

Jeanette Williams

**Head of Staff Experience Engagement
and EDI**

NHS EDI Improvement Plan

- This is the first time an EDI Plan has been produced for the whole of the NHS.
- It sets out why equality, diversity and inclusion is a key foundation for creating a caring, efficient, productive and safe NHS.
- Explains the actions required to make the changes that NHS staff and patients expect and deserve, and who is accountable and responsible for their delivery.
- Describes how NHS England will support implementation over the 5 years of the Plan.
- Provides a framework for integrated care boards to produce their own local plans.
- The plan also supports the achievement of strategic EDI outcomes, which are to:
 - **Address discrimination**, enabling staff to use the full range of their skills and experience to deliver the best possible patient care
 - **Increase accountability of all leaders** to embed inclusive leadership and promote equal opportunities and fairness of outcomes in line with the [NHS Constitution](#), the [Equality Act 2010](#), the [Messenger Review](#)
 - **Support the levelling up agenda** by improving EDI within the NHS workforce, enhancing the NHS's reputation as a model employer and an anchor institution, and thereby continuing to attract diverse talents to our workforce
 - **Make opportunities for progression equitable**, facilitating social mobility in the communities we serve.

High Impact Actions

Measurable objectives on EDI for Chairs Chief Executives and Board members.

Success metric

1a. Annual Chair/CEO appraisals on EDI objectives via Board Assurance Framework (BAF).



Overhaul recruitment processes and embed talent management processes.

Success metric

2a. Relative likelihood of staff being appointed from shortlisting across all posts

2b. NSS Q on access to career progression and training and development opportunities

2c. Improvement in race and disability representation leading to parity

2d. Improvement in representation senior leadership (Band 8C upwards) leading to parity

2e. Diversity in shortlisted candidates

2f. NETS Combined Indicator Score metric on quality of training



Eliminate total pay gaps with respect to race, disability and gender.

Success metric

3a. Improvement in gender, race, and disability pay gap




Address Health Inequalities within their workforce.

Success metric

4a. NSS Q on organisation action on health and wellbeing concerns

4b. National Education & Training Survey (NETS) Combined Indicator Score metric on quality of training

4c. To be developed in Year 2



Comprehensive Induction and onboarding programme for International recruited staff.

Success metric

5a. NSS Q on belonging for IR staff

5b. NSS Q on bullying, harassment from team/line manager for IR staff

5c. NETS Combined Indicator Score metric on quality of training IR staff



Eliminate conditions and environment in which bullying, harassment and physical harassment occurs.

Success metric

6a. Improvement in staff survey results on bullying / harassment from line managers/teams (ALL Staff)

6b. Improvement in staff survey results on discrimination from line managers/teams (ALL Staff)

6c. NETS Bullying & Harassment score metric (NHS professional groups)



EDI Plan – Accountability Framework

Providers	ICs / ICBs	Regional	National
<ul style="list-style-type: none"> ✓ Delivery of high impact actions and interventions by protected characteristic at trust level. ✓ Measure progress against success metrics consistently within the organisation. ✓ Engagement with staff and system partners to ensure that actions are embedded within the organisation. ✓ Effective system working and delivery to ICS strategies and plans ✓ Compliance with provider licence, Care Quality Commissions standards and professional regulator standards. 	<ul style="list-style-type: none"> ✓ Effective system leadership overseeing NHS delivery of EDI improvement plan, ensuring progress toward achievement of high impact actions and Long-Term Plan priorities. ✓ Ensuring delivery of ICB statutory functions of arranging health services for its populations and compliance with statutory duties. ✓ Measure progress against success metrics consistently and coordinate a system view. ✓ Compliance with Care Quality Commissions assessment frameworks. 	<ul style="list-style-type: none"> ✓ Primary interaction between national and systems ✓ Translate national policy to fit local circumstances, ensuring local health and workforce inequalities are addressed ✓ Agree 'local strategic priorities' with individual ICs and provide oversight and support. ✓ Measure progress against success metrics consistently and coordinate a regional view. 	<ul style="list-style-type: none"> ✓ Set expectations for equality and inclusion through the NHS EDI improvement plan ✓ With regions, facilitate supportive interventions to implement the high impact actions, improve EDI performance and outcomes ✓ Measure progress against success metrics consistently and coordinate a national view.

Embedding the Plan in the South East

- All regions, systems and providers will have responsibilities for implementation of the Plan.
- There will be various levels of scrutiny, including through CQC assessments.
- ICBs and providers are delivering work, such as through TTT, that will align to the high impact actions and success measures.
- But, there are also gaps in existing provision. Important to note that the Plan covers all 9 protected characteristics, intersectionality, and social mobility.

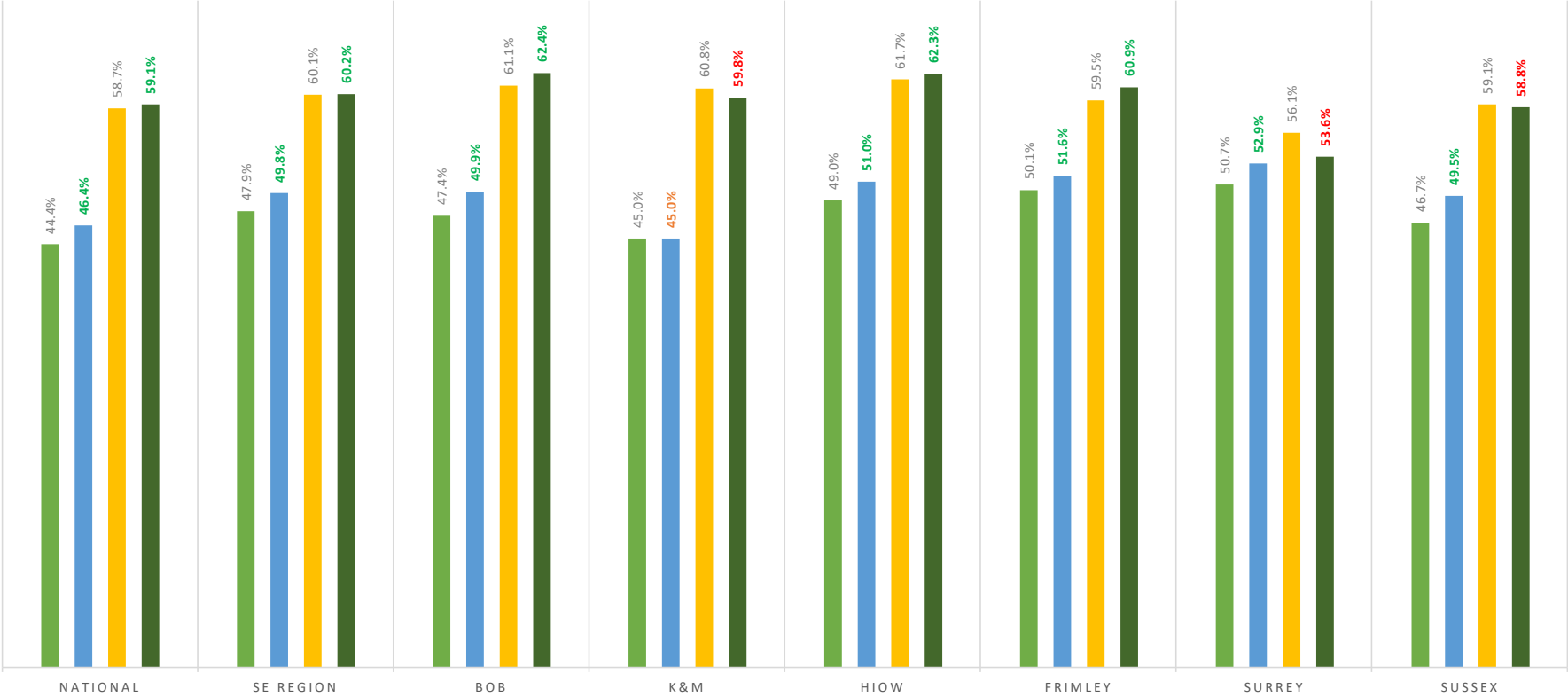
This plan provides the framework for making the NHS the best place to work whoever you are, where all staff feel they belong, can thrive, and – ultimately - deliver the best possible service for our patients.

Amanda Pritchard, NHS England Chief Executive

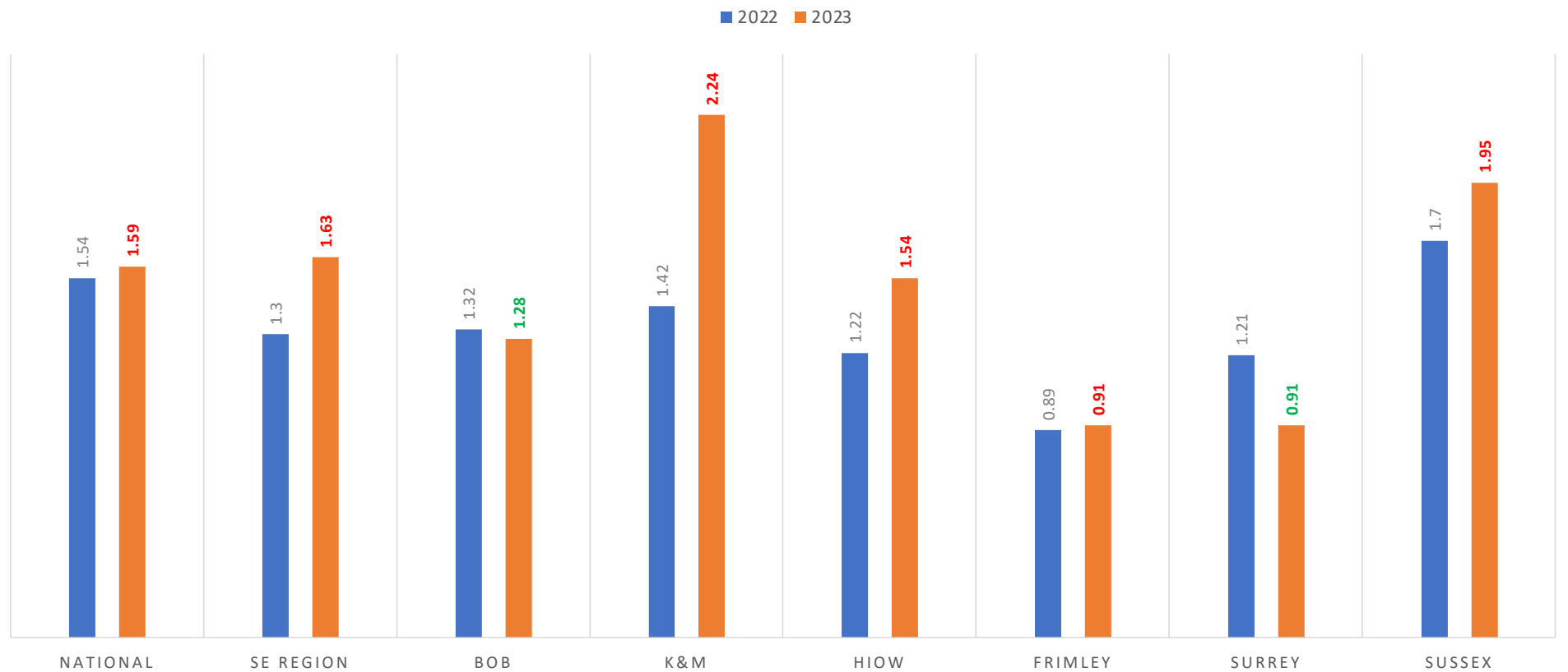
Navina Evans, Chief Workforce, Training and Education Officer

INDICATOR 7: BELIEF THAT THE ORGANISATION PROVIDES EQUAL OPPORTUNITIES FOR CAREER PROGRESSION OR PROMOTION

■ BME Staff 2022 ■ BME Staff 2023 ■ White Staff 2022 ■ White Staff 2023



INDICATOR 2 - THE RELATIVE LIKELIHOOD OF WHITE APPLICANTS BEING APPOINTED FROM SHORTLISTING COMPARED TO BME APPLICANTS



1.0" would indicate equitable recruitment, any figure over 1.0 indicates white staff being more likely to be shortlisted

Workstream: NHSE EDI Improvement Plan - HIAs

Submitted By: System Leads

Last updated: March 2024

Key Programme Milestones	ICB	RAG	Summary	Risks	Mitigation
Chief executives, chairs and board members must have specific and measurable EDI objectives to which they will be individually and collectively accountable	All		<ul style="list-style-type: none"> •Most ICBs/Providers have set board Objective, or underway – for all organisations. •WRES, WDES data and Gender Pay Gap reported, and actions reviewed at Board/committees; lived experience is regularly embedded into Boards/committee meetings. 	<ul style="list-style-type: none"> •Changes to organisational structures has an impact on our ability to target this specific group for objective setting and talent management (for example ICB restructure, community services procurement and use of interim directors). •Competing priorities and plans tackling EDI issues. Also, multiple reporting mechanisms, reporting resource is not sufficient to meet workload. •Resource to coordinate system wide programmes on international recruitment and violence reduction is discontinuing. •Cost of implementing changes to recruitment process, lack of engagement from hiring managers. Progression opportunities post positive action programme. 	<ul style="list-style-type: none"> •EDI Team feedback to consultation and system EDI engagement to understand key areas of focus and support. •Alignment of plans. System reporting changed to quarterly with dates shared in advance. Request for NHSE to share reporting dates in advance made. Point also raised as part of the System Collaborative led by NHS Confed. •System workforce resourcing being considered as part of ICB restructure. •Creating awareness and working with other providers across systems to collaborate.
Embed fair and inclusive recruitment processes and talent management strategies that target under-representation and lack of diversity.	K&M/BOB/Surrey Frimley/Sussex/HIOW		<ul style="list-style-type: none"> •Some systems are finalising work on Veteran Aware Accreditation to include focus on veteran recruitment. •Few systems have rolled out new inclusive recruitment training, with others in the final planning phase. •Some Trusts have added flexible working question to Trac for all recruiting managers to answer. •Few systems have introduced and implemented recruitment toolkits. 		
Develop and implement an improvement plan to eliminate pay gaps	K&M/Frimley/Surrey/HIOW BOB/Sussex		<ul style="list-style-type: none"> •Majority of Systems have published their Gender Pay Gap reports. •Some have published Ethnicity and Disability Pay Gap reports. •Most systems have implemented or in the final stages of have a flexible/agile/hybrid working policy in place. •Some have held awareness events. 		
Develop and implement an improvement plan to address health inequalities within the workforce	All		<ul style="list-style-type: none"> •Wellbeing conversations/toolkits are routinely taking place across all systems. •Some systems collaborating with partners to provide work experience for individuals with learning disabilities. •Systems implementing reasonable adjustment process, training and new policy (supported by NHSE funding). •Provided have access to EAP, psychological support, offer diverse range of health and wellbeing health checks. •Some providers have won the Inclusive and Safe Workplace Award and partnered with Scope to produce bespoke dual-branded physical and digital resources for Disabled staff. 		
Implement a comprehensive induction, onboarding and development programme for internationally-recruited staff.	All		<ul style="list-style-type: none"> •Onboarding support is available across the region for international recruits ranging from, induction booklets, events, trainings, development opportunities, buddy schemes, cost of living booklets. •Few systems across the region are offering award winning pastoral support and self-assessment. •Few systems are offering cultural awareness trainings, with some award-winning trusts across the region. •Some trusts have set up virtual support zones offering support to IEMs. 		
Create an environment that eliminates the conditions in which bullying, discrimination, harassment and physical violence at work occur	All		<ul style="list-style-type: none"> •Support available for staff across all systems including EAP and counselling services, mental health first aiders; FTSU and bullying, harassment, discrimination, hate crime., Prevention & Management of Violence and Aggression policies in place. •Programmes in place across systems to reduce racist violence and aggression incidents. •Few trusts have embedded microaggressions eLearning into My Learn. •Many awareness workshops/trainings/sessions across systems within the region. 		

Workstream: NHSE EDI Improvement Plan - HIAs

Submitted By: System Leads

Last updated: April 2024

Key System Achievements April 2024

- SPFT have won the Inclusive and Safe Workplace Award and partnered with Scope to produce bespoke dual-branded physical and digital resources for Disabled staff.
 - UHS inclusion score (People Promise Element) was one of two where the Trust is reporting a slightly better score than NHS average
 - ESHT have achieved the National Preceptorship Interim Quality Mark
 - NHS Sussex co-delivered a workshop on best practice approaches to Equality Impact Assessments with the Equality and Human Rights Commission at the NHSE Health Regulators Conference.
 - System wide focus group on inclusive and trauma informed comms templates and products to support reduction in violence and aggression
 - Several notable events locally and nationally including Sussex Anti-Racism Conference.
 - Completion of Just and Restorative Learning (Merseycare/Northumbria University 4 day) Programme – 15 leads from across the system completed training.
-
- Berkshire Healthcare – Anti-Racism Action Statement. Oxford Health Race Equality Improvement programme.
 - BOB system wide participation on SE Global Majority programme for Nurses, Midwives and AHPs. BOB wide CQ programme – 5 facilitators certified. Delivery plan being developed for 2024/25.
 - All Systems on track with implementing Mend the Gap recommendations.
 - OUH roll out Anchor Charter
 - Health and wellbeing dashboard at RBFT. Health Assured in the moment emotional support at Berkshire Healthcare.
 - NHS pastoral support quality award received by Berkshire Healthcare and Royal Berkshire Hospitals. Bespoke Induction programme for International Medical Graduates to be launched at Oxford Health.
 - OUH's No Excuses Campaign (3rd phase including Staff stories on impact of racial and sexualised abuse).
-
- ICB & BHFT continue facilitating a 'Mirror Board' of ICS staff to embed diversity of thought & lived experience in ICB Board meetings
 - ICB have implemented iterative Equality Impact Assessments and Inclusive Recruitment Toolkit alongside Equality Advocates and Staff Networks to ensure the "Organisational Change Programme" is fair and inclusive
 - FHFT have briefed recruitment agencies with their EDI commitments & facilitate around 200 apprentices across the organisation
 - SABP have already launched an EDI Action Plan, Recruitment Plan and Disability and Wellness Passport, and continue working on delivery and evaluation of these initiatives alongside implementation of Diversity Champions, Reverse Mentoring and other current workstreams.





National Strategic Advisory Groups and Examples of Good Practice and Ideas for Adoption

**Fortune Mhlanga – Regional Leads for CNO, CMidO Strategic
Advisory Group**

Pieter Joubert – AHP Strategic People Lead



CNO, CMidO SAG Leads and S.E Nursing Directorate Global Majority Programme

90 Day Challenge Event

30th April 2024

Dr Fortune Mhlanga:

Deputy Head of Nursing and Quality, Oxford Health NHS FT & SE Regional Lead for CNO, CMidO Strategic Advisory Group.



Martha Ugwu:

Head of Infection Prevention and Control, NHS Kent and Medway & SE Regional Lead for CNO, CMidO Strategic Advisory Group



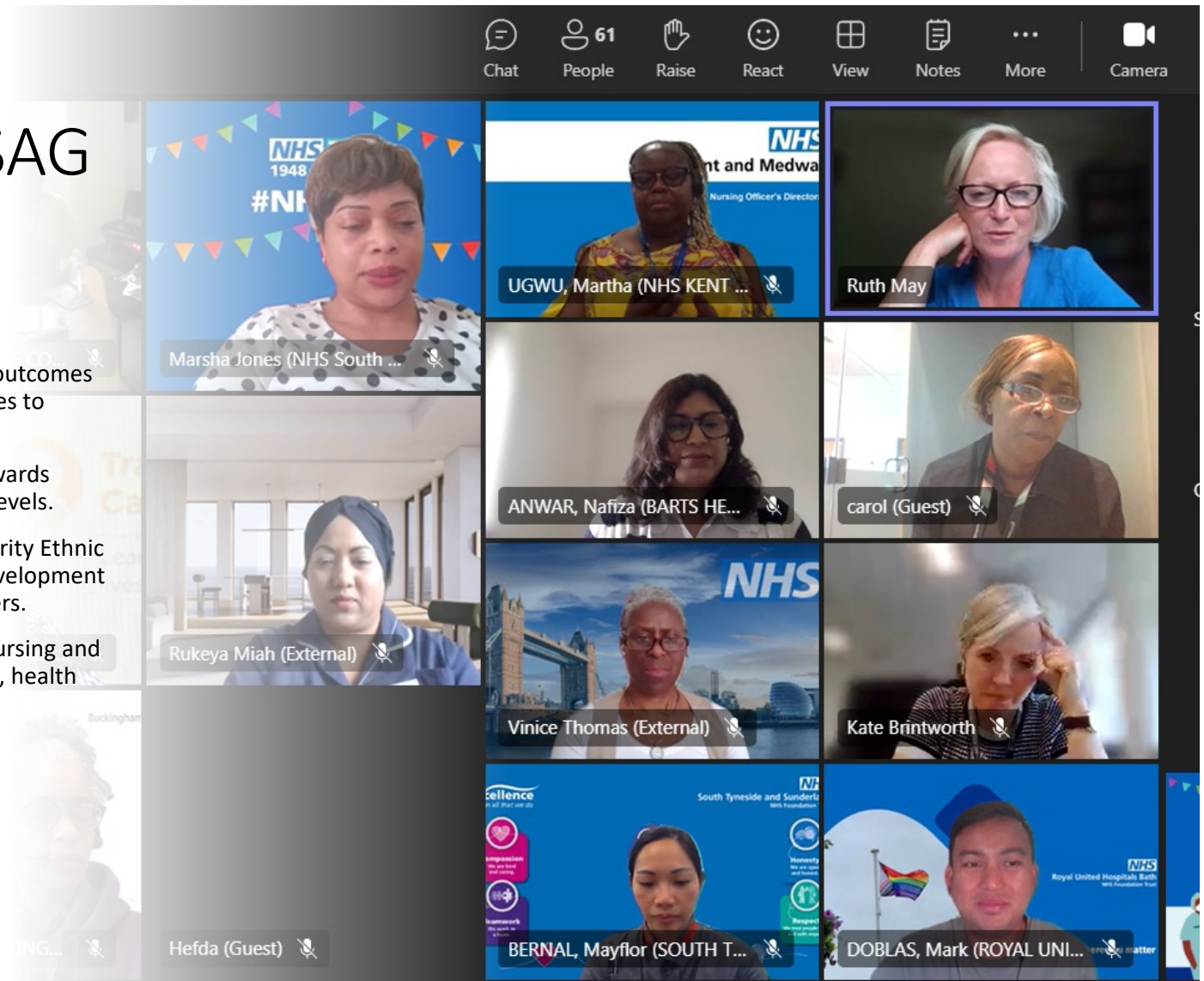
CNO, CMidO Strategic Advisory Group Aims

1. To advise the CNO & CMidO for England on strategic inclusive policies.
2. To provide a specific focus on race equality perspective at a strategic level to meet her/his priorities in the interests of all patients and users and the workforce.
3. To influence the delivery of policies and practices that impact on Black Minority Ethnic communities/workforce
4. To be aligned with the following CNO & CMidO Ethnic Minority national work streams including:
 - ❖ Protecting Staff
 - ❖ Engagement with staff and staff networks
 - ❖ Representation in decision making
 - ❖ Rehabilitation and recovery
 - ❖ Communications & media
5. Main point of contact for Nursing and Midwifery staff and other stakeholders in relation to race, equity, workforce, diversity and inclusion.



CNO, CMidO SAG Objectives

- To influence the work towards best outcomes for Black Minority Ethnic communities to reduce adverse variation.
- To influence, champion the work towards proportionate representation at all levels.
- To develop visible expert Black Minority Ethnic senior leadership and enable the development of future Black Minority Ethnic leaders.
- To raise relevant issues across the Nursing and Midwifery landscape within the NHS, health and social care, education and the independent sectors.



CNO, CMidO SAG Objectives Cont'd

- To actively engage with consultations, new initiatives for transformational change.
- To liaise with key partners such as NHS England, NMC, CQC, HEE, NHS Race & Health Observatory, NHS confederation etc. on emerging issues that could benefit Black Minority Ethnic staff groups. (**This is not an exhaustive list*)
- To communicate and highlight key areas of work and news items affecting Black Minority Ethnic communities/workforce and the group using the digital landscape e.g. e-bulletin, digital App, social media as well as an annual conference.



Professional and leadership development

Virtual Masterclass

NHS
England
South East
South East
Nursing Team

Aimed at:

**Band 5 & 6
Nurses and Midwives**
*from the global majority (Black, Asian
and Minority Ethnic communities)*

Register your interest
using the QR code



40 places per masterclass



**Thurs 14th
Sept 2023**

**Tues 17th Oct
2023**

9am- 4pm

Registration will close at 80 applications or 1 week before masterclass date. **Please ensure you have your line managers' agreement and ongoing support prior to application.**

Aims & Objectives...

- To offer time and space to think about and plan your development
- To learn more about leadership skills and hear from people with experience and expertise
- To get tips on how to develop your own toolkit for career progression
- To develop new networks and make professional connections

england.southe



So that we can offer this fantastic opportunity to a wide range of people, we will review

NHS
England
South East

Masterclass 14th September



A leadership story starts with you

What makes you - you?



**Experiential Learning & Mentoring:
What does this mean and what are the benefits?**

The power of networks!

Stefano Pochetti
Idris Gbadamosi
Crystalbell Atutonu
Pauline Abu
Nikolaos Tranka
Daniela Costa

14 September 2023

Pre-and post confidence levels:



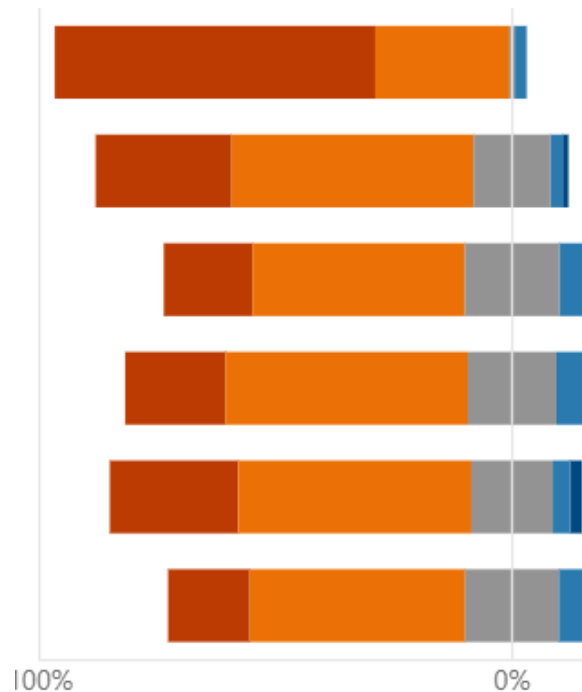
Professional Development

6. This section is about personal and professional development

[More Details](#)

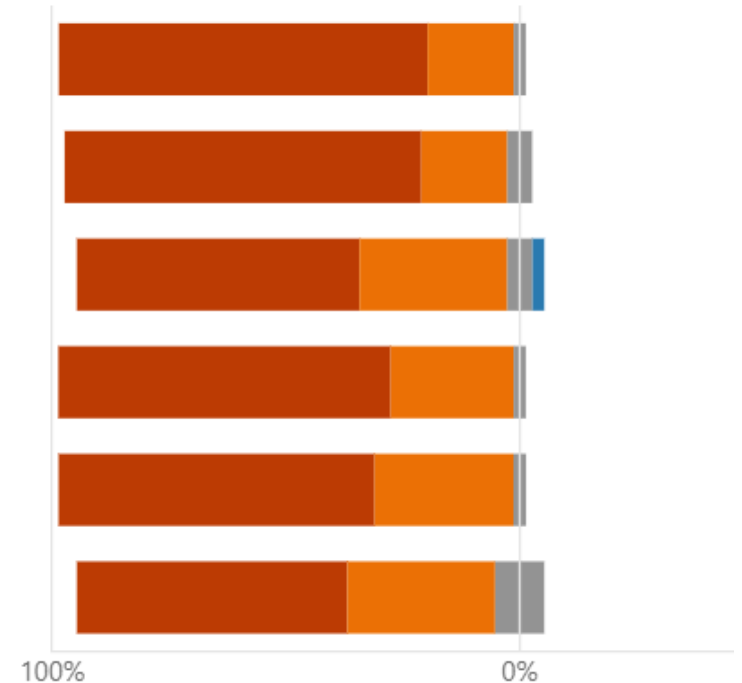
Pre-event

Strongly agree Disagree Strongly disagree



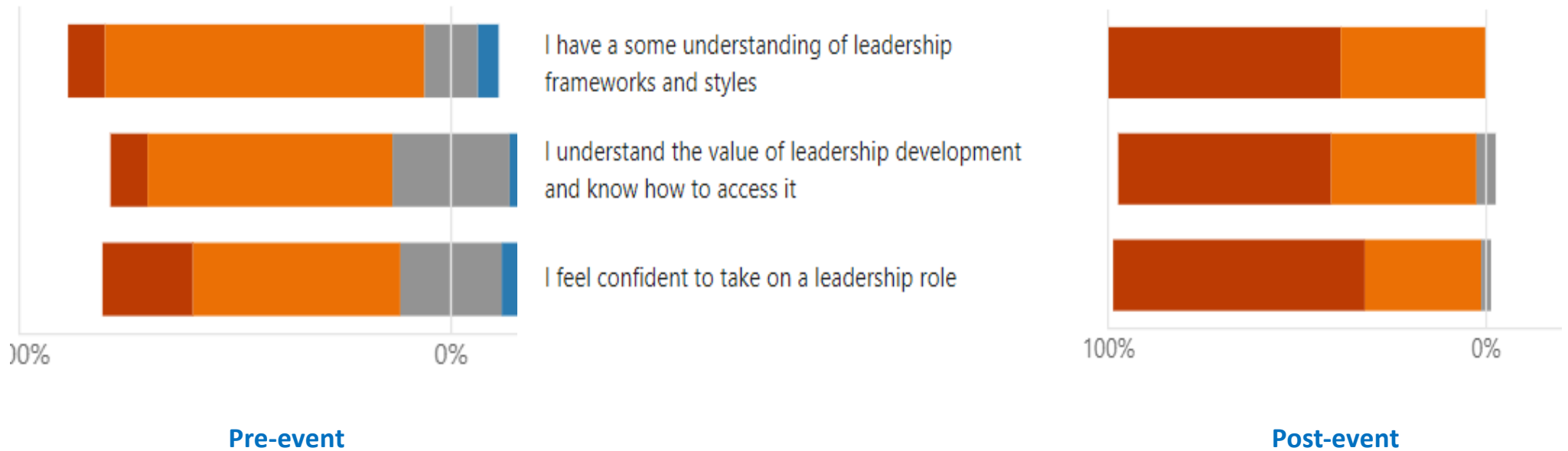
Post-event

Strongly agree Agree Neither agree nor disagree Disagree Strongly disagree



Pre-and post event confidence levels

■ Strongly agree
 ■ Agree
 ■ Neither agree nor disagree
 ■ Disagree
 ■ Strongly disagree



Some of the comments....

Thank you all. Fantastic program and a lot of useful golden nuggets to take away.really appreciated.

Thank you so much for this amazing course

Today has been very impactful for me, despite that I returned from a night shift today. The session has been very interactive and can't believe i was awake the whole session.

I can share in your emotions ***** , I sometimes get back from work and cry myself to sleep.

If it's possible can you contact me or let's create a contact group so we get to hangouts and distress over coffee

A good take away from this is to make sure to build up connection and approach the right connection. Progression doesn't mean a promotion but to pursue the path of the career you are passionate about- make way to develop even through your own efforts.

This just opens more opportunities who to ask for help and realise that people care and listen.

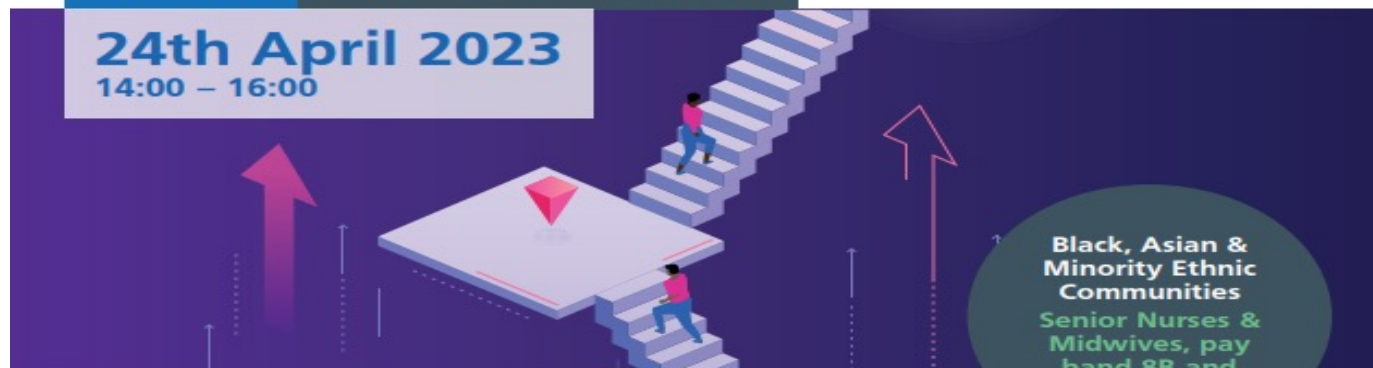
South East Senior Nurses & Midwives Network



BAME Senior Nurses & Midwives, pay band 8B and above

Event Reconnection

24th April 2023
14:00 – 16:00



Black, Asian &
Minority Ethnic
Communities
Senior Nurses &
Midwives, pay
band 8B and
above

We would like to invite you to reconnect with the Senior Nurses & Midwives Network

- **Understand** the barriers for career progression and strategically reduce them.
- **Support** you with personal needs that when met, will help you accelerate your career.
- **Psychological** safe space for you to grow and develop.

Having reviewed the data for the South East, although we have approx. 40% of BAME staff at band 5 level we have very little representation at executive levels. This is an aspiration for us to grow our BAME colleagues and increase diversity at all senior levels.

SE: Targeted interventions and support: Senior Nurses and Midwives

Talent Management in Action

- Increased ability to assess internal and external factors for career progression and talent management
- Consciously take opportunities for your own talent
- Take an inclusive lens to talent management

Topics covered:

The strategy -Opportunity cost

- *The emotions* - Expectations Vs satisfaction
- *The Psychology* - Locus of control
- *The plan*- Project Me

Narrative Storytelling Workshop

“To Make a change at work, tell yourself a different story”



Feedback Framework

A – Action

I – Impact

D – Do(*motivational*), (*developmental*)

Some of the feedback from the narrative storytelling session....



Will use this to create opportunities for using story telling to change attitudes and behaviour that will enhance the best work environment for all

Lovely workshop which I wish is available to more of us

Use my story to inspire and motivate in my leadership role

Use the techniques with my teams to further inspire them. Also use AID as a reflective tool to enable people I work with to find their own solutions

Thank you very much this was an enlightening day, both the content of the course but also the amazing people that were present and the inspiring stories they told

For more information contact:

Martha Ugwu –SAG Lead: martha.ugwu@nhs.net

Fortune Mhlanga-SAG Lead: fortune.mhlanga@oxfordhealth.nhs.uk

Wendy Keating-Programme Lead: wendy.keating@nhs.net

Nick Hubert- Business Support Administrator: nicholas.hubert@nhs.net

england.southeastglobalmajoritynetwork@nhs.net

Race Equality



We have an ambition to reduce inequalities across the workforce and drive change to increase the diversity of our registered and non-registered AHP workforce to best serve our communities – recognising that this is a journey.

Hampshire and Isle of Wight AHP Faculty – equality diversity and inclusion, a golden thread through our work



- We have a commitment to anti-racism in AHPs Deliver
- We are made up of 15 AHPs and value diversity. We help to amplify and celebrate those who are seldom heard, empowering them and others to overcome barriers in partnership.

- We recognise the need for individual and collective self-reflection, curiosity and action.

- As a system and AHP Faculty we have taken positive action at system wide events
- The AHP Faculty led the first AHP International Recruitment Collaborative within our system . Through this we worked to ensure a smooth transition and onboarding for our Internationally Educated (IE) AHPs
- Working with our IE AHPs and their line managers, cultural issues became more evident.
- Recognising the need we commissioned allyship training
- We also recognised that some of our professions lack diversity.
- We chose to fund Race Equality and IE AHP Fellowships – providing opportunities:
 - Improvement Projects
 - Develop talent and capabilities of individuals and across our system

SLTs – 5% GM

RCSLT report: Lack in confidence of services reaching out to under-represented groups in careers activity.

Create a community of influencers to raise the profile of SLT as a career among diverse ethnic communities.



George Mathew

Paramedics – 2.4% GM

Barriers to access education?

- Lack and inconsistency of data.
- Poor quality of the conversations
- Position of privilege

Develop and engage AHPs to collaborate to a padlet as an anti-racism and allyship resource toolkit.



Sophie Gay

Dietetics – 6.8% GM

- 70% of GM Dietitians are IE
- Identified good practice through use of Inclusive Recruitment toolkit and representation imagery

Create inclusive attraction and recruitment standards for dietetics/AHPs and share resources through a padlet.



Karishma Bajaria

D-Rad – 32.9% GM

- IE D-Rad leave at double the rate of DE D-Rad
- Limited participation in career progression activity

Recommendations to support applications and interviews, a development prospectus and mentoring



Gerald Lee

OT – 10.9% GM

IE OT and their supervisors experience of transition, induction and supervision

Transition standards: Supernumerary, induction, rotation, probation, communication and cultural training for supervisors and IE.



Adriana Sabou

We continue our journey; weaving the thread of EDI through all our work and building on the work of our fellows.

EDI is a core part of our careers' activity and reflected in our support worker strategy, with a commitment to recruit people from local communities, to better reflect the ethnic diversity of our local populations.

We continue to champion talent management and creating opportunities for our minoritized staff, whilst educating our workforce in collaboration with system partners, to increase confidence in discussing race and celebrate our diversity.

This is supported by close engagement of our ICB race equality leads in our AHP council activity.



pieter.joubert@nhs.n





Explaining The Afternoon Plans

Arend Welmers - Ninety Days



Plans for after lunch!

Ninety Days Leadership Challenge

Please note that for the after lunch activity we will be moving into groups as per the colour sticker you were give. Tables will be labelled as below. Please sit at your corresponding table. Thank you!

- Frimley – **Pink Table**
- Hampshire & Isle of Wight – **Purple Table**
- Kent & Medway – **Green Table**
- Surrey – **Yellow Table**
- BOB – **Blue Table**
- Sussex – **Red Table**
- NHS England – **Orange Table**



Hampshire and Isle of Wight



LUNCHTIME SESSION

Come and view our stand and a scenario from our Cultural Allyship Workshop

We are joined by our partners – Sim Comm Academy – who will be delivering a scenario from our Cultural Allyship Workshop, which we have developed and delivered to teams across Hampshire and Isle of Wight

Stand available all lunch time

Scenario start 12:45



Break for Lunch! Back at 1.30pm

South East Nursing Global Majority Programme

enablement framework for our skills staff
who are underrepresented.







C

Confidentiality

H

Honesty



Openness

R

Respect



Timing

L

Listen



Enjoy



Support





Reconvene & Afternoon Energiser

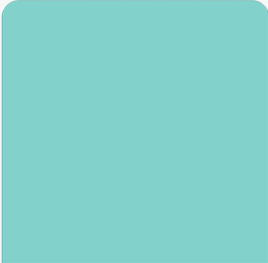
Mark Edgerton





Actions to Progress – Agreeing the 90 Day Challenge

90 Days Team – Facilitators

- Arend Welmers (Ninety Days)
 - Joan Saddler (NHS Confederation)
 - Raj Patel (Ninety Days)
 - Hilary Garratt (Ninety Days)
 - Molly Curzon (Ninety Days)
- 

CPSA 90-day Challenge



England
South East

Workout



In partnership with



Your CPSA 90-day Challenge



Challenge

If we had to improve the representation of Nurses, Midwives and Allied Health Professionals from the Global Majority across the SE in Agenda for Change Bands 8 and above by (**x%**) (or to **x** number) within 12 months and by an additional (**x** persons) within 90 days of today, how could we get it done?

Example Parameters:

- The integrity of the NHS national policy for EDI and Human Rights must be respected.
- Proposed solutions should reflect existing best practices.
- All anti-racism work is seen in the context of patient safety and staff wellbeing

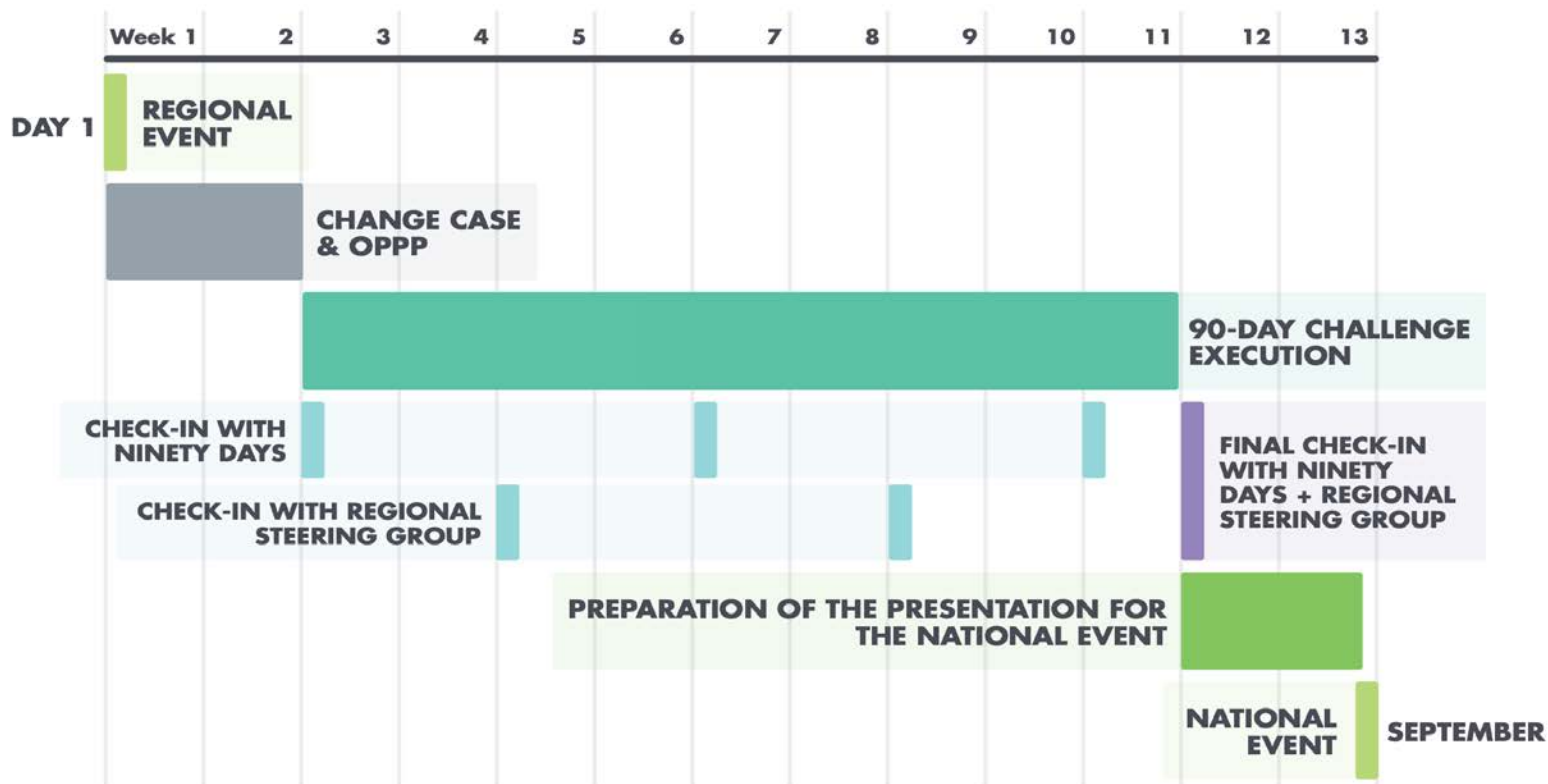
The CROW Model

 In partnership with 

Region: Group: Date:

C Challenge		Parameters: <ul style="list-style-type: none">••••
R Reality	What do you know about the situation?	
O Options	What are some possible solutions?	
W What Next?	What are your recommendations for action?	

The 90-Day Timeline





Close and Commitment

**Natalie Percival - Regional Director of Nursing-Professional
and System Development, NHS England South East**



Your feedback for us on today's event



Evaluation-SE Global Majority
Multi-Professional Leadership 90
Day Challenge Event



The image features a vibrant, abstract background composed of overlapping, semi-transparent geometric shapes in various colors including yellow, orange, red, purple, and teal. Each shape has a subtle, marbled texture. In the center of the composition is a large, solid white circle. Inside this circle, the words "THANK YOU" are written in a clean, black, sans-serif font, with "THANK" on the top line and "YOU" on the bottom line.

THANK
YOU