

Minority staff get worse deal

EXCLUSIVE Regional study reveals NHS organisations failing on race equality duties

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Widespread disadvantages faced by black and minority ethnic NHS staff have been laid bare in a stark analysis of recruitment, bullying, grievance and disciplinary rates.

In the first report of its kind, shared exclusively with *HSJ*, figures extracted from every trust in one region show the difficulties BME people face getting NHS jobs, and the disproportionate number involved in grievances once they are employed.

The *Race Equality Service Review* has taken the South East Coast BME Network eight months to complete, at times sparking a hostile reaction. The findings are seen by managers as broadly representative of other parts of the country.

They reveal BME people account for 31 per cent of those shortlisted for acute trust jobs but only 16 per cent of appointees. At mental health trusts only around a third of short-listed BME candidates get jobs and for PCTs it is half as many as are shortlisted.

Surrey and Borders Partnership trust chief executive Fiona Edwards said: "The results are striking and make difficult reading. We're looking at the way the recruitment system uses computers and whether it's

become depersonalised and not individually focused enough to maximise opportunities for everyone."

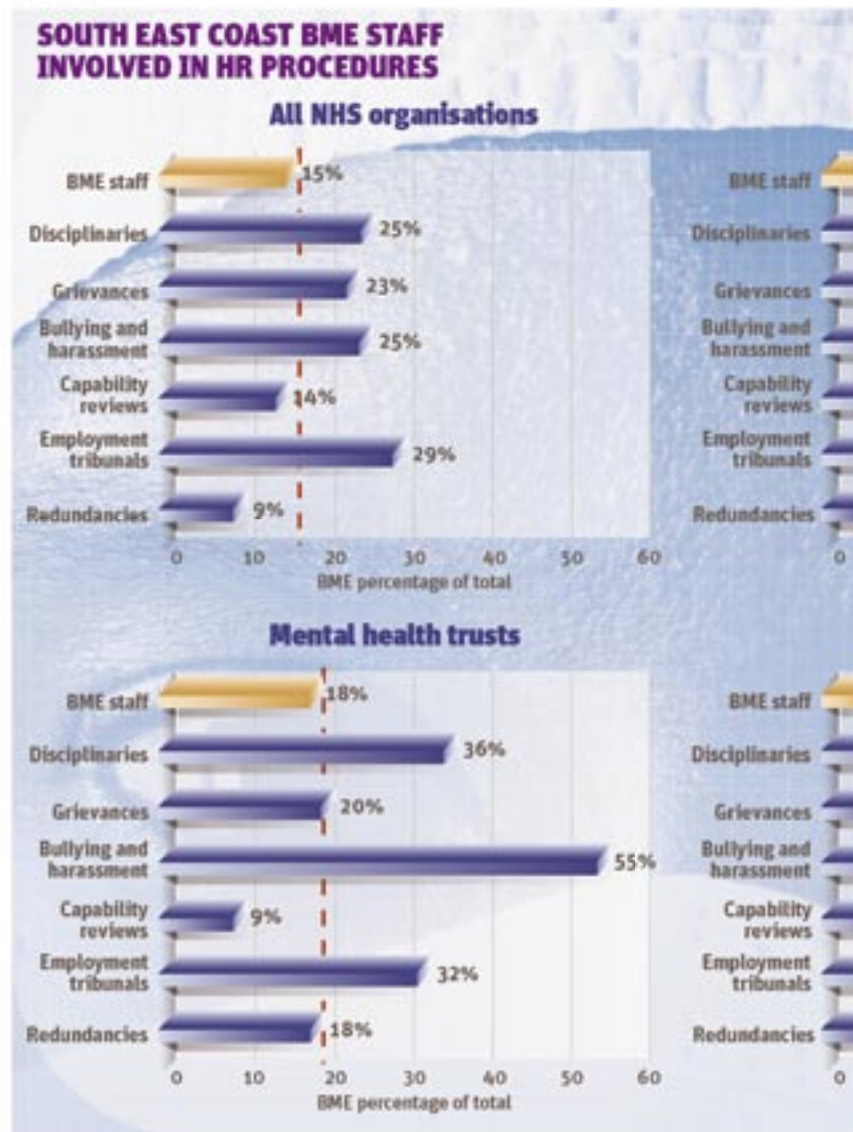
White managers need to ensure they are "culturally competent" and link equality in the workplace with their ability to provide good services to communities, she said.

Although BME people comprise 15 per cent of the workforce, they are involved in more than half the bullying and harassment cases in the region's mental health trusts. Overall, they are involved in 25 per cent of disciplinary cases.

NHS Employers is researching the link between BME staff and disciplinaries. Head of equality and diversity Carol Baxter said: "Our feedback from managers has been that dealing with cultural differences is an issue they need support and guidance on."

BME workers in acute trusts are 70 per cent more likely to lodge an employment tribunal claim than would be expected from their proportion of the workforce, but 63 per cent less likely to be made redundant.

Managers in Partnership chief executive Jon Restell said not being selected for redundancy may be seen as a disadvantage, as there was often a lot of money on offer. He said "determined leadership" was needed to address the problem.



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on jobs, pay and grievances



“Chief executives need to be seen as owning workforce and diversity,” he said, adding that the figures were likely to reflect those in London and parts of other regions.

The research shows major failings by NHS organisations on their race equality duties.

Of the region’s 24 acute trusts, mental health trusts and PCTs, 16 claimed to be complying with the Healthcare Commission’s core requirement to challenge discrimination, promote equality and respect human rights in 2006-07.

But in-depth analysis carried out by the BME Network, using the Healthcare Commission’s own assessment criteria, suggested all the organisations were failing.

All but nine organisations were failing to collect ethnic monitoring data for patients, even though only three officially admitted to failing the related standard in self-declarations for the health check ratings.

Just four provided evidence of engaging with BME communities.

Healthcare Commission chief executive Anna Walker said: “SHAs need to ask themselves where their trusts are on race equality, as it’s such an important issue.”

She called for trusts to recognise problems around race equality and to systematically collect workforce data. This year the commission will inspect 20 per cent of trusts on race equality and human rights.

Until now, evidence on the number of managers and trust board members from BME back-

BME STAFF IN THE NHS SOUTH COAST REGION

	% BME shortlisted	% BME appointed
Acute	31	16
Mental	37	13
PCT	16	8

Figures are arithmetic mean of all organisations in region that provided information

grounds has been patchy (“The same old faces”, page 22, 6 March).

In the South East Coast, the network found 3 per cent of the region’s 193 executive directors and 2.5 per cent of the 160 non-executive directors were BME. In the SHA area, 10.5 per cent of residents are estimated to be BME. Only 6 per cent of senior managers are BME and the biggest proportion of BME staff are clustered at *Agenda for Change* band five.

Kent and Medway Partnership trust social care director James Sinclair, responsible for equality and diversity, said: “At the beginning of the management ladder you see a drop-off of people from ethnic minorities getting posts.” The report identified “real weaknesses”, he said.

The trust is now doing its own in-depth analysis, investing in a new post focusing on equality and diversity, and donating £10,000 to the BME Network. The local PCT Alliance has also pledged £40,000.

Rob Berkeley, deputy director of the Runnymede Trust, a think tank

that promotes race equality, said: “The patterns are broad enough to suggest it’s about institutional racism. The NHS has been slower [than other sectors] to address it.” He said positive action was needed to ensure staff were equipped to apply for top posts.

The report makes 36 recommendations, such as all organisations amending their declarations to the Healthcare Commission and the SHA using the findings to inform its workforce strategy.

Vivienne Lyfar-Cissé, South East Coast BME Network chair and author of the report, said: “We are encouraged that NHS organisations have expressed a desire to work in partnership, using the recommendations as the starting point.

“We hope that all NHS organisations in the region will eventually do the same so that we can develop a regional strategy for race equality that will be of benefit to all BME staff and patients in the region.”

NHS South East Coast chief executive Candy Morris said: “We recognise that we need to do more to address the needs of BME patients and members of the public as well as provide greater leadership opportunities for BME staff members.”

A DH spokesman said: “The *Race Equality Service Review* shows there are still areas within the medical profession that are cause for concern.” Chief medical officer Liam Donaldson is leading work to address this, he added.

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