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QUEENS NURSE 2014
BME PIONEER, (HSJ) 2013
HEALTH VISITOR OF THE YEAR 2012
MARY SEACOLE SCHOLAR 2010
THE IMPACT OF THE COALITION GOVERNMENT’S HEALTH REFORMS ON BLACK MINORITY ETHNIC STAFF IN THE NATIONAL HEALTH SERVICE – A FOLLOW-UP STUDY
Background to the study

- **Initial study looked at:**
  - Positive contributions of BME NHS staff in leadership positions to the delivery of health care
  - 21 participants took part in the original study
  - DVD created showcasing ethnic backgrounds, occupation, education attainment, gender
  - Portrayed positive images of BME staff
  - Captured career stories/journeys
Background to the study

- Key to maintaining/progressing career
- Support and barriers
- Continuous professional development
- Motivating factors/opportunities
- Positive attitude
- Equality/diversity training
- use of Legislation/policy
The follow-up study

- Semi-structured questionnaires were sent electronically to all previous participants
- 20 out of 21 returned
- 1 participant decline participation
The positive outcomes of the follow-up study

- Passionate about the care they provide
- Opportunistic about the future
- Prepared to self sacrifice to develop themselves
  - Self funding
  - Study in own time
  - Innovative ways of achieving aims/goals
  - Loyal/dedicated to the health service
  - Talented
  - Continuous professional development
  - ambitious
The negative outcomes

- Overlooked when applying for jobs
- Less opportunity for promotion
- Increased risk of redundancy
- Given more challenging assignments
- Career development often obstructed
- Denied access to professional or BME networks
How the government reforms have impacted BME staff

- BME staff face multiple disadvantages
  - Disproportionate representation in low paid jobs
  - Most likely to occupy insecure employment
  - Face a variety of barriers to finding/maintaining a job
  - Most likely to face redundancy
  - Fewer senior BME in leadership positions
Occupation Changes since participation in the original study

- Promotion
- Unchanged
- Retired
Explanations provided by participants for opting for early retirement

- Retirement
  - Job no longer enjoyable
  - Job became too target driven and not patient focussed
  - Did not want to compromise Patient care
  - Understaffed
  - Stressful environment
  - Did not feel valued by organisation/political party
  - Fragmentation of the NHS
  - Pressure of maintaining quality on limited resources
  - Climate of fear exists
Participants reasons for not changing jobs/organisation

- Little or no opportunity for promotion
- Don’t want to lose benefits
- Enjoy their job and organisation
- Receiving support from colleagues/managers
- Access to good network
- Health reforms have not had a direct impact on them
participants reasons for embracing change and applying for promotion

- Positive attitude
- Don’t see barriers only challenges
- Self motivation, hard work & determination
- Prepared to move where the work is
- Family support enable progress
- BME networks/mentors support
- Self development & self sacrifice
- Accessing role models
- Keep ahead of change/opportunities
Factors that enable BME leadership in the NHS

- Senior leaders responsible for developing BME leadership
- BME having access to leadership programmes
- Greater access to BME role models
- Cultural range that values/supports BME leadership
- More transparency in career information/recruitment/selection
- Rigour in collecting data and reviewing outcomes of BME applicants who are not successful at securing an interview or job offer
- Raise the profile of BME leaders/role models.