



EAST OF ENGLAND ETHNIC MINORITY MATERNITY AND NEONATAL LEADERSHIP DEVELOPMENT PROGRAMME

APRIL 2024

Summary report

Terminologies

Please note there are various terminologies being used in the UK to refer Black, Asian and other ethnic groups.

- BME (black and minority ethnic)
- BAME (black, Asian and minority ethnic)
- Ethnic minorities (all ethnic groups except the white British group. Ethnic minorities include white minorities, such as Gypsy, Roma and Irish Traveller groups. [LINK](#))
- Global majority a collective term for people of Indigenous, African, Asian, or Latin American descent, who constitute approximately 85 percent of the global population.

For the purpose of this Change Case will refer to the participants as ethnic minority following the government guidance published in 2021 or Global majority.

Acknowledging that only 13.5% of the East of England's population is ethnically diverse, and the remaining 86.5% White (Fact-sheet REGIONAL INSIGHTS ON RACE March 2023).

Overview summary

The EoE Staff Development Programme was designed to support band 6 and 7 maternity and neonatal staff from ethnic minority groups to move into leadership roles. It is hoped that having more leaders from ethnic minority groups will help to address the very clear inequities that exist based on the Workforce Race Equality Standard Data Analysis Reports 20/2021, Turning the Tide BAME Maternity workforce report 2020, What we need to thrive ASAM and SoAC report 2021, East of England Maternity and Neonatal Staff Survey (2021) and Suffolk and North-East Essex LMNS staff survey (2020).

The EoE Staff Development Programme has been developed based on the WRES reports and EoE Maternity and Neonatal Staff Survey (2021) and other highlighted reports above, with the aim to address to systematic racism, discrimination, bullying, and harassment experienced by Black, Asian and other ethnic minority staff especially in relation to

- Cultural acceptance – integration & belonging
- Job interviews
- Recruitment and selection processes
- Shadowing senior leaders
- Reverse mentoring/reciprocal mentoring
- Stretch opportunities (tasks or projects that are slightly beyond your current skill or knowledge level and therefore allow you to 'stretch' by improving your capabilities e.g. secondments, intro roles, shadowing)

Clinical area relevant to

- Maternity and Neonatal Patient Safety – Ensuring that people have a positive experience and outcome of care as a patient/service user/staff.
- Health & Wellbeing – workforce recruitment & retention, training, leadership development, addressing systematic racism and discrimination.

Care setting

- Across the region (East of England) – Maternity and Neonatal services within Trusts

Cross cutting themes

- Leadership
- Workforce
- Quality improvement training
- Lived experience.
- Digital and/or social media

Partner(s) involved

East of England Maternity & Neonatal Ethnic Minority

Workforce working group included representation from;

- East of England Regional Maternity Team - NHS England
- Health Innovation East
- Leadership Academy – East of England
- National Maternity Lead for Equality - CMidO Team - NHS England
- East of England Neonatal ODN
- Association of South Asian Midwives (ASAM)
- International Recruitment Manager - NHS England - East of England

TRUSTS & LMNS

- East and North Hertfordshire NHS Trust
- Mid and South Essex LMNS
- Regional Service User Voice & Co-Chair Milton Keynes MVP
- Rosie Maternity Hospital, Cambridge University Hospital NHS Foundation Trust
- Neonatal Nurse - Colchester Hospital
- Norfolk and Waveney LMNS
- Clinical Lead Bedfordshire, Luton and Milton Keynes Clinical Commissioning Group & BLMK Integrated Care System
- EDI Lead - North West Anglia NHS Foundation Trust (NWAFT)
- International midwife recruits Midwife lead – Milton Keynes

Summary of the innovation and the problem it aimed to solve

The East of England Ethnic Minority Maternity and Neonatal Leadership Development Programme has been designed to support band 6 and 7's to move into leadership roles or stretched assignments.

The East of England WRES Midwifery data (2020) found that an overall of 55.6% BME staff believed that the trust provides equal opportunities for career progression or promotion. Unfortunately, only 26.7% of black midwifery staff believed that the trust provides equal opportunities for career progression or promotion. Furthermore, the East of England WRES Midwifery data in (2020) found that 40% of Black staff experienced discrimination from a manager/team leader or colleagues in the last 12 months.

Based on the East of England Maternity and Neonatal Staff Survey (2021) the length of time in current banding was 5 months – 16 years in the current Band 6 role.

What has the project involve/what work been undertaken?

The development programme was developed by the East of England Maternity & Neonatal Ethnic Minority Workforce working group that was established in November 2021. The group membership included representation from each Local Maternity & Neonatal System as well as some Trusts in the East. The other organisation membership included NHS England - Regional Maternity Team, Health Innovation East, Leadership Academy, Royal College of Midwives, National Maternity Lead for Equality - NHS England, Association of South Asian Midwives (ASAM), Neonatal ODN & Regional Service User Voice & Co-Chair Milton Keynes MVP.

As this was a pilot project, some challenges included;

1. Cohort having little or no protected time to do additional activities linked to the leadership development programme e.g. quality improvement projects.
2. The fast pace of capacity and capability building to support the Cohort by the programme manager e.g. set up and facilitate each session delivered by invited speakers, one to one catch ups with some of the participants to address and support challenges during the 6 months programme.
3. Changing a quality improvement session from virtual Microsoft teams to face-to-face during the programme. Timely response to the learning needs of the participants and requests for better learning environment and networking.

What activities were undertaken?

The programme was delivered over a six-month period (May to October 2023).

Sessions ran full day fortnightly

The enrolled participants learnt through various invited speakers and workshops about;

- Leadership and Quality Improvement skills
- To adopt a psychologically healthy and safe approach within the workplace
- Dealing with Imposter Syndrome
- Freedom to speak up
- Addressing bias and racism in the workplace
- Building inclusive teams
- Collaboration skills and creating success - co-production with service users and voluntary sector organisations.
- Effective conversations

All participants were encouraged access and participant in

- Healthcare Leadership Model 360 diagnostic tool for personal leadership development – commissioned by the Leadership Academy.
- Coaching session/s via the Career and Resource Portal (Leadership Academy)
- Have meetings with a Sponsor within their Trust
- Write reflective account of their leadership journey and summary of their Quality Improvement project.

What adoption and spread or improvement methodology was used, if any?

5 Step Approach to spread and adoption

- Analyse the original innovation/initiative – Reflection about the programme, benefits and outcomes.
- Spread the message - Shortlisted for Outstanding Achievement of the Year award in 2023 National BAME Health and Care Awards. Raising awards about the programme at forums and with regional colleagues, other influential leaders and individuals and universities.
- Get ready to adopt – Now adopted for the nurses, AHP and social care staff, programme started early March 2024. Working closing with the EDI Regional team – NHS England (System transformation Leaders) and EoE CNO CMidO AHP BME Delivery group to review the readiness of the Trusts and ICS, and support offer.
- Adapt and implement – The leadership programme has been adopted to the needs of nurses, AHP and social care staff. Over 181 staff applied to be on the programme, we offered only 45 funded spaces. The programme manager will continue to work collaboratively with people and organisations to get expert speakers, support and networking opportunities.
- Sustain the innovation – Secure continues funding to make it a integrated way of learning and developing for all staff in the region in particular ethnic minority staff.

Outcomes and Impacts

Applications & participants	Start of the programme May 2023	End of the programme October 2023
Midwives	20	15
Nurses working in maternity	1	1
Neonatal Nurses	3	2
Middle Grade doctors	2	1
TOTAL	26	19

The programme has met most of its objectives, please see the summary section for details of objectives achieved.

A objective that we recognise has not been fully adopted across the region and in maternity and neonatal services is the Promotion of non-discriminatory and anti-racism practices in job recruitment procedures (e.g., selection and interview process) using the East of England Anti-Racism strategy & and No More Tick boxes. The adoption of these will add to address systematic racism and discrimination. Therefore improve race equality across the maternity and neonatal workforce.

Outcomes and Impacts

	Banding at start of programme? (May 2023)	Banding at the end of programme? (October 2023)
1	6	7
2	6	7
3	Registrar	Senior registrar
4	6	7
5	6	7

	BAND start of programme (May 2023)	May 2024
1	6	Moved to Trusts
2	6	Band 7 Labour Ward Coordinator
3	6	Band 7 EDI Lead Maternity unit & part time University Lecturer
4	5	Band 6
5	7	Registered nonprofit organisation
6	6	Band 7 Lead Midwife for Audit and Guidelines
7	6	Now Co-Chairing regional Equity group
8	6	Registered non-profit organisation
9	6	Band 7 Neonatal Sister
10	6	Band 7 Neonatal Outreach
11	6	Band 7 Practice Education Midwife

There has been more promotions since one midwife early July 2024 was promoted from Band 6 to Band 7 Labour Ward Coordinator and two midwives registered a non-governmental organisation that provides pre-conceptual and perinatal support up to one year post birth <https://www.mamasembrace.co.uk/> . This was part of their improvement project and has launched in Cambridge and Peterborough. Seven staff remained in the same positions at the time of this report being written.

Breakdown of Trust applications received

These were

- Seven midwives from NWAFT Trust (North West Anglia Foundation Trust)
- Two midwives & one Neonatal Nurse from Addenbrookes Hospital
- One midwife from West Suffolk Hospital
- One midwife from Milton Keynes Hospital
- One midwife, One nurse working on maternity, One neonatal nurse from Princess Alexandra Hospital
- One medical doctor & two midwives ENHT (East & North Herts NHS Trust)
- One midwife from West Hertfordshire Hospital

Unfortunately for this programme there were no interest or applications received from NNUH, JPUH, QEHL, Ipswich, Colchester, Luton & Dunstable, Bedford, Broomfield, Southend and Basildon.

This year, 2024 we have worked closely with key stakeholders including the Regional Maternity Team and the Regional Professional Midwifery Advocate & Maternity Retention Manager to utilise all platforms and encourage applications from across the region especially areas we have not previously received applications. This will be evaluated as part of the commissioned Reverse Mentoring and Elevate programmes later on this year.

What spread has been achieved or is planned?

The programme was shortlisted for Outstanding Achievement of the year award in the 2023 National BAME Health and Care Awards and off the back of its overall success the programme is now being adapted in the East of England region.

The programme has already spread to the nursing, AHP and social care staff. The East of England Ethnic Minority Nurses, AHP and Social Care Leadership Development programme launched 5th March 2024. A total of 183 applications were received and the cohort has 45 participants.

Next steps

- Support and encourage applications for the national funded Reverse Mentoring and Elevate Programmes. Each region had allocated spaces and great uptake from East of England both ethnic minorities and white maternity and neonatal staff.
- Secure future funding to continue delivery of this programme or similar across the region or ICS footprint.

Quotes from participants

"I can honestly say all the speakers have been brilliant. Even when I didn't think I was learning anything, situations would come up later where I could apply the knowledge that was being taught."

"The speakers are all knowledgeable, they've helped me have a thorough understanding about leadership.

I now have an understanding how management works as well as the need for continuous personal and professional development."

"Thank you to the facilitators, they paved the foundation for this development opportunity."

"They were all amazing, but it would have been great if it were all in person."

"Interesting to hear EDI development relevant to my local area."

"Great mixture of speakers sharing their own leadership journeys, learning of new concepts and how to develop own leadership as well as practical skills of coaching and carrying out QI project."

"I have just secured a job as EDI lead for thirty hours a week, this job is at band 7. I have also secured another post as Lecturer of Midwifery for one day a week. Prior to starting on this development course I had been a band 6 for the last 13 years. This program has really enhanced my confidence and opportunities to networking".

What opportunities have you had or stepped forward to do during the last 6 months in the workplace/Trust?

(for example presentations, attending a board meeting, secondment, shadowing, involvement in leading a project or set up a service).

"I have been able to get in contact with the Trust cultural lead."

"I have joined another QI project as well as the one we have to do for the course."

"Updated my CV Looking for other job opportunities online."

"Attending unit meetings with the Divisional manager, Head of Midwifery and other senior management staff."

"I've been able to part take in other leadership work. Presenting at meetings, and chairing meetings. Certainly, observed that I am putting myself forward more."

"I have become a part of the Diversity and Inclusion panellist at my trust and I am now looking at applying for job opportunities that arise in my trust."

"Shadowing opportunities. Presentations"

"I have completed a departmental audit and also presented my findings at a departmental Clinical Governance meeting."

"Leading my first QI project Presenting 1.5 hour teaching session"

Summary

This report shows the benefits the cohort received in participating in this programme. These included building a network of connections, an improved understanding of their personal leadership style through the 360 feedback. There was also development by enhancing their understanding of quality improvement and the ability to support/lead QI projects. Jones et al (2019) states that when we engage clinicians in quality improvement, it is a chance to improve care, develop leadership, presentation and time management skills. Importantly, it gives the clinician an opportunity to build relationships with colleagues in the organisation they work (Jones et al, 2019).

The six months leadership development programme built the participants confidence in tackling real workplace issues and understanding how to look after their wellbeing as well as accessing groups/networks and resources that can support them.

Based on the feedback we believe there was an increased awareness of the opportunities available within maternity and neonatal services, including the tools, techniques, and people that will help them to progress in their career.

The impact: One of our objectives was to empower participants and support Trusts/LMNS to have an increased representation of Ethnic Minorities in Maternity and Neonatal Workforce leadership. Our data showed that out of a total 19 participants who completed the programme, 12 of them have moved up a banding or grade or stretched opportunity within the last 12 months.

Another objective was to ensure and help support equality and improve experiences for all maternity and neonatal staff especially those from Black, Asian, and Mixed-Ethnic groups. The free text feedback shows that for many of the participants their experience improved greatly by just taking time to refocus on themselves and develop. There is a chance that this experience has contributed positively to staff retention, especially for those promoted in their local Trusts. Unfortunately, two participants shared verbally that their work settings was not going to contribute positively to their career. Therefore took the decision to seek jobs out of region to improve their workplace experience.

Our final objective was to support the implementation of the published NHSE/I Equity and Equality guidance - Improving race equality across the NHS for all within the Maternity and Neonatal Workforce. The development and delivery of this programme was done in collaboration with the working group, Chief Midwife and National Maternity Lead for Equality. This ensured there was clear accountability and governance in relation to race equity and workforce.

Although our numbers for the programme were low however we believe this was a start in making positive changes in individuals to remain in the profession and within Trusts, especially with retention.

We want to appreciate and thank all the organisations/speakers who supported the delivery of the programme.

- Wendy Olayiwola BEM, RN, RM.- National Maternity Lead for Equality – NHS England
- Wendy Matthews OBE- Regional Chief Midwife, Director of Nursing, East of England – NHS England
- Katie Cullum - Lead Nurse - Innovation and Quality Improvement - East of England Neonatal ODN
- Julie Dynes-Conner & Amber Ramans-Harborough - Leadership and Lifelong Learning (Leadership Academy)– East of England
- Marsha Jones - Deputy Chief Nurse - Milton Keynes University Hospital NHS Foundation Trust Chair of the Society of African and Caribbean Midwives (SoAC) Founder member of the Caribbean Nurses and Midwives Association (CNMA) UK; Director of the Jamaica Coalition Against Domestic Violence (JCADV)
- Caroline Angel – Director of Patient Safety Collaborative -Health Innovation East
- Anneliese Hillyer-Thake - Head of Nursing Quality and Safeguarding, Regional Safeguarding Lead (RSL East) NHS England
- Nafiza Anwar Director and Co-Founder, Association of South Asian Midwives
- Dr Jag Ahluwalia Chief Clinical Officer - Health Innovation East
- Dr Crispen Sachikonye - Cohort Director Nye Bevan and Anderson Leadership programmes.
- Faiza Rehman - Managing Director of Raham Project
- Mo (National MVP)
- Annelies Hopkins & Martha Leung - Bliss Baby Charity
- Rachel Heathcock - Project Manager - East of England Local Government Association
- Teri Gavin- Jones Senior Clinical Lead - Suffolk and North East Essex ICB
- Jennifer Izekor - Chief Executive Officer - Above Difference
- 3D Coaching

Report written by

Dr Jasmine Leonce

Consultant Obstetrician - Lister Hospital

National Maternity Improvement Advisor – NHS England

&

Tendai Nzirawa FRCN

Maternity Clinical Improvement Lead - Health Innovation East

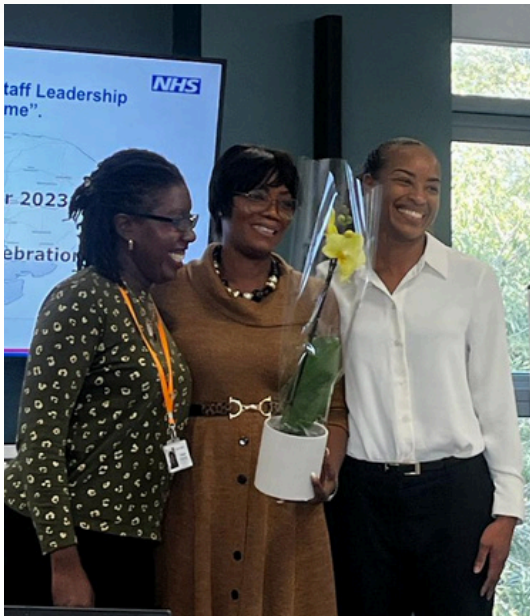
Fellow EoE CNO CMidO BME Strategy Advisory Group

Neonatal Nurses Association Executive member

Thank you to Health Education England - East of England
(now WTE - Workforce, Training and Education NHS England) for funding this programme.

References

1. Anwar, N., et al. (2021). What we need to thrive: Experiences of ethnically marginalised midwifery professionals in the workplace.. [Online]. . Last Updated: May 2021. Available at: <https://static1.squarespace.com/static/5fc52bc7cf8c754046992e/t/6092d7853bb4505b999ac766/162023616> [Accessed 16 April 2024].
2. Factsheet REGIONAL INSIGHTS ON RACE March 2023 - Business in the Community: The Prince's Responsible Business Network
3. Jones B, Vaux E and Olsson-Brown (2019) How to get started in quality improvement. BMJ 2019;364:k5408 doi: <https://doi.org/10.1136/bmj.k5437>
4. NHS England (2021) Equity and equality: Guidance for local maternity systems <https://www.england.nhs.uk/publication/equity-and-equality-guidance-for-local-maternity-systems/>
5. NHS England (2022) Combatting racial discrimination against minority ethnic nurses, midwives and nursing associates (guidance) <https://www.england.nhs.uk/publication/combating-racial-discrimination-against-minority-ethnic-nurses-midwives-and-nursing-associates/>
6. NHS. (2022). NHS Workforce Race Equality Standard: 2021 data analysis and report for NHS trusts. [Online]. www.england.nhs.uk. Last Updated: March 2022. Available at: <https://www.england.nhs.uk/wp-content/uploads/2022/04/Workforce-Race-Equality-Standard-report-2021-.pdf>. [Accessed 16 April 2024].
7. NHS. (2023). NHS Pay and Benefits. [Online]. <https://www.healthcareers.nhs.uk/working-health/working-nhs/nhs-pay-and-benefits>. Last Updated: April 2023. Available at: <https://www.healthcareers.nhs.uk/working-health/working-nhs/nhs-pay-and-benefits/agenda-change-pay-rates> [Accessed 16 April 2024].
8. NHS England (2023) NHS equality, diversity and inclusion (EDI) improvement plan <https://www.england.nhs.uk/publication/nhs-edi-improvement-plan/>



End of Programme Celebration day - October 2023

Supported and attended by national & regional senior leaders

- Wendy Olayiwola BEM, RN, RM.- National Maternity Lead for Equality – NHS England
- Wendy Matthews OBE- Regional Chief Midwife, Director of Nursing, East of England – NHS England
- Tendai Ndongwe - Deputy Head of EDI Equality, Diversity and Inclusion - Workforce, Training and Education Directorate NHS England
- Kirsty Cater Senior Nursing and Midwifery Clinical Lead WTE NHS England (former Deputy Chief Midwife)
- Christina Massey - Quality Improvement Manager - Regional Maternity Team - East of England - NHS England



End of Programme Celebration day - October 2023