

NHS Board Meeting  
27 January 2021

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**SUBJECT: ENGAGING WITH AND SUPPORTING BLACK, ASIAN AND MINORITY ETHNIC (BAME) STAFF**

### 1. PURPOSE

This paper is coming to the Board: for approval

For approval	<input checked="" type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input type="checkbox"/>
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### 2. ROUTE TO THE BOARD

Initial feedback from this work has been discussed at the Staff Governance Committee

Prepared	<input type="checkbox"/>	Reviewed	<input type="checkbox"/>	Endorsed	<input type="checkbox"/>
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### 3. SUMMARY OF KEY ISSUES

This paper provides an update on actions and progress relating to the development of a Black, Asian and Ethnic Minorities (BAME) Forum for staff working in NHS Lanarkshire. The paper also provides an update on the collation of;

- BAME Survey Analysis
- BAME staff data
- Patient data and
- Risk assessments for our Black, Asian and Minority Ethnic (BAME) staff.

Each of these actions were identified in letters received from:

- John Connaghan, Interim Chief Executive, NHS Scotland on 23rd June 2020 and
- Gillian Russell, Director, Health Workforce, Leadership & Service Reform Directorate (Scottish Government), 13th July 2020.

#### 3.1 Background

As an organisation, NHS Lanarkshire recognises and values all staff and recognises the importance of the health and wellbeing of all staff. There is plethora of evidence that there has been a disproportionate impact of Covid-19 on NHS workers from BAME backgrounds, and has been both locally and nationally recognised as an area of great concern. The evidence has also shown that the systemic issues and experiences of racial discrimination has made it more difficult for BAME colleagues to raise concerns and be heard. NHS Lanarkshire, in looking to address and hear about our BAME staff experiences, ran a number of online forums for BAME staff to discuss their experiences of both Covid-19 and their general experience as a member of NHS Lanarkshire staff.

### 3.2 BAME Staff Survey analysis

#### Supporting BAME Staff

The Board approved an initial paper submitted on 29<sup>th</sup> July 2020 to host a series of planned online engagement forums. These forums were advertised regularly over a three-week period to encourage participation through the Staff Brief.

A total of four interactive, online, engagement forums were held during September 2020. The sessions aimed to understand how inequalities were experienced by staff, including the impact of Covid-19. Initially, some articulated that they were unsure of attending the forum, however the opportunity to discuss issues in a ‘safe space’ and positive feedback encouraged all participants to contribute to the discussion and support the development of the questionnaire design.

The key points generated a number of themes that were applied to a subsequent questionnaire. The questionnaire was emailed to all known BAME staff on 30<sup>th</sup> October 2020, advertised in staff and site bulletins with a return rate of 265.

Each forum lasted between 90 to 120 minutes and were hosted by the Board Chair of NHS Lanarkshire Neena Mahal, supported by Lillian Macer, Employee Director, Kirsty Cole, Head of Organisational Development and Hina Sheikh, Equality and Diversity Manager.

#### Analysis of BAME Staff Questionnaire

The BAME staff questionnaire was distributed by email to staff who had previously provided ethnicity data to HR, and was shared more widely across the organisation through our communications team briefings and ‘request’ emails to share with colleagues throughout the organisation. Below is a brief analysis of the key themes, with actions and progress updates. A more detailed analysis and commentary for each of the survey questions is provided in Appendix 1.

#### Theme 1. Risk Assessments

Given the differential impact of Covid-19 on BAME staff, the following was reported; 66% (155) of staff reported an awareness of the need to complete a risk assessment, 44% (144) were offered a risk assessment, 15% (35) requested a risk assessment and 8% (19) were referred for a risk assessment by their manager. This question was completed by 235 of the 265 respondents. Please note that this question included more than one response option where some participants may have selected more than one response.

Actions	Progress
Review and update the current communications process around risk assessment	All covid related calls to helpline are now collated to clearly identify BAME staff query and categorised by topic. Should excess calls be received on any particular issue, FAQs/specific Comms will be considered to provide wide response to queries received. Data will be reported quarterly at Staff Governance Committee.

	<p>Sample (36) review undertaken in September re BAME staff OH consultations to determine commonalities of concerns and ensure consistent advice and signposting given. OH recording systems adjusted to ensure specific BAME staff issue capture.</p> <p>Regular communications, via staff/site bulletins are released regarding importance of risk assessment for all. OHS to deliver targeted messages to BAME staff issued in September 20 and planned for January 21.</p>
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## Theme 2. BAME Staff Experience

Staff were asked to rate their experience of working in NHS Lanarkshire, being treated fairly and equitably and consider their level of confidence/comfort in challenging decisions.

- 63% of staff rated their experience of working in NHS Lanarkshire as ‘Good’ or ‘Excellent’, with 80% of staff ‘agreed’ or ‘strongly agreed’ that they were treated fairly and consistently, with dignity and respect. Over half of all respondents also stated that they felt confident/comfortable (empowered) to report or challenge decision.
- However, 36% of staff noted that they had experienced racism whilst working in NHS Lanarkshire. This was both internal and external to NHS Lanarkshire and included patients and carers. The reasons why racist/hate incidents were not generally reported was identified as being due to a lack of knowledge of how to report such incidents but also due to concerns of repercussions.

<b>Actions</b>	<b>Progress</b>
<p><b>Datix: Monitoring of Hate Crime:</b> To facilitate easier reporting new coding proposed for Datix under the Category Violence/Abuse/Harassment will now also incorporate hate crime against protected characteristic/s category as a mandatory box. Staff will be able to add more than one category i.e. racist and religious abuse.</p> <p>The BAME staff forum and subsequent Equality staff forums, will actively work in partnership with the organisation in developing and prioritising actions identified to address the findings of staff engagement activities.</p>	<p>Additional reporting areas will be added in February 2021.</p> <p>New inclusions to be widely communicated via staff and site briefings.</p>

## Theme 3. BAME Staff Forum

- When asked about the concept of developing a BAME staff Forum, 50% of staff indicated that they would be willing to participate, with 28% looking to subscribe to the forum. Some initial priorities identified for the forum were; to influence

organisational change, for peer group support and provide a safe discussion space. Overall most participants welcomed the opportunity of a BAME staff forum, which should have a clear purpose, focus and the output that influences and informs change across the organisation.

<b>Actions</b>	<b>Progress</b>
To share the high level feedback presented with participants.	Participant were emailed on 18.12.20 with a report on the findings of the questionnaire, an update on the progress of the work and the date of the first BAME staff forum meeting.
Establishment of the BAME staff forum	The first BAME staff forum meeting is being held on 4 <sup>th</sup> February 2021 14:00-16:00 (via teams). The meeting will initially be chaired by the Equality and Diversity Manager.

### **Additional Findings - Communications**

Staff were asked about the way they got information about the organisation, participants were able to select more than one option in responding. 77% said they got information from emails, 52% via all staff briefings, 52% from firstport, 50% through colleagues, 42% through line managers. NHS website 21% and 11% from social media.

<b>Actions</b>	<b>Progress</b>
Continue to disseminate information through a range of mediums/platforms to staff	On-going

### **Outstanding actions agreed following BAME Staff Questionnaire**

A number of outstanding actions were identified following the analysis of the questionnaire. The following lists further updates on actions and interim papers provided to highlight progress.

<b>Actions</b>	<b>Progress</b>
Develop a further, more detailed paper with proposed recommendations, resource requirements and timescales for the NHS Lanarkshire Board in Jan 21.	A detailed proposal with key recommendation submitted to <ul style="list-style-type: none"> <li>• Staff Governance Committee on the 23<sup>rd</sup> November</li> <li>• Corporate Management Team on 7<sup>th</sup> December 2020</li> <li>• Equality and Diversity Steering Groups 17<sup>th</sup> Dec 2020</li> <li>• NHS Lanarkshire Board at the 27<sup>th</sup> January 2020</li> </ul>
Identify an Executive sponsor to provide leadership and support in establishing the BAME staff forum in	Executive Sponsor: <ul style="list-style-type: none"> <li>• Kay Sandilands, Director of Human Resources supported by Heather Knox, Chief Executive.</li> </ul>

conjunction with BAME staff.	(Agreed at CMT 18 <sup>th</sup> January 2021)
Discuss and agree the resource requirements required to support and establish a series of forums requested by Scottish Government to mainstream equalities.	Proposal for resource submitted to <ul style="list-style-type: none"> <li>• Staff Governance Committee on the 23<sup>rd</sup> November (recommendation)</li> <li>• Corporate Management Team on 18<sup>th</sup> January 2020 (provisional agreement)</li> <li>• NHS Lanarkshire Board 27<sup>th</sup> January 2021</li> </ul>

#### 4. FUTURE EQUALITY FORUMS/ NETWORKS

The model used for the engagement and consultation to set up the BAME staff forum will be replicated to set up 2 additional staff networks, namely for Disability and LGBTI staff.

This will take place over the coming years subject to resources and capacity, and has been incorporated into NHS Lanarkshire's Equality Outcomes for 2021-2025. These outcomes will be submitted for approval to the NHS Board in March 2021 prior to publication by April 2021.

#### 5. STAFF DATA – ACTION PLAN

In terms of staff, NHS Lanarkshire have a relatively small number of identified Black Asian and Minority Ethnic staff, 437 out of around 13,500 headcounts. The current data held within the HR system suggests that we do not have ethnicity data for around 1 in 4 staff (currently unknown) and this is an area of action for the organisation.

In order to support the improvement of data collection the following areas of actions have been identified:

1. Undertake a communications activity to encourage staff to update eESS via self-service with protected characteristics information.
2. Complete a retrospective analysis of recruitment candidates' ethnicity to understand the trends in percentage of applicants who are ultimately successful.
3. Complete a review of the NHS Lanarkshire workforce v local population in terms of BAME staff representation.

A baseline of data will be taken in July 2021 to measure improvement following communication encouraging staff to update EESS. Combining this information with the data sets from actions 2 and 3 will be used to create an action plan to address any findings, and will be monitored on an ongoing basis and reported through our governance structures. The intended timescales to conclude these actions would be by September 2021.

#### 6. PATIENTS/SERVICE USERS DATA

In order to ensure patient's records are as complete as possible, we have:

1. Changed the current format of 'unknown' status for patient ethnicity to be a mandatory question asked at all presentations
2. Patient facing reception accountability established for each work stream.

## 7. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	<input type="checkbox"/>	AOP	<input type="checkbox"/>	Government policy	<input type="checkbox"/>
Government directive	<input checked="" type="checkbox"/>	Statutory requirement	<input checked="" type="checkbox"/>	Achieving Excellence/ local policy	<input type="checkbox"/>
Urgent operational issue	<input type="checkbox"/>	Other	<input type="checkbox"/>		

## 8. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

### *Three Quality Ambitions:*

Safe	<input type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input type="checkbox"/>
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### *Six Quality Outcomes:*

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	<input type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input checked="" type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input checked="" type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input type="checkbox"/>
Best use is made of available resources. (Effective)	<input type="checkbox"/>

## 9. MEASURES FOR IMPROVEMENT

A key vehicle for maximising the NHS contribution to reducing health inequalities and mitigating the impact of Covid-19 will be through our continued commitment to the delivery of the outcomes set in the Chief Medical Officer (CMO) letter (2018: 3) Health Promoting Health Service (HPHS). This settings-based approach aims to embed health improvement into the culture and practice of NHS settings. This focus aims to improve healthy life expectancy and address health inequalities for staff and patients alike.

The Leadership role of the NHS Board in creating an organisational culture which values diversity and inclusion is important in influencing change. NHS Lanarkshire as a Board has already committed to undertaking development in Equalities with an initial development session focusing on 'Unconscious Bias' taking place in March 2020. Further events were in development, but were paused due to Covid-19 and will be reconsidered as appropriate.

NHS Lanarkshire will also continue to promote and provide its range of equality, diversity and inequalities programmes to all staff, to support their understanding of discrimination and inequalities and their role in tackling it.

Equality Impact Assessments (EQIA) are one of the ways that NHS Lanarkshire ensure inclusivity. The EQIA enables us to understand the potential differential impacts on different groups and applies to both our staff and our community. The EQIA process is applied to our organisational policies, service changes and new ways of working, ensuring that staff are considered in any changes that affect them. EQIAs were required for all Recovery and Redesign submissions.

NHS Lanarkshire have shared the initial questionnaire and learning from the process to support the establishment of a national BAME staff forum. The Director of Digital Technology from NHS Tayside, Laic Khalique is leading the work with the Scottish Government to carry out a national BAME staff consultation. It is anticipated that ongoing collaboration with the national lead will continue to ensure the effective alignment of national initiatives and actions are effectively managed.

## **10. FINANCIAL IMPLICATIONS**

Financial costs to continue the development of the BAME staff forum and further subsequent forums for protected characteristics is essential. NHS Lanarkshire currently have only one single post dedicated to Equality and Diversity. This post currently covers a broad range of duties including, but not limited to:

- The development of Equality Outcomes for the Board,
- Equality and Diversity Action Planning,
- Review of all Equality and Diversity Impact Assessments (EQIA'S),
- Policy development locally and nationally,
- Mental Health First Aid training, and
- Overseeing and daily management of the Interpreting service for NHS Lanarkshire.

To support the delivery of both the BAME staff forum and actions arising and further forums suggests the need for additional resources. Equality and Diversity posts across NHS Scotland vary, with NHS Lanarkshire appearing to have lower levels of resource than most other Boards.

Following discussion at the CMT on Monday 18<sup>th</sup> January 2021, an agreement in principle to scope funding for a fixed term post was agreed. The Board are asked to endorse the request for additional support to ensure the effective establishment and provision of forums across NHS Lanarkshire.

## **11. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS**

The Board has a legal duty under the public sector equality duty to take steps to meet the needs of and minimise disadvantages of people that are covered by the protected characteristics. The increasing volume of work to be managed by a single post holder holds both short and long term risks to the organisation. The current post holder is the single point of contact for:

- equalities issues including equality and diversity impact assessments.
- interpreting queries which are a legal requirement that the organisation must fulfil.

The post holder is a specialist in their field and therefore, this role is challenging to develop for future succession planning.

## **12. FIT WITH BEST VALUE CRITERIA**

This paper aligns to the following best value criteria:

Vision and leadership	<input checked="" type="checkbox"/>	Effective partnerships	<input checked="" type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance Management	<input type="checkbox"/>	Equality	<input checked="" type="checkbox"/>
Sustainability Management	<input type="checkbox"/>				

### 13. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

NHS Lanarkshire Equality Impact Assessment (EQIA) has incorporated the Fairer Scotland Duty, to ensure social inequalities are also considered as part of any services redesign plans submitted to the Response, Recovery & Redesign group.

In order to address the widening inequalities as a result of the direct and indirect impacts of Covid-19, NHS Lanarkshire will review delivery of the Integrated Public Health Plan and agree joint priorities with partners with a focus on addressing wider determinants of health.

### 14. CONSULTATION AND ENGAGEMENT

As set out in the paper.

### 15. ACTIONS FOR THE BOARD

The Board is asked to:

Approve	<input checked="" type="checkbox"/>	Endorse	<input type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input type="checkbox"/>	Accept the risk identified	<input type="checkbox"/>	Ask for a further report	<input type="checkbox"/>

The Board is asked to:

1. Note the information and approve the actions described in this paper resulting from the issues raised in the survey. Primarily the actions in relation to heightening awareness of and accessibility to risk assessments
2. Endorse the CMT decision to seek funding for a fixed term post to develop and support further networks and equalities work.
3. Agree the development and formation of other equality forums subsequently, for staff.
4. Endorse the Executive sponsors identified for the engagement of the BAME staff Forum.
5. Use their leadership role and modelling of values, to reinforce the Board's commitment to creating an organisational culture which values diversity and inclusion and supports the health and wellbeing of all staff, in tackling all forms of inequalities and discrimination



6. Note that further reports on progress will come through the Staff Governance Committee which will have oversight of this work

**16. FURTHER INFORMATION**

For further information about any aspect of this paper, please contact:

Kay Sandilands, Director of Human Resources, Tel: 01698 01698 858198

## Appendix 1

### Analysis of NHS Lanarkshire BAME Staff Network Engagement

Following the four interactive, online, engagement forums sessions held in September 2020, a number of themes formed the design of the questionnaire. A draft of the questionnaire was presented to staff who attended the sessions, to which there was a number of additional themes added in co-creating the questionnaire. The BAME Staff questionnaire was then distributed by email to staff who have previously provided ethnicity data to HR, shared more widely across the organisation through our communications team briefings and 'request' emails to share with colleagues throughout the organisation.

#### Overview of the results

The questionnaire consisted of a total of 17 questions with a total of 265 staff participated, however not all questions received a response. Some of the questions allowed more than one selection and therefore some data will show over a 100%. Participants did not respond to all questions therefore the responses are presented in % scores. Presented below is an analysis and commentary of the findings.

Questions	Analysis	Commentary
1: Given the differential impact of Covid 19 on BAME staff in regards to risk assessments (RA); please advise (Please tick all that apply):	<ul style="list-style-type: none"> <li>• 66% were aware for a RA (155)</li> <li>• 44% were offered RA (104)</li> <li>• 15% requested RA (35)</li> <li>• 8% referred by manager (19)</li> </ul>	Risk Assessments during Covid 19 highlighted issues for BAME staff as some found the referral journey was challenging. Improvements to the communication process were suggested as whilst many staff were aware of the need for a risk assessment, the process at a local level was sometimes unclear. There was confusion around information on what form of risk assessment was required and who should carry it out, the individual, the manager or OH. Understandably the issue of PPE allocation/products was discussed in terms of timescales, allocation and availability.

<p>2: How would you rate your experience of working for NHS Lanarkshire?</p>	<ul style="list-style-type: none"> <li>• 17% excellent (44)</li> <li>• 46% Good (120)</li> <li>• 30% average (77)</li> <li>• 6% not good (15)</li> <li>• 2% Poor (5)</li> </ul>	<p>Many participants noted their experience of working in Lanarkshire was positive, however some participant's comments noted 'occasional incidents' such as bullying or discrimination. Suggestion from the online discussion forums noted the need for a more formal process to report and record such incidents.</p>
<p>3: As an employee, do you feel that you are treated fairly and consistently, with dignity and respect, in an environment where diversity is valued by NHS Lanarkshire?</p>	<p>20% strongly agreed (50)</p> <p>60% agreed (155)</p> <p>17% disagree (45)</p> <p>3% strongly disagree (7)</p>	<p>Majority of comments raised focused on issues at a departmental level rather than organisational wide. These were around implicit bias or prejudice, or 'macroaggression' behaviours which were often not enough to reach the threshold of discrimination but made individuals feel insulted or uncomfortable. Areas highlighted included limited access to training opportunities, job opportunities and inconsistent application of organisational policies</p>
<p>4: Whilst working in NHS Lanarkshire have you experienced racism?</p>	<p>36% Yes (93)</p> <p>64% NO (163)</p>	<p>Around one third of staff stated that they had experienced racism whilst working in NHS Lanarkshire. The next question seeks to explore this issue further.</p>
<p>5. Has your experience of racism been from (Please tick all that apply)</p>	<p>76 % from Colleagues/Team members from within NHS Lanarkshire (67)</p> <p>13% from Colleagues/Team members from</p>	<p>Racism affected people's sense of belonging, their role and performance within their work environments, their role in their team/depts. For many they reported experience of incidents of subtle and not overt racism. This included deliberately being overlooked in decision making, not being given equal opportunities to develop skills, being ignored or bullied by being socially isolated, treated differently in similar situations. This has led to some people adapting their behaviour both personally and professionally to cope.</p>

	<p>outwith NHS Lanarkshire (11)</p> <p>48% from Patients/Service users (42)</p> <p>35% patients carers/Patients families/Patients friends (31)</p>	
6: Did you report the incident?	<p>23% Yes (20)</p> <p>77% No (67)</p>	Racist incidents were not generally reported due to a lack of knowledge of how to report such incidents but also due to concerns of repercussions and amplifying the feeling of being 'different'.
7: Whilst working in NHS Lanarkshire have you experienced other forms of discrimination?	<p>52% Yes (46)</p> <p>48% No (43)</p>	Experiences of other forms of discrimination were shared; misogyny, homophobia, lack of work experience, existing mental health issues, points systems, social isolation
<p>The following 4 questions (Question 8- Question 12) supported the on-going theme that confidence to challenge is dependent on relationships and culture within the organisation. These questions focused more widely on perception of how confident staff felt in challenging decisions. For many BAME staff, their ethnicity was at times a factor for not feeling confident/comfortable to challenge. Further factors that influenced the level of comfort or confidence to challenge included length of service, job role, level of seniority and experience.</p>		
8: As a BAME member of staff of NHS Lanarkshire, do you feel confident in raising concerns? (Feeling confident to raise a concern	<p>14 % Very confident (29)</p> <p>44% Confident (91)</p> <p>31% Not so confident (65)</p>	This question brought a range of responses. Participants stated that they felt confident to raise concerns for others, colleagues/patients but not as confident to raise concerns for themselves unless it had got to a really bad situation. This was again in part of fear of being seen as a troublemaker.

means that you feel empowered to raise the concern)	11% Not at all confident (23)	
9: As a BAME member of staff of NHS Lanarkshire, do you feel comfortable in raising concerns? (Feeling comfortable to raise the concern means that your working environment or the person who you would raise the concern with, makes you feel comfortable to do so)	17% Very comfortable (35) 46% Comfortable (95) 26% Not so comfortable (54) 11% Not at all comfortable (22)	A slightly higher response to this question noted that BAME staff felt comfortable to raise concerns. These positive responses were generally attributed to working in a supportive team and positive management culture where concerns were listened to and individuals felt comfortable to share concerns. However, in contrast those that were not comfortable to raise concerns noted that this was due to having previously raised concerns without feedback or feeling that they had not been actioned.
10: As a BAME member of staff of NHS Lanarkshire, do you feel confident in challenging decisions? (Feeling confident to challenge a decision means that you feel empowered to challenge the decision).	9% Very confident (18) 44% Confident (91) 37% Not so confident (77) 11% Not at all confident (23)	This question had limited comments. Confidence was enhanced if the person felt 'safe' within the team or with their manager. However, responses also suggest that whilst participants may be confident to challenge, they were not assured that this would make any difference to decisions.
11: As a BAME member of staff of NHS Lanarkshire, do you feel comfortable in challenging decisions? (Feeling comfortable to challenge a decision means that your working environment or the person whose decision you are	9% Very comfortable (18) 46% Comfortable (94) 37% Not so comfortable (76) 9% Not at all comfortable (18)	This question supported the on-going thread that any confidence in challenging, is dependent on management/team culture. These issues are not only relevant to issues around Race but more of a wider perception of how empowered staff are in challenging the local and organisational decision making process

challenging are approachable)		
12: In the recent discussions held with NHSL BAME staff, we discussed the establishment of a NHSL BAME staff forum, run by BAME staff. Would you be willing to participate /contribute as part of the BAME staff forum (online/ virtual)?	50% Yes (103) 22% No (45) 28% to subscribe (59)	The majority of respondents supported the formation of a BAME staff forum. Some raised concerns about 'segregation' or creating more divisions by creating a forum based on ethnicity. Some people did not seek to engage at this time due to work commitments whilst others felt it was something they didn't need to be part of. The issue of broadening BAME staff representation in current governance forums and management roles was also considered to be an area of further work required within the organisation.
13: Please rate the following based on what you feel should be a key priority for the forum <ul style="list-style-type: none"> <li>• Influence organisational change</li> <li>• Safe discussion environment/space</li> <li>• Peer group support</li> </ul>	1 being the top priority and 3 being the lowest  Priority 1 50%  Priority 2 44%  Priority 3 41%	Overall half of participants welcomed the opportunity of a BAME staff forum, which should have a clear purpose and focus.  Many comments stated that discussions had to be in a safe and confidential environment, and offered a good opportunity for peer group support. The ability to influence organisational change was an important factor for participants. This included the opportunity to review policies and influence processes.
14: Communications: Which of the following do you use to get information about the organisation? (Please tick all that apply)	77% from emails (159) 52% via all staff briefings (107) 53% from firstport (109) 50% through colleagues (104)	Participants were asked about the most effective communication process. Interestingly emails were the main distribution channel whilst social media was noted as the least used approach. This is an interesting finding that will be shared with the communications team for information.

	<p>42% through line managers (87)  21% NHSL website (43) and  11% from social media (23)</p>	
<p>15: Using the boxes below, please indicate which day best suits your diary to attend BAME staff forum meetings. Once we have a majority vote on the day/time, we will identify a suitable date. (Please tick all that apply)</p>		<p>Participants were asked to give their preference of times and days to attend the BAME staff forum.</p>
<p>16: Which race /ethnicity best describes you</p>	<p>57% were of Asian/Asian British/Asian Scottish heritage (120)</p> <p>12% were of African/African British/African Scottish (25)</p> <p>9% were of mixed or multiple ethnic groups</p> <p>6% were of white, Gypsy/Traveller, Irish,</p>	<p>This data was an analysis of the diversity of our staff responding</p>

	<p>other white ethnic group</p> <p>2% preferred not to answer</p>	
17: Job family	<p>7% Administrative Services –</p> <p>13% Allied Health Profession –</p> <p>15% Nursing and Midwifery –</p> <p>53% Medical and Dental</p> <p>12% of staff job families not listed as they would be identifiable</p>	<p>This data was an analysis of the diversity of the job roles responding</p>