

Workforce Race Equality Standard (WRES) Strategic Advisory Group

MINUTES

10:00-12:30,
18 OCTOBER 2017

STEWART HOUSE, LONDON

MEETING CALLED BY	WRES Strategic Advisory Group
ATTENDEES	See annex
APOLOGIES	See annex
NOTE TAKER	WRES Implementation Team
WELCOME & INTRODUCTIONS	Marie Gabriel

Agenda topics

WELCOME AND INTRODUCTIONS

MARIE GABRIEL

DISCUSSION/ CONCLUSIONS	<p>Marie welcomed all present at the meeting, and in particular, welcomed Stephen Hart as the new member of the WRES SAG.</p> <p>Apologies were received from the following:</p> <ul style="list-style-type: none"> • Ted Baker • Karen Bonner • Jabeer Butt • Sir David Dalton • Michelle Drage • Professor Aneez Esmail • Poppy Jarman • Danny Mortimer • Richard Parish • Jon Restell • Terry Roberts • Rob Webster
------------------------------------	--

MATTERS ARISING

ALL

DISCUSSION/ CONCLUSIONS	<p><u>Amendments to the July 2017 minutes</u> – a typo on page 2 was noted, and Mala Rao reminded the secretariat of her full and correct title.</p> <p><u>Actions update</u> –</p> <ol style="list-style-type: none"> 1. Neil Churchill noted that he was meeting the NHS Ombudsman and would raise the idea of them joining the WRES SAG. 2. Marie reminded the SAG that she will raise the notion of establishing a 'race observatory' at the EDC meeting on 30 October. 3. Dame Gill Morgan queried the degree to which the WRES team had engaged with STP leadership; Dame Gill Morgan agreed to share an effective means by which this can happen. 4. Mala Rao clarified that she did not chair the tendering process for the independent evaluation of the WRES given time restraints. 5. Lord Victor Adebawale to raise the WRES agenda with the primary care – commissioning sub-committee.
------------------------------------	---

	WRES NARRATIVE	YVONNE COGHILL
DISCUSSION/ CONCLUSIONS	<ul style="list-style-type: none"> • Yvonne Coghill outlined the one-page narrative for phase two of the WRES strategy – that would be aligned to the WRES communications plan. The WRES SAG welcomed the narrative and provided points for feedback the need for the inclusion of 2-3 key facts highlighting how phase 1 of the WRES was successful, and adding further emphasis on the business case for workforce race equality. • The need to highlight the importance of stressing the link between WRES and increases in NHS management capacity. • that the current paragraph 3 should be upfront in the narrative and should be the first paragraph, and questioned who the audience for the narrative was – raising the need to ensure the narrative was fit-for-purpose for the target audience. • subtle changes in the wording of the narrative would be useful, • the importance of this being a one-page document. <p>ACTION: Yvonne and Reg Wilhelm (WRES Communications Manager) were tasked with updating the narrative in-line with both the comments received and with WRES communications plan, and putting it into operation thereafter.</p>	

	COMMISSIONED WRES WORK	HABIB NAQVI AND PROF DEAN FATHERS
DISCUSSION/ CONCLUSIONS	<p>Habib Naqvi and Dean Fathers outlined the 'task and finish' exercise that aimed to:</p> <ul style="list-style-type: none"> • consider the approach and handling of work commissioned by the WRES Implementation Team, and • propose an approach for the commissioning of future work <p>Habib outlined the status of the discrete pieces of work commissioned by the WRES team during 2016/17. He proposed that they could be grouped into three themes:</p> <ul style="list-style-type: none"> • Good practice by WRES indicators • Emergence of new data • Reference purpose only <p>Dean suggested that there was also an opportunity to look at the workforce race equality agenda with regard to other areas such as: tribunals, complaints and management capacity. But noted that there was a need to be absolutely transparent on 'outcome' as opposed to 'output' when it came to the commissioning of future WRES work.</p> <p>ACTION: Habib, Dean and Danny Mortimer (nominated) were tasked with looking more closely at the proposed framework / criteria for the commissioning of WRES work, as well as looking at the transparency of outcomes and stakeholder mapping.</p> <p>It was agreed that the third category of work (above) should not be labelled at</p>	

Paper: WRES SAG 1

	<p>'reference purpose only' – more could be made of the work, for example the possibility of producing 1,000 word articles from the 'reference' work</p> <p>ACTION: Habib, Dean and Danny were actioned to look at this possibility. SAG members also suggested other opportunities of use <i>Do we need to note what these were?</i> and benefit for this work.</p> <p>It was agreed that the SAG communications plan should be looked at again</p> <p>ACTION Reg Wilhelm to present a revised plan, in line with our new narrative and membership at the January 2018 meeting of the SAG.</p>
--	---

WRES PROGRAMME UPDATE

YVONNE COGHILL

<p>DISCUSSION/ CONCLUSIONS</p>	<p>Yvonne Coghill thanked her team for the hard that they putting into making the WRES one of the high profile programmes across the NHS.</p> <p>Yvonne outlined the work being undertaken by the WRES team and presented an update of the workstreams as they appear under the three strategic pillars of the WRES strategy:</p> <ol style="list-style-type: none"> 1. Enabling People: <ul style="list-style-type: none"> • WRES expert programme - will be commencing on 16 November. Communication and advertisement for the programme will commence soon after. The venue for the delivery of the programme has been secured with the NHS Leadership Academy in Leeds. Up to fifty candidates will be recruited in the first cohort of the programme. • WRES conference – planned for 31 October. All SAG members were encouraged to register and attend. • Roundtables with CEOs – to be carried out jointly with NHS Confederation over the coming months. 2. Embedding Accountability: <ul style="list-style-type: none"> • How WRES features in key policy levers (NHS contract, CCG Improvement and Assurance Framework, CQC inspections) was outlined. It was noted that a series of WRES webinars for CQC inspectors was planned for early 2018. • Work commencing with DevoManc and Greater Manchester Health & Social Care Partnership was outlined. Habib had met with Jon Rouse and his team to progress this work. • Focused work with the ambulance sector and with the London region (via the London-wide HRD Network) was also outlined. 3. Evidencing Outcomes: <ul style="list-style-type: none"> • The 2017 WRES data returns were described – 100% of NHS trusts had submitted their WRES data. The WRES team was described as analysing the data and producing the annual data report – scheduled for December 2017. Similar data collections were planned for the independent healthcare sector, and for the national healthcare ALBs. • The good work of organisations undertaking the QI methodology with regard to the WRES data outlined, and it was noted that the independent evaluation of the WRES had now been commissioned and was underway.
---	--

Paper: WRES SAG 1

	<p>A number of comments were made:</p> <ul style="list-style-type: none"> • WRES webinars for CQC inspectors should be something that is mandatory. • The work relating to the medical workforce could also be included in the WRES update, although it was clarified that the WRES update was just a summary of the work that is being undertaken and that other work is also underway, including with the medical workforce and the nursing workforce. • SAG members congratulated the WRES team on the spread and quality of the work being undertaken.
--	---

NHS LEADERSHIP ACADEMY UPDATE

STEPHEN HART

DISCUSSION/ CONCLUSIONS	<p>Stephen Hart gave a verbal outline of the work being carried out by the NHS Leadership Academy, including:</p> <ol style="list-style-type: none"> 1. Increasing the scale and impact of development programmes 2. Focus on talent management 3. Culture change and leadership development <p>Stephen highlighted the general unmet need / demand for developmental programmes and also noted that there were bursary offers available to underrepresented groups across the NHS workforce. The focus on 'culture change' was highlighted with regard to the Building Leadership for Inclusion programme of work, which looks at leadership development across a number of protected characteristics: disability, gender, LGBTQ, and race.</p> <p>It was noted by a number of SAG members that the national healthcare ALBs, including NHS England, NHS Improvement, and the NHS Leadership Academy were undertaking very similar programmes of work on (race) equality and cultural change. It was stated that there appears to be increased confusion and less alignment across the system regarding leadership and culture programmes for the workforce.</p> <p>A particular point was made to obtain the independent perspective in these areas and agendas of Non-Executive Directors.</p> <p>ACTION: It was agreed SAG members that also have memberships to a healthcare ALB board were tasked with prompting their respective board regarding the urgent need for better alignment of these programmes.</p>
------------------------------------	---

RACE DISPARITY AUDIT

HABIB NAQVI

DISCUSSION/ CONCLUSIONS	<p>Habib Naqvi presented the background to the publication by the Cabinet Office of the Race Disparity Audit (RDA) which is expected by mid-October; the potential implications for the NHS and the actions taken to date to prepare for publication.</p> <p>Habib noted that the data presented by the RDA are likely to show stark ethnic disparities in many of the areas including: health, education, housing, criminal justice, culture, and employment. He also noted that as the key contributors to the data for the 'health' and 'work' sections of the RDA, NHS</p>
------------------------------------	--

Paper: WRES SAG 1

	<p>England and Public Health England had undertaken preparatory work in readiness for the publication in mid-October.</p> <p>It was also noted that the NHS is on the front foot with regards to tackling the racial disparities in the opportunities and experiences within the workplace. The WRES is the 'system' response to workforce race inequalities observed across the NHS. He further emphasised the link between having a diverse and engaged workforce, and better care for patients, as one that is of particular importance here.</p> <p>SAG members discussed the possibility of an observatory-like structure being set-up that makes use of the emerging data and intelligence and transforms/aligns this to real action.</p> <p>ACTION: Marie and Habib agreed to raise this proposition at the next meeting of the NHS Equality and Diversity Council.</p>
--	---

SAG TERMS OF REFERENCE AND MEMBERSHIP

MARIE GABRIEL

DISCUSSION/ CONCLUSIONS	<p>Marie noted that the ToR for the SAG had been refreshed and that the membership of the SAG itself will be realigned to the strategic approach outlined for phase two of the WRES programme. She also stated that regular attendance to the quarterly SAG meetings was important.</p> <p>It was agreed that non-attendance for two consecutive SAG meetings would put at risk the membership status to the SAG.</p> <p>ACTION: It was agreed that appropriate letters would be sent to those members that have either shown consistent non-attendance, or where their role does not align to the WRES strategic approach going forward.</p> <p>Jackie Dunkley-Bent noted that the vision within the narrative of the ToR should be a little more ambitious. <i>(shall we move this sentence to the narrative discussion please)</i></p>
--------------------------------	--

ANY OTHER BUSINESS

ALL

DISCUSSION/ CONCLUSIONS	SAG members noted the high quality of the meeting papers.
--------------------------------	---

ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE
1. Raise the idea with the NHS Ombudsman of joining the WRES SAG.	Neil Churchill	December 2017
2. Refresh the WRES narrative in-line with the comments and feedback from the SAG.	Yvonne Coghill and Reg Wilhelm	November 2017
3. Review proposed criteria for commissioning WRES work, and look at a stakeholder map (target audience).	Dean Fathers, Danny Mortimer and Habib Naqvi	January 2018

Paper: WRES SAG 1

4. Examine the possibility of turning the 'reference' WRES work into 1,000 word HSJ articles.	Dean Fathers, Danny Mortimer and Habib Naqvi (cc. Dame Gill Morgan)	January 2018
5. Presentation of the WRES communications plan at the January meeting of the SAG.	Reg Wilhelm	January 2018
6. Examine the route by which to further engage with STP leads across the NHS.	Yvonne Coghill and Dame Gill Morgan	January 2018
7. SAG members that have membership to a healthcare ALB board to prompt their respective board regarding the urgent need for better alignment of leadership and cultural transformation programmes across the NHS.	All SAG members that are members of an ALB board.	January 2018
8. Raise with the NHS Equality and Diversity Council, the prospect of establishing an 'observatory' structure for ethnic disparities in health – a focus on action and strategy and not just data collection.	Marie Gabriel and Habib Naqvi	November 2017
9. A 'WRES Evidence Event' is held as part of the implementation plan, bringing together relevant academics, researchers, and practice experts.	Yvonne Coghill and Mala Rao	November 2017
10. Refresh the SAG membership – in-line with the strategic approach of phase two of the WRSE programme of work and in light of attendance.	Marie Gabriel and WRES team	January 2018

DATES OF FUTURE MEETINGS	Wednesday 10 January 2018, 10:00-12:30, London-wide LMCs, Tavistock House South, Tavistock Square, London WC1H 9LG
---------------------------------	--

Paper: WRES SAG 1

Annex

Meeting of the WRES Strategic Advisory Group – Attendance 18 October 2017

Name	Job Title	Organisation
Confirmed		
Marie Gabriel	Chair	East Lancashire Foundation Trust
Lord Victor Adebawale	Non-Executive Director	NHS England
Neil Churchill	Director	NHS England
Yvonne Coghill	Director - WRES	NHS England
Dr Habib Naqvi	Policy Lead - WRES	NHS England
Prof Mala Rao	Professor & Senior Clinical Fellow/ Honorary Vice Chair, Workforce Race Equality Standard SAG	Imperial College London
Prof Dean Fathers	Chair	Nottingham Healthcare Trust
Stephen Hart	National Director of Leadership Development	NHS Leadership Academy
Joan Saddler	Deputy Director	NHS Confederation
Dame Gill Morgan	Chair	NHS Providers
Baljit Kaur	Manager	NHS England
Jacynth Ivey	Associate NED	Health Education England
Mohamed Jogi	Manager	NHS Employers
Prof Jacqueline Dunkley-Bent	Head of Maternity, Children & Young People	NHS England
Apologies		
Prof Aneez Esmail	Academic	University of Manchester
Stephen Dorrell	Chair	NHS Confederation
Michelle Drage	CEO	London-wide LMCs
Richard Parish	Non-executive Director	Public Health England
Jon Restell	CEO	Managers in Partnership Union
Rob Webster	CEO	South West Yorkshire Partnership NHS FT
Karen Bonner	Director of Nursing	Chelsea and Westminster Hospital NHS Foundation Trust
Sir David Dalton	CEO	Salford Royal NHS FT
Poppy Jaman	CEO	Mental Health First Aid
Sir Keith Pearson	Chair	Health Education England
Jabeer Butt	Deputy Chief Executive Officer	Race Equality Foundation
Prof Ted Baker	Chief Inspector - Hospitals	CQC
Danny Mortimer	Chief Executive & Director of Employment Relations	NHS Employers
Terry Roberts	Director of People & Development	Hillingdon Hospital