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James Devine, Chief Executive, MFT
Louise Ashley, Chief Executive, DVH
Susan Acott, Chief Executive, EKHUFT
Helen Greatorex, Chief Executive, KMPT
Martin Riley, Managing Director, MCH
Paul Bentley, Chief Executive, KCHFT
Philip Astle, Chief Executive, SECAMB

c/o Kent House 81 Station Road Ashford Kent TN23 1PP

Sent via email

4<sup>th</sup> February 2021

Dear James, Louise, Susan, Miles, Martin, Helen, Paul and Philip

We thought it timely to write formally to you and introduce ourselves, the Kent and Medway system Black, **A**sian and **M**inority **E**thnic (BAME) Strategy Board

We first came together in the summer of 2020 shortly after the murder of George Floyd and at the point in the pandemic where the disproportionate negative effect of Covid-19 on people whose background was BAME was first being noticed.

Since then, we have continued to meet and together are working to shape and agree a set of priorities that we believe will improve the lives of BAME people across the county we serve.

We wanted too to formally record our thanks to you as the healthcare trusts and organisations in our Kent and Medway system for all the work that you have done to support and prioritise the well-being of staff and patients whilst continuing to deliver robust services and care in this unprecedented time.

We especially wanted to thank the various organisations within the system for the initiatives and strategies that you have taken to particularly look after the care of your BAME staff and patients. This has been particularly poignant over the last few months, given the disproportionate effect that COVID has had on our ethnic minority communities and the ongoing anxieties staff and patients from these communities have in addition to the ones that we have all carried through this period.

In addition to the pandemic and all that it has brought, there has been the international outpouring of grief and the cry for change following the murder of George Floyd in May 2020. A significant turning point we believe and one that provides an opportunity for us all to think and act differently in relation to racial inequalities.

It is with this in mind that we write this letter to you to introduce the Strategy Board, which we hope will continue to help the Kent and Medway system look at its priorities for both staff and patients with a particular view to ensuring that racial inequity is not tolerated and that diversity is celebrated to the benefit of staff, patients, organisations and the health of our populations.

With this ambition in mind, we write to you as Chief Executives and Directors of the trusts to ask that we work together and deliver against the four particular areas;

## A. COVID-19 Vaccine – Access for BAME Staff

We are delighted at the rapidity in which a safe COVID-19 vaccine has come to be deployed within the NHS. We are aware that there have been a number of groups that have been identified as being priority for receiving the vaccine.

We note that despite the disproportionate effect of COVID-19 on BAME communities, these communities have not been identified as a priority group for receiving the vaccine yet. Instead Public Health England have stated, that these groups will be appropriately re-stratified within the already identified risk groups of age and other co-morbidities. We do not write this letter to question that decision currently, however, we would like, therefore, to ask the trusts in our system to ensure that they are reviewing the risks for their staff and ensuring that members of staff from BAME populations, particularly those who have other co-morbidities, will not be neglected in the plan for administration of the vaccine over the coming weeks and months.

We do understand that there is potentially a greater level of hesitancy around taking the vaccine amongst some BAME communities. We ask that Trusts continue to record ethnicity of staff up taking the vaccination and we ask that they make active steps to appeal in a sensitive and timely to those staff who may be hesitant on the basis of myth, mistrust or misinformation. We are seeking reassurance that enough is being done to ensure those high risk BAME staff are accessing it.

## B. Risk Assessments - Making them Meaningful

Along with many others who have a particular focus on BAME staff, we noted the timely intervention of NHSE/I earlier in the year, when they called upon all healthcare organisations to ensure that risk assessments for all staff were prioritised and that particularly vulnerable groups, including BAME staff were encouraged to prioritise having a conversation with their managers and ensuring a risk assessment had occurred.

Our ask is that you ensure that the assurances given about the quality of your risk assessments are revisited to ensure that they are all, well-maintained, that staff continue to have an opportunity to ensure that they are risk assessed, that such risk assessments are carried out in an appropriate and compassionate fashion, that robust Standard Operating Procedures exist for the administration and assurances around risk assessments and that risk assessments are appropriately updated, as new information is available in relation to the risks surrounding COVID-19.

We would ask too, that risk assessments begin to include appropriate information and discussion of the vaccine and its availability to staff and that in line with the NHS People Plan, you begin to develop your strategy for pivoting those risk assessments into well-being conversations for the weeks and months to come.

## C. <u>Vitamin D – Testing and Access to</u>

From very early on in the public health response to the pandemic there has been a view that vitamin D may have some role in protection against the developing of serious symptoms in relation to a COVID-19 infection. Recent research has suggested that there is indeed a link between vitamin D levels and the risk of severe outcome with COVID-19, however, the guidance from Public Health England, MHRA and NICE has not changed in relation to vitamin D supplementation. We know, however that vitamin D supplementation has been more generally recommended, even prior to COVID-19 and continues to be suggested as an important supplement. It is therefore, particularly important within BAME communities, because there is evidence, particularly in Western



climates, they are more likely to have a low level of vitamin D. We ask you please to review your policies in relation to vitamin D. This might include the provision of staff testing, or the provision of vitamin D for staff. We would ask you too to continue to give an important message of recommending vitamin D supplementation, particularly through these winter months.

# D. Psychological well-being and clear messaging

We have been excited and grateful to hear of a number of initiatives that local trusts have developed during recent months to support the well-being of staff and we continue to commend and thank you on behalf of our colleagues for the focus on their well-being and for making that part of business as usual across the system.

We believe it is more important than ever that organisations clearly set the expectation that racism in all its forms, including micro aggressions will not be tolerated and set a zero tolerance policy. We know that you will, as we are, be saddened to hear that we are still encountering significant feedback about incidents of racism. It is important to ensure that there are robust processes and mechanisms in place in all Trusts that are accessed by staff to ensure that such bullying and harassment, whether it is racial in nature or not, is not tolerated, addressed in a timely manner when it arises and that staff have easy and accessible options for support and swift resolution.

The Kent and Medway System BAME Strategy Board has an ambitious programme of work ahead. We welcome and encourage your active engagement with us and value your support for the work that we are moving on.

There is good news. We have secured funding for the following initiatives across the system and are currently moving to devise programmes and actions plans for these:

- ✓ Mentorship programme for BAME staff
- ✓ Training for Equality, Diversity and Inclusion (EDI) Advisors to sit on interview panels
- ✓ A Kent wide NHS Leadership Academy Stepping Up Programme to be offered to staff across the system later in the year
- ✓ A group coaching offer for BAME Staff Network chairs across the System
- ✓ Workforce Race Equality Standard (WRES) expert training

Our request is that you work with your BAME staff network in particular, to ensure that they have a voice in your Trust to speak to policies on bullying, harassment, mediation and dignity at work, that we work with the networks to ensure that BAME staff find themselves readily able and psychologically safe in accessing the psychological well-being programmes on offer and BAME staff networks.

Over the last year, the NHS Chief People Officer, has worked and developed strategies for the development, maturity and support of BAME staff networks and their leaders across the NHS as a whole.

We would in our final moments in this letter, particularly like to call upon each of our local provider to ensure that you have aligned your strategies for their BAME staff networks with that of NHSE/I and the outputs that have come from the Chief People Officer.

We would value your confirmation that you are prioritising the needs of your BAME staff networks in terms of time, resource, finance and strategy to allow it to develop and mature. In that way, your network will find its voice to speak to the needs of their BAME staff such that the inequity that is still seen within the WRES reports across the system can over the years to come be diminished through active work on anti-racism policies and strategies. We ask that you would make it a

priority to discuss this letter and surrounding issues with you BAME/Inclusion Network leads. We are joining forces so that our system can be known as a place where BAME staff are able to grow, develop and contribute, unhindered by the burden of racial inequality.

Thank you for your cooperation Yours sincerely,

**Helen Greatorex** 

CEO of KMPT Co-Chair of K&MBSBoard

On behalf of Victor Anota (MFT) Funmi Balogun (KCHFT) Manju Bannerjee (EKUFT) Simon Cook (KMPT) Ariel Mamana (SEACAMB) Adelle King (MCH) Mangit Gill (K&M CCG)

CC

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#### **HR Directors**

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### Ms Rantimi Ayodele

Associate Chief of Surgery MTW
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