

Equality, diversity and inclusion

Working for change:

RCPCH's next steps in
equality, diversity and inclusion



Welcome statement

During the past year, the College has gone through a period of monumental challenge to support both members and our young patients and their families in ways that we could not possibly have imagined. But we have played our part in much greater nationwide discussions about the nature of our society and for our volunteers and staff, what it means to tackle discrimination and inequality. Each day, our members see the impact of inequality on childrens' life chances and we often struggle to be heard. But through a fortunate set of events, we had embarked upon this before the pandemic struck.

Through the equality, diversity and inclusion (EDI) project which began in 2019, we were able to bring volunteers and staff together to produce a far more ambitious plan with a clear set of actions. We believe that this will carry momentum, will be meaningful and long-lasting and produce tangible, measurable benefits for medicine and child health.

We now approach the one-year anniversary of lockdown; it is clear that this period of isolation and introspection has led to a much greater focus for many on the nature of justice and inequality. This report spells out how the ambitions and scope of the project have developed to look at our workforce, the way our College works, health outcomes for children and young people and our volunteer chances and awards systems. I'm proud that our EDI work is now embedded right across the organisation.

None of this has been easy during COVID-19; we have had to collect the data, carry out the analysis and write the reports at the same time as supporting those in paediatrics and child health during the pandemic, at a time when everyone was under great strain. It would have possible for the work to go off track. But the governance of this has been exceptional and I'd like to thank the EDI Oversight Group for their support throughout this period. Dr Camilla Kingdon, our President-Elect will continue to lead this work, and she will ensure that it continues to maintain that momentum during her three-year tenure.

We will be reporting back in the summer of 2021 on our progress in increasing representation in our volunteer roles – in our 'One year on' report. The EDI Member Reference Group has allowed member voices to be heard, but we do know there are voices we haven't heard from yet. We would welcome and invite feedback and comments from any member on this work: edi@rcpch.ac.uk

Please read this report and let us know what you think. The work of the College in this space is only beginning to touch the surface of this but we know that without an understanding of the full picture we will fail to make meaningful improvements to end child health inequalities.



Jo Revill
CEO, Royal College of Paediatrics and Child Health

Overview

Founded in 1996 and now with over 19,000 members in the UK and internationally, we play a major role in postgraduate medical education, professional standards, research and policy. As the Royal College of Paediatrics and Child Health, our vision is a healthier future for children and young people across the world.

In our commitment to improving child health, it was important to acknowledge the implications of equality, EDI on the health outcomes of children and young people as well as broader issues around access and service provision. This is an area we must do more in, not just because structural inequality has come into sharp focus since summer 2020. We must acknowledge the effect that COVID-19 has had on all of us and particularly the disproportionate effect it has had on those from BAME communities and those from disadvantaged socio-economic backgrounds.

We also want to do our part to challenge and subvert unequal structures in medicine. This means we must reckon with a history that may have been marked by forms of racial injustice and discrimination. We are committed to acknowledging the past and creating systemic change for the future.

In 2019 we commissioned a report, with external input, [on member representation in our voluntary roles](#). Following this, in July 2020, we published [an action plan](#) setting out how we would take this work forward and how we would implement the recommendations. We feel that now is the time where the College must lead by example and take this agenda forward by addressing wider issues across the protected characteristics openly and honestly. Only by directly playing our part in redressing imbalances and combatting inequality and discrimination in all forms can we begin to believe ourselves to be strong advocates for EDI. We want this work to be at the top of our agenda and to have everyone's voices heard.

Our overall aim is to ensure that the values of equality, fairness, diversity, respect and inclusion are all embedded throughout our work. We are not only looking inwards at our own organisation but we are listening to and addressing the concerns of our membership and the issues raised by the children and young people we work with across the country. This includes but is not limited to our staff recruitment and working culture, our projects, the volunteers we recruit, the workforce issues that our membership face and the health outcomes of the beneficiaries we serve.

The way language is used in all aspects of EDI is a very sensitive issue. We recognise that the language used in these reports may not apply to all and people may have different preferences around language. We have aimed to use clear and consistent terminology across all protected characteristics that have been informed by government surveys and equality charities at the forefront of this work. In particular, we are currently using the umbrella term BAME for those people who identify as being from Black, Asian or Minority Ethnic backgrounds, as this term is widely understood and used commonly across many organisations. However, we recognise that the term is frequently seen as clumsy and conflates difference in how people see their ethnic heritage. There are also likely to be differences within this broad group and where possible we have referred to specific ethnicities. We continue to be in dialogue with members and search for best practice around language in this and all aspects of EDI.

EDI and paediatrics

To build on our work looking at representation within volunteer roles, we have taken a broader view of EDI across paediatrics and created four workstreams to organise our thinking. We have focused on matters raised by RCPCH members viewed through the prism of their working lives and the work they do to support children and young people.

Working lives of paediatricians

The paediatrics community, like all parts of society, must respond to the challenges being seen in EDI and in this report, we review the EDI work currently taking place at the College that focus on the working lives of paediatricians. This covers the full breadth of the career journey and also looks at the workforce as a whole and current systems of career progression. The biggest area for improvement is in the collection of equal opportunities data. If this can be improved centrally it will allow the College to report against it across all divisions and teams for those undertaking training. Whilst reporting on the data of any such differentials in attainment should be a key focus, often what is also required is better support structures and therefore an area the College should give due consideration to is looking at how it can better support groups like international medical graduates (IMGs) within the paediatric workforce. There may also be a need to look at the wider experiences of our members in relation to EDI in addition to internally focusing on what the College can and should do.

Health outcomes for children and young people

The College has begun important work in addressing EDI within our membership but our commitment must also address other aspects and extend to the health outcomes of children and young people in our care. Health outcomes are affected by a broad range of factors including socio-economic determinants and geographical locations. While the College has long advocated for child health equality, recent events have brought health inequality and racism front and centre: the COVID-19 pandemic and the Black Lives Matter movement. To ensure meaningful improvements in child health outcomes and to enable us to work towards ending child health inequalities, the RCPCH needs to examine the full spectrum of drivers in determining health outcomes, including ethnic background. Drivers in health outcomes are broad and the work of the College in this space is only beginning to touch the surface of this but we know that without an understanding of the full picture we will fail to make meaningful improvements to end child health inequalities. Separation of geographical inequalities from socio-economic deprivations, advocating for underrepresented groups and examining unconscious bias will be key as we move this work forward.

Volunteering and awards

Representation within volunteer roles was the first step of our recent journey in EDI. The work and ambition of the College in the area was set out in our [Action Plan](#) and work on the recommendations is continuing at pace, and we look forward to providing a further update on our work in summer 2021. Improving the data we collect must be central to any ongoing EDI work across both awards and volunteers. Without the full picture of 'what our membership looks like' we cannot identify underrepresentation or know when our actions are affecting change. Encouraging more of our members to share their data is an important step and will allow us to really assess our ambition that by 2030 those in voluntary roles will reflect the diversity of the membership. Nominations and awards happen across the College in different departments and teams and a holistic overview

of the way in which these awards map the career path of our members is needed. Improvements to our recruitment and management of volunteers form a large part of our existing action plan, but we will also look to see what role equality impact assessments could play in each recruitment.

Our College

We are not be able to advocate for better health outcomes, ensure a more representative volunteer base or minimise the impact of differential attainment if we are operating from a place of inequity. As we began looking beyond our volunteer roles it was clear that we needed to look internally at how the College as an employer and organisation approaches EDI. Operational elements within the remit of the College, from the panels at our events to the data we collect on members are important foundations for our wider EDI work. In terms of our internal EDI activity, much of the work will be delivered by our ongoing People Strategy. Shaping our College for the future, and ensuring a better approach to EDI will depend on better data collection and sharing. Across a wide range of areas we need to evidence our progress on EDI and share this information with members - this ranges from our membership, to the speakers at our events, to the media spokespeople that we use.

Our Commitments

Our work on EDI is not a finite project – we are dedicated to working for change. It will be a longstanding area of focus for us and the following underscore the College's commitments to ensure the ethos of this work is embedded at all levels and in everything that we do.

We will be accountable

With the number of actions for the College to deliver on EDI for the next few years, it is important that we are accountable to our membership for our achievements and that as a College we are regularly reviewing our progress. For example, we will share more data on a yearly basis to examine representation and differential attainment and we will report back on our progress during the year.

We will be a voice for change

As an organisation with inclusion as one of our core values, it is important that we challenge stakeholders appropriately and seek change where we feel more can be done to further EDI. This work cannot be done in isolation. Delivering on our actions will involve working with others, including those organisations that are part of the pipeline for a paediatric workforce such as deaneries and medical schools. It will mean holding governments and other policymakers to account when advocating for children and young people.

We will continue to engage deeply and widely

Challenging our own thinking and approaches will be key in ensuring that we really are benefitting the widest possible group. Bringing in the voices of those we aim to support is one way of doing this, but most methods of engagement are imperfect – and it is often those you have no existing link with that are the biggest target of your work. Openness to feedback and the ideas of others will be key to reaching as large a group as possible.

What's next

The next steps for the College will be to implement the actions from each workstream and from our original report into representation within volunteer roles. This is only another step in our ongoing commitment to EDI, and there may well be additional projects and work that we view as essential to this work that are not listed below. The actions and commitments we make in this report do not represent the sole steps the College will be taking over the coming months, but illustrate where we will start our work for change. Although we have identified our four current workstreams, as an evolving process this will naturally change or evolve over time, so we are open minded to additional workstreams or even redesigning the remit of an existing workstream.

We also acknowledge that our commitments may face limitations, and progress will not necessarily be linear. By being accountable, sharing what is and is not working, we will be able to aim for continuous improvement but it will be important to talk about where we are weak, discuss lessons learned and crucially, take the right steps to do better. Naturally, there will always be more work on EDI that the College could do and we will have to carefully balance our resources as we progress this work. We are committed to being transparent in our decision-making over what we can and cannot do and we will be clear in our communication with members. We must look to take sustainable steps towards the future, setting achievable goals so that real progress can be achieved. An inability to do something now does not mean that we do not see value in the proposed activity or that we will not take this forward in the future. Advocacy for change does not always equate with that change happening – and many of the areas and actions for future work are contingent on stakeholders also playing their part. As we work for change, the College will continue to speak on behalf of paediatricians and use our unique perspective via the voice of children and young people.

Although we are taking an 'always on' approach with our EDI communication to members, and there will be regular updates over the coming months, our next formal update will be our 'One year on' report, due for publication in Summer 2021. This will provide an update on our work across representation in volunteer roles and we are also committed to sharing ongoing annual reports with cross College EDI data, the first of these being shared in Spring 2022.

Action log

Below you can find a collated list of all actions across all four workstream reports and our previously published action plan into opening up volunteer roles. The workstream reports provide further context on these actions but this list is intended to provide a single point of reference for all EDI work the College will seek to achieve over the next few years.

Action source key:

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|---|
| Working lives of paediatricians |
| Health outcomes for children and young people |
| Volunteers and awards |
| Our College |
| Action plan for increased representation within volunteer roles |

| Action | Status and difficulty | Delivery date |
|--|--|---------------|
| The College should seek clarity with HEE on what their expectation is with regards to EDI when using clinicians in the recruitment process across all four nations | Not yet started - medium difficulty | By March 2022 |
| Sub-specialty clinicians should have up to date EDI and unconscious bias training and this will need to be included as part of the process and logged | Not yet started - low difficulty | By July 2022 |
| An audit of written interview questions or an improved sign off process (to check for any terminology that might be more clearly explained) should be introduced to help ensure that candidates from outside of the UK can recognise any terms used | Not yet started - low difficulty | By July 2023 |
| It was recognised by the member reference group that the College does already provide some good EDI training for members in voluntary roles, however it should explore whether training on EDI should be centralised for all clinician volunteers and in E&T for all those involved in delivering exams and assessments and ensure that training is tracked and recorded | Not yet started - medium difficulty | By March 2023 |

| Action | Status and difficulty | Delivery date |
|---|--|---------------|
| There are question writing group categories in our membership database so consideration should be given as to what reporting can be done on them, what further data is needed and what if anything we could do to improve EDI across question writers and scenario reviewers | Not yet started - low difficulty | By March 2022 |
| Continue to use the validation framework for other exams and assessments once the initial work has been completed on the MSF assessment | Not yet started - medium difficulty | By March 2022 |
| Ensure for any new systems projects that the Psychometrics team are involved at the beginning so that data and reporting is a key consideration for building any such system | Not yet started - low difficulty | By March 2022 |
| Continue to explore whether College systems such as ePortfolio that contain data relating to training can be shared or streamlined to allow for better reporting | Not yet started - medium difficulty | By July 2022 |
| Once the College has improved its data collection it should commit to publishing this on an annual basis | Not yet started - low difficulty | By March 2022 |
| Continue to improve the collection of equal opportunities data to allow meaningful analysis of education and training data and highlighting any possible differential attainment (DA) and then taking appropriate steps to mitigate if applicable. This should also include any analysis of possible regionally and national variations | Not yet started - medium difficulty | By March 2022 |
| Improve the sharing of information with other stakeholders such as the GMC and HEE that allows for triangulation of data held and supports the drive to reduce possible DA | Not yet started - medium difficulty | By March 2022 |
| To ensure that EDI is given due consideration as the work on retention and lifelong careers is being formulated | Not yet started - low difficulty | By March 2022 |
| As the College has done through other systems projects, they should ensure through the user experience that accessibility is considered for members when developing the new online learning system | Not yet started - low difficulty | By March 2022 |

| Action | Status and difficulty | Delivery date |
|---|--|---------------|
| To support initiatives such as the WRES, and other work on race equality, we aim to increase member reporting about EDI characteristics | Not yet started - medium difficulty | By March 2022 |
| Add a component on EDI/Unconscious Bias to syllabus for the 6-monthly AAC Training Days ensuring that it is applicable to the role of an AAC panel member | Not yet started - low difficulty | By March 2022 |
| Continue to look at new ways of collecting information that would allow protected characteristics to be captured that supports all areas of workforce data collection | Not yet started - medium difficulty | By March 2022 |
| Acknowledge that the white ethnic group is not homogenous and sections of the community are underrepresented and disproportionately affected in health outcomes for patients. The College should begin to include this in ethnic data collection and analysis | Not yet started - medium difficulty | By March 2022 |
| Build on including children and young people's voice from underrepresented communities in College work, such as national audits | Not started yet - medium difficulty | By March 2022 |
| Empower members to be better advocates for child health equality by building on the Ambassador programme and provide lobbying training and tools to use data and CYP voice effectively | Not yet started - medium difficulty | By March 2022 |
| Undertake a scoping exercise to look at how the College's approach to parameters for health outcomes studies recognise the physiological differences in ethnicity | Not yet started - medium difficulty | By March 2023 |
| Explore opportunities to conduct targeted research and EDI data collection in reducing health inequalities across all existing and prospective College work streams and priorities | Not yet started - medium difficulty | By March 2023 |
| Explore what further advocacy for underrepresented CYP we push forward with in our SoCH campaigning work | Not yet started - medium difficulty | By March 2022 |
| Review the awards available across the College, with a view to producing a clear statement or report on EDI monitoring and considerations across all awards | Not yet started - medium difficulty | By March 2022 |
| Ensure clarity when talking about volunteer data and roles included, and continue to look for ways to improve internal reporting and include more types of College volunteer | Not yet started - low difficulty | By March 2022 |

| Action | Status and difficulty | Delivery date |
|--|--|---------------|
| A commitment to review the data on volunteers and awards on an annual basis, producing an annual report for sharing with Senior Officers and a summary report for sharing with members. Each report must update on progress across relevant actions and address any further work indicated by the data | Not yet started - low difficulty | By March 2022 |
| Review the current processes around volunteer recruitment and how Equality Impact Assessments might be used to support the process | Not started yet - high difficulty | By March 2023 |
| Review the current processes around volunteer management, how Equality Impact Assessments might be used and how the appraisal system and Code of Conduct for College volunteers might be strengthened to ensure behaviours demonstrated reflect the inclusive values of the College | Not yet started - high difficulty | By March 2023 |
| Better monitoring of applications to be a volunteer and the inclusion of statements to actively encourage underrepresented groups to apply | Not yet started - medium difficulty | By March 2022 |
| Annually report on aggregated disclosure rates of members across all protected characteristics | Not yet started - medium difficulty | By March 2022 |
| Regularly review language used for protected characteristics to ensure it is reflective of best practice and feedback from members | Not yet started - low difficulty | By March 2022 |
| Develop range of questions beyond protected characteristics where appropriate | Not yet started - low difficulty | By March 2022 |
| Annually report on EDI data for our events and media spokespeople | Not yet started - medium difficulty | By March 2023 |
| Make improvements to the accessibility of our events | Not yet started - low difficulty | By March 2022 |
| Share internal data aggregated data on protected characteristics with staff, and share a highlighted version of this report with members | Not yet started - low difficulty | By March 2022 |
| Review recruitment of invited reviewers, with specific consideration for EDI | Not yet started - medium difficulty | By March 2022 |
| Work to encourage staff to share data across protected characteristics | Not yet started - low difficulty | By March 2022 |

| Action | Status and difficulty | Delivery date |
|---|-----------------------------------|---------------|
| Take forward improvements to data collection for members | Completed | By July 2021 |
| Agree how data on those applying for voluntary roles should be collated | In progress - low difficulty | By July 2021 |
| Undertake a more detailed mapping exercise to gather more information on how recruitment takes place across our different volunteer roles including a review of Committee appointment and how this works across the College | Completed | By July 2021 |
| Ensure delivery of diversity outcomes is included in Senior Officer and Trustee appraisals | Completed | By July 2021 |
| Ensure delivery of diversity outcomes is included in senior staff appraisals | Completed | By July 2021 |
| Ensure that where senior staff, Trustee or Senior Officer roles are recruited, delivery of diversity outcomes are included in the job description | Completed | By July 2021 |
| Communications plan to be developed to disseminate the action plan for improving representation across voluntary roles | Completed | By July 2021 |
| Next steps for the College in increasing representation across voluntary roles to be developed by an internal EDI working group | Completed | By July 2021 |
| Ongoing communication around representation in volunteer roles and wider EDI issues to be considered | Completed | By July 2021 |
| Trustees and Council to review an annual update on the progress against both recommendations and actions in this report | In progress - low difficulty | By July 2021 |
| A one year on report for volunteer role representation will be produced and made available for members | In progress - low difficulty | By July 2021 |
| Develop a recommendation on fellowship as a requirement for volunteers - if a change is recommended, this will be accompanied by a timescale for delivery | Not started yet - high difficulty | By July 2022 |
| Following the mapping of volunteer roles, those volunteer roles that can and cannot be advertised on a job share basis will be clarified | In progress - medium difficulty | By July 2021 |
| Ensure data is collected on the number of volunteer roles advertised on a job share basis to assess the achievement of this recommendation | In progress - medium difficulty | By July 2021 |

| Action | Status and difficulty | Delivery date |
|--|-----------------------------------|---------------|
| Take forward development of standard processes and guiding principles in job descriptions and adverts for volunteers and recruitment adverts | In progress – low difficulty | By July 2021 |
| Data to be collected to ensure all role descriptions have been updated to reflect the new principles | In progress – low difficulty | By July 2021 |
| Following the mapping exercise on volunteer roles and how they are recruited, we will identify where a recruitment panel is used, and if further action is needed for those roles that do not recruit via a panel | In progress – medium difficulty | By July 2021 |
| We will ensure data is collected on recruitment practices so that we can measure our performance against this recommendation | In progress – low difficulty | By July 2021 |
| Following the mapping exercise of volunteer roles and how they are recruited, a group for unconscious bias training will be identified and asked to undertake such training | In progress – low difficulty | By July 2021 |
| Identifying and encouraging volunteers to be active champions and role models | Completed and ongoing | By July 2021 |
| Regular communications activities such as features, blog posts etc. from a range of volunteers to be delivered from the launch of our action plan on volunteer representation | Completed and ongoing | By July 2021 |
| Consider how we can best strengthen our existing mentoring scheme, whilst also looking for ways to incorporate reverse mentoring, possibly by piloting such a scheme | Not started yet – high difficulty | By July 2021 |
| Consider the best way to support senior volunteers in talent spotting and encouraging people to apply for roles. External training of Senior Officers to deliver the tools to support this work will also be considered as part of this review | In progress – medium difficulty | By July 2021 |
| Consider how the list of voluntary roles can best engage local representatives to share roles and encourage applications and ensure relevant channels are used to reach diverse populations | In progress – low difficulty | By July 2021 |
| Guidance and training on engaging attendees from all backgrounds and perspectives to be developed and delivered | In progress – medium difficulty | By July 2021 |

| Action | Status and difficulty | Delivery date |
|---|---------------------------------|---------------|
| Our support and induction for Committee Chairs will be reviewed, ensuring that resources to support Chairs are available in a single, easy to find, place and that staff supporting Committees are able to access such resources and utilise them to support volunteers | In progress – low difficulty | By July 2021 |
| Consider how we can best develop an informal culture of considering if diversity has been addressed and if principles for Committees should be drafted | In progress – medium difficulty | By July 2021 |
| Consider how observers could best work across Committees, including the benefits of a light touch approach and option of an initial pilot scheme | In progress – medium difficulty | By July 2021 |
| The many Committees of the College and the work they do to be clearly communicated to all College members | In progress – low difficulty | By July 2021 |
| Undertake a scoping exercise to learn from similar schemes to gain any other information to feed into the feasibility study of how the College could make a contribution to care costs | Completed | By July 2022 |
| Consider how best to undertake a feasibility study in covering costs for childcare or other caring responsibilities for Committee members | In progress – medium difficulty | By July 2022 |

Acknowledgments

The publication of the workstream reports would not have been possible without the steering of the EDI Oversight Group, valuable input and feedback from the Member Reference Group and the dedication of the EDI Staff Working Group who produced these reports. The names of the key clinicians and College staff involved in this project are listed below.

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We would also like to share our thanks for those organisations within the health and science space who are undertaking similar work within their own organisations and have helped shape our understanding. This included informal meetings with our sister Royal Colleges to discuss EDI as well as reviewing published reports and guidance from organisations including but not limited to the British Medical Association, British Pharmacological Society, General Medical Council, Academy of Medical Sciences and Wellcome.

RCPCH

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March 2021

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 **RCPCH**

**Royal College of
Paediatrics and Child Health**

Leading the way in Children's Health