



The **#inclusiveHR** is a social movement for change to improve the experience of Black, Asian, and Minority Ethnic HR & OD professionals within the NHS. We want to close the compassion gap and advance equality, diversity and inclusion and lead with credibility as a HR & OD profession. This month Cheryl Samuels, Deputy Director of Workforce Transformation, NHS England & NHS Improvement, shares David Grantham's personal leadership journey.



Getting my teeth into racism & privilege

David Grantham,
*Chief People Officer, Royal Free
London NHS Foundation Trust*

I've never thought myself someone who'd discriminate. I am an advocate of equality and fairness. However, I'm increasingly conscious that I've not been doing enough. My attitude to race, diversity and inclusion has been challenged by events, and has changed. I'm 'well educated' but I know I didn't learn much about black or other cultures and people's history in school. It's perhaps understandable, I come from a small town which didn't have much diversity of colour, or much else - there were (apparently) no gay people like myself either. There's a parallel - I didn't learn about us either.

We learned nothing of Africa, except Egypt and its incredible irrigation and architecture. Of course, that the Pharaoh's were toppled by Romans too. Imperialism, occupation and the slave trade and the later emancipation of nations was omitted. No-one talked of the greatness of black people - Florence Nightingale not Mary Seacole, Roger Bannister not Jesse Owens, Alexander not Severus. History should be taught with perspective and must include some ugly truths. We did study *To Kill a Mockingbird*, which influenced me. At one point I was keen to become a lawyer - like Atticus Finch quietly righteous and pursuing justice. My days of youthful passion for changing the world. Atticus's motivations are now debated. In modern parlance he had 'white privilege' and, at least in my eyes, used it to good purpose.

The first black man I remember is Mr Paul, our dentist. At 52 I've pretty good teeth, no fillings and one root canal treatment. I do attribute this to his good care. I don't know if I remember him because he was our dentist or because he was black. I can't name a later dentist though. Now I've also thought about him. What

was it like for him back in the early 70s? A black dentist in a very, very white working class town. Why there, without much of a black community and not, say, a city? Was he one of the Windrush healthcare workers helping the NHS? I'll never know his story. Thinking about him provides a perspective, albeit speculated, that isn't my own. And not enough has changed from the discrimination and disadvantage he faced. Covid and BLM have highlighted this. I've been reflecting on what I can do. I'm in a position to. I've worked hard to get here and have my own 'white privilege' and access. It gives me influence and power. So, I want to exercise this carefully and in the cause of tackling inequality.

Increasingly want data - to examine decisions through the lens of inequality and the difference something might make. We say we've been doing that, indeed have a statutory duty to, but too often not with much rigour or true understanding. I'm also I think noticing more, being more inquisitive. So, I'm also speaking to more people different to me, listening to other voices and perspectives. I'm still learning.

In my brief stint at the London Nightingale Hospital I noticed how entirely white the leadership team that came together was, so predominantly were the clinical leadership designing the pathways of care. Unconscious bias in action in the face of an emergency. In pulling teams together quickly it was people 'like us'. But looking deeper what is the make-up of our ICU workforce? Is it as diverse as it should be? Are other parts of our workforce?

It's not just in leadership that ethnic minorities are under-represented but specialties and specialisms too. I'm also making sure I help, mentor and support black and ethnic minority colleagues. I'm also talking about race, recognising that I won't always use the right words, will offend some (not intentionally) and my language might be clumsy or unknowing but my intentions are in the right place. It helps to take an imaginary viewpoint from Mr Paul for the dignity, respect and compassion everyone deserves to enjoy.