

# Why BME nurses lack opportunities in today's NHS

<http://www.nursingtimes.net/why-bme-nurses-lack-opportunities-in-today%E2%80%99s-nhs/5000641.article>

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Neslyn Watson-Dru e answers Nola Ishmael's question 'Why are there so few BME nurses in senior NHS posts?'

Part of the answer to [Nola Ishmael's question about the lack of BME nurses in senior NHS posts](#) will always be lack of opportunities. Information does not filter down to BME nurses, and when it does some nurses are reluctant to undertake positive action programmes.

The reason is they are fearful of organisational cultures which question why BME nurses are getting special development resources that other nurses are not.

People who are most successful at work have had career planning and career development, and are fully aware of what is expected of them at work.

Career planning is what the individual does; career development is what the organisation does in conjunction with the individual, commonly known as talent [management](#).

Other crucial factors in career development are that an employee understands: what is done or not done in the organisation; the organisation's strategic objectives and how the employee contributes to the achievement of these; the politics of the organisation; and the personal strengths and development needs of the employee.

In addition, an employee needs to have good communication and interpersonal skills, such as competence with win-win negotiation, conflict resolution strategies and influencing skills. Positive attitudes and skills in managing difficult people are essential.

It is an incontestable fact that, irrespective of how far a person from a BME background climbs the career ladder, they will still experience subtle and unconscious behaviours and motives to undermine their confidence.

In fact, all successful BME people, irrespective of industry, will share this. Even in the face of low expectations, adversity and difficulty, they will have learned to draw on their confidence and emotional intelligence. Just as importantly, they will have begun to understand themselves and to develop clarity of purpose.

Nola referred to Beacon Organisational Development, the organisation which developed the [NHS](#)  demonstration programme – a leadership, career and personal development programme for BME staff which operated between 1993 and 2006.

Now there is the [National Breaking Through Programme](#) and every chief executive needs to get behind the programme and make it a success.

In addition, strategic health authorities not currently developing their bands 5-7 staff need to do so. An example of good practice is Portsmouth Hospitals NHS Trust which has commissioned a programme of career development workshops for its BME bands 5-7 staff. Plans, meanwhile, are being finalised for [Beacon Organisational Development](#)'s 2009 conference, to take place in Birmingham on April 30, 2009

The theme of this year's event, which will be attended by past Beacon graduates and other delegates, is From Vision to Reality. Workshops will address a range of issues affecting BME nurses.

Speakers – also Beacon graduates – will include Agneta Synthia Bridges, secretary general of the International Confederation of Midwives, and Pamela Chandler, head of equality and diversity at Birmingham's Heart of England Foundation NHS Trust.

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