

Greetings from the Staff Care and Development team!

It's been so lovely to see the progress of all teams on their projects, and to talk about this with you at our latest Community of Practice. What a **huge variety and scale of impact** you've all been making across the country! As usual, we have some ideas to share with you all...

Let's talk about: embedding racial equity

We know that staff and service users have unequal experiences every day for many reasons, including the impacts of structural biases in the systems and attitudes we live and work within. As well as polishing the lenses of our privilege glasses (the better to see inequity with - see section below), it's important that we roll up our sleeves and take positive action. In a video we shared at our workshops back in March, Dr Camara Jones uses an allegory of [racism as a conveyor belt](#) carrying us away from equity, to prompt us to action. So how can we turn around, and start walking back towards greater equity?

Getting curious

Don't be complicit in racism denial - every system and structure has a legacy of inequity, and as simple as it seems, naming it is the first step to change. Be curious - how does racism operate on your ward? Who's missing from decision making; who do the current policies and norms benefit most; what isn't being talked about? People who have direct experience of racism will see things more clearly, so listen to these voices, and approach the uncomfortable conversations openly and honestly (including with yourself!).

Moving off the sidelines

One of the most obvious ways that racism appears is through intentional abuse towards specific individuals or groups. If you see or hear this happen, let people know you noticed - if the victim, perpetrator, and other observers know you won't accept it, it's much easier to make it unacceptable. If you want to take the next step, make a plan for how to stop it happening in the future. Could you distract or interrupt? An in-depth conversation later could also help to shift attitudes. To avoid a pitfall, make sure that what you're planning to do will actually help those involved! Making assumptions can put you on unhelpful paths... Our [Equity Impact Assessment](#) can help you think about what kinds of questions to ask.

Know when it is(n't) about you

Institutional racism continues when there is inaction in the face of need. Anti-racism action needs everyone - to understand the

problem, to plan and organise, and to make changes happen. Keep in mind though - it's about the people with the needs, not about the people taking action. The action that's needed might be boring, or thankless, or not what you thought it would be. Mucking in is more likely to be uncomfortable than glamorous, but the potential impact is huge!

So, after all that food for thought, we'd like to leave you with a **question to consider**:

How does race, or other forms of privilege, impact how people interact on your ward, and what do you want to do about it?

Something for your toolbox: Privilege Primer

Do you want to see the world through the lens of privilege? Let's start with a definition: having privilege means having **advantages that others don't**, and **not facing barriers that others must overcome**. It doesn't mean not struggling or working hard, and it doesn't mean having privilege in all areas, but it does mean that you might have benefited from resources and opportunities that others didn't have.

To get a little more personal, privilege looks different for everyone. White privilege, or the advantages that our society gives to white people over those from other racial backgrounds, is a major form of it, but there are many others, and everyone is affected by a complicated intersection of all these types. We'd like to encourage you and your team to take a few minutes to answer the ten questions in [the Privilege Primer](#), a reflective exercise to shed some light on the forms of privilege that may affect you.

And if all of that wasn't enough:

- As usual, we've got a list to offer for your next library visit!
 - [Natives](#) by Akala for a very readable introduction to the history of race in Britain
 - [Why I'm No Longer Talking to White People About Race](#) by Reni Eddo-Lodge to explore the challenges around racialised discussions
 - [Black Identities and White Therapies](#), edited by Divine Charura and Colin Lago, for a collection of perspectives on race in psychotherapy - easy to dip in and out of over tea breaks!
- If you want to get involved in anti-racism action, here is a [checklist for allies](#) that Dr Raible developed to help you make a positive change and avoid some common areas where people get stuck.

- For those wanting more detail, this [detour spotting](#) blog, while written for a North American audience, is a thought-provoking exploration of some of the ways we can, even with the best of intentions, fall into traps of reinforcing harmful dynamics around us. If you're in a rush, perhaps start with numbers 4 (blame the victim), 13 (the penitent - saying sorry without acting), 18 (the isolationist - seeing incidents and not the pattern), 20 (teach me - expecting only people of colour to be the educators), and 27 (silence).

A view from the ward: Dalston and Adams Wards

Both Dalston and Adams Wards in St Mary's Hospital, Warrington, have been reconsidering how best to offer support around incidents. Adams are focussing on the support that they can offer to staff following an incident, whereas Dalston are also revisiting how best to support service users after incidents as well as aiming to reduce the number of incidents taking place.

Adams Ward are taking the lead on designing a 'soothe room' for staff from which staff across the hospital will be able to benefit; enabling Dalston to focus efforts on a 'chill out room' to be used post-incident by service users. Both rooms are intended to offer spaces for those who need it to step away from the ward, de-stress and recover from unsettling events. Both wards have sought feedback from wider staff teams and service users in order to co-design the spaces, and are in the process of pitching to their organisation for funding to enable delivery.

Dalston Ward have also been focussing on how to reduce the prevalence of incidents in the first place - focussing particularly on incidents of racial abuse from service users. As part of their project, they will be co-designing and co-delivering activities to celebrate and educate about cultural differences, with the ambition of generating better understanding and respect among staff and service users.

Updates from the Culture of Care team

Offer	Updates
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Project coaching for teams	<ul style="list-style-type: none"> ● We are coming to the end of team coaching for this cohort, with final sessions taking place in early September. ● Teams are working through the next steps implementing their projects and are thinking about how to keep progress going. Please do use our 'Sustaining your culture of care' pack to help with this! ● Get in touch with cultureofcare@thepsc.co.uk to schedule your next session, if you haven't already.
Individual coaching	<ul style="list-style-type: none"> ● As with team coaching, we are coming to the end of the individual coaching offer for this cohort. If you have been nominated but haven't yet taken part please do get in touch with your ward manager or coaches and we can try to accommodate you before the cohort closes.
Reflective practice training	<ul style="list-style-type: none"> ● Supervision sessions are continuing to take place, with facilitators having explored how they might run their group, and how to connect with existing arrangements.
Community of practice	<ul style="list-style-type: none"> ● Our summary of the June Community of Practice is available on the Culture of Care website. We very much enjoyed hosting the second and final Community of Practice for cohort 2 recently, and will link to a summary from this in our next newsletter. ● Get in touch with cultureofcare@thepsc.co.uk if you have a story you want to share, or a topic you want to discuss at the next event, which will take place this spring, during the second cohort of the programme.

That's all for now! You can find everything above and more on our website: www.cultureofcare.thepsc.co.uk.

Best wishes,

The Culture of Care: Staff Care and Development team

cultureofcare@thepsc.co.uk

www.cultureofcare.thepsc.co.uk

This email relates to the Staff Care and Development strand of the Culture of Care programme. The other five strands are being managed separately. For information on the other strands, please visit the websites of the [National Collaborating Centre for Mental Health \(NCCMH\)](#) and the [Foundation of Nursing Studies \(FONS\)](#).

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