

Contents Page

Summary	Page 3-4
Recommendations	Page 4-6
Introduction	
• National and Regional Strategies	Page 6-7
• Literature Review	Page 7-8
• Population and Workforce Data	Page 8-9
• Rationale	Page 9
• Aims	Page 9
Methodology	Page 10-11
Results	
• Student survey responses	Page 12-16
• Career advisor survey responses.....	Page 16-19
• Work experience data.....	Page 19-21
• University admissions data.....	Page 21-29
• University EDI Work	Page 29-31
• 1:1 Interview Thematic Analysis	Page 31-38
Analysis	Page 38-42
Recommendations	Page 42-44
Conclusion	Page 45-46
References	Page 46-47

Supporting a diverse AHP workforce: scoping career and clinical education opportunities and experiences

Summary

The NHS Long Term Plan has a focus on tackling health inequalities particularly among the Black, Asian and minority ethnic (BAME) population. One way this can be mitigated is by widening participation and encouraging more BAME people into NHS careers where there is poor representation, such as some allied health professions (AHP).

The need for this is fundamental as it helps the workforce sensitively meet the population's linguistic, racial and cultural needs and ensures the healthcare service we provide is fit for purpose. By meeting these needs we help bridge health inequalities within BAME communities. Furthermore, by increasing racial diversity in the workforce we can improve diversity of thought and overall effectiveness (Cox & Blake, 1991).

The People Plan has encouraged all healthcare providers to set targets for the percentage of BAME staff they employ, and in the Midlands, this has been set at a minimum of 20 per cent. This project aims to investigate the number of BAME students on AHP courses, explore their experiences of being on placement within the Nottingham and Nottinghamshire Integrated Care System (ICS) and identify potential barriers to getting on to courses and entering the local workforce.

A mixed methodology was used, collecting data from:

- Questionnaires sent to sixth form students and careers advisors
- Work experience information provided by the ICS work experience leads
- Freedom of information (FOI) requests made to universities
- One to one interviews with BAME AHP students
- Discussions with university equality, diversity and inclusion (EDI) leads or admission tutors.

Key Findings

The project focused on an in-depth examination of a range of areas including awareness of professions, work experience, university application process and placement experiences among the BAME community and highlighted some interesting and important findings.

Considerable variability in awareness of the range of Allied Health Professions career options available may be a barrier to the people from the BAME communities entering the AHP workforce. BAME students are under-represented across our Allied Health professions. There may be variation in how students from different backgrounds access career information with the results from the

student questionnaire suggesting that BAME students may be more likely to seek career advice from family and teachers, whereas white students favoured the internet for careers advice.

The student and career advisor questionnaires show that physiotherapy and paramedic sciences are the two most well known and popular AHP careers. The least well known are orthotist, art therapist, drama therapist and music therapist. Interestingly some AHP courses are ethnically diverse, such as operating department practice, diagnostic radiography, therapeutic radiotherapy and podiatry, whereas the most well-known courses are the least diverse - physiotherapy and paramedic science.

Work experience data shows that some AHP roles do not offer work experience as standard. It is far more likely that a student will be able to access work experience if they know someone in the profession. As BAME populations are underrepresented in the professions this may act as another barrier.

There is some evidence to suggest that during the application process to AHP courses, there may be up to 20 per cent less chance of a BAME student being offered a place on some AHP courses. Interestingly, within physiotherapy this appears to be at the application rather than the interview stage. It was also demonstrated that universities were at different stages with regards to EDI and widening participation. For universities who had more of a focus on EDI there was little difference between the application to offer percentage for BAME students, resulting in increased diversity on courses.

Through the use of one-to-one interviews with current AHP students, it was evident that many encounter racism when they are on placement. Many students feel like “the only one” of a different ethnicity on their course; some spoke of their acceptance of racism as something they had to deal with, while others reported finding it hard to speak up when they felt disadvantaged. This may be an important factor in the higher dropout rate among BAME students. The data highlights the complexity of the issues and demonstrates significant differences between the different allied health professions.

In summary, the most well-known and popular AHP career choices have the least number of BAME students, which suggests there may be a range of barriers to contemplate. Consideration must be given to perception of those in these roles, and the provision of different role models to alter perceptions and demonstrate diversity. Furthermore, the difficulties getting past the application part of the admission process may also result in low numbers on courses. Another issue for further exploration is why the BAME students on the most ethnically diverse courses are not entering the workforce in Nottingham and Nottinghamshire ICS after graduation. Potentially BAME students may prefer to return to their hometown for financial or family reasons or due to the discrimination they have reported within the ICS. Therefore, further work should ensure that the culture is inclusive and current BAME students feel that they would like to work in the ICS. In addition, more needs to be done

to encourage local school and college students to consider applying to train in one of the Allied Health Professions.

Overview of Recommendations

For Further Research

1. To further understand the barriers and enablers for clinical educators in creating inclusive placements and addressing racism faced by students on placement
2. To understand the migration patterns of AHP students from BME backgrounds and why they are not represented in the NNICS qualified workforce (especially for those training courses such as ODP, podiatry, orthoptics, diagnostic radiography, radiotherapy, where the student cohorts are more diverse).
3. To establish a deeper understanding of the barriers that are preventing physiotherapy and paramedic applicants from BME backgrounds getting places on training courses

For the ICS

1. The ICS should continue to provide and further promote visible and inclusive leadership, ensuring opportunities for organisations to develop all aspects of inclusivity and diversity in the workplace
2. Ensure the workplace culture offers opportunities and transparency to initiate conversations around race, discrimination, equity and culture.
3. Provision of bespoke training required for all staff on cultural competence, discriminations and allyship
4. Consider setting up a mentor program for BAME AHP students aiming to help inclusivity, provide support and reduce attrition rates, as well as provide good links to the ICS for these students which might be useful when they are considering future employment.
5. Collaborative working with Higher Education Institutions (HEIs) to ensure issues identified as training needs for clinical educators are included in clinical educator updates or newsletters.
6. Ensure recruitment teams work closely with EDI leads so that information portrayed is inclusive and encourage people from BAME communities to apply.
7. Consider the use of external support/ advocates to deal with any possible incidents around racism during student placements, as this is less likely to impact on placement provider and university relations.

For Higher Education Institutions

1. BAME networks at universities to be more accessible so students know how to find them and can attend.
2. Ensure BAME students feel supported and understood, by making certain that tutors have knowledge and understanding of student's race/ culture and possible barriers and giving student information on how to report incidents of racism. The HEI should make sure that

any incident reported should be dealt with appropriately.

3. Universities should take steps to decolonise the curriculum- consider which resources are being used to ensure inclusivity.
4. Consider admissions criteria to ensure application scoring and interviews are not biased to favour White people over BAME.
5. Ensure that training courses within degrees are offered around cultural diversity, discrimination, racism and allyship so that all students are better equipped at treating their fellow colleagues and patients with respect and these conversations are embedded.
6. Training for clinical educators would be beneficial to empower them in challenging racism from patients and other staff, to support students from BAME communities if they experience racism on placement and to understand barriers BAME students may have and how to better support them.

For Work Experience/ Career promotion

1. Promote AHP career information and opportunities within schools that have a high percentage of BAME students, including information about writing a good application, work experience etc.
2. Increase access to work experience and promote understanding amongst qualified AHP staff of the importance of this in creating access and inclusivity; explore virtual work experience options to reach greater numbers.
3. Work with career advisors/ schemes to help promote AHP to younger ages.
4. Provide career advisors with appropriate websites to direct students to and provide information regarding career pathways and apprenticeship opportunities.

For Schools/ Colleges

1. Improve links with ICS wide career and work experience platforms to ensure all students are aware of AHP careers and understand routes into these professions
2. Ensure careers advisors receive training around culture/ race and possible barriers so they can better understand BAME student needs
3. Continue to bridge disparity of attainment between ethnic groups
4. Offer appropriate support to BAME students when applying for AHP courses

Introduction

National and Regional Strategies

Following the release of the People Plan 2020/2021, the Midlands Workforce Race Equality and Inclusion Strategy set a target for organisations to identify staff groups with low numbers of BAME staff and to aim for a workforce that is 20% BAME. NHS Digital (2019) shows that nationally, on average only 12.2% of AHPs are BAME with the least diverse profession being ambulance staff with only 3.4%. This significantly falls below the 20% target and needs to be investigated further to understand the underlying causes. With the NHS Long Term Plan suggesting that AHPs will have a major role to play in achieving its aims of prevention of illness and tackling health inequalities, it is vital that AHPs increase their numbers of BAME staff, as well as look to address the lack of BAME staff progressing into leadership roles in line with the targets set by the Workforce Race Equality Standards (WRES). Having a more diverse organisation will lead to a culture of inclusion, and with greater staff engagement comes better patient care, reduced mortality and greater cost savings (Coghill and Chinembiri, 2019).

National organisations are working on projects that align to this report; the Health Education England (HEE) RePAIR project focuses on Pre-Registration Attrition and Improving Retention, although not focusing on BAME students and workforce exclusively, there is a focus on AHPs. Health Education England are investigating the pre-registration BAME AHP workforce in the London area, as the numbers there are very low in comparison to the levels of diversity within the local population. Although HEE data shows that between 2014-2020 there has been an increase in the BAME AHP workforce, recent data from the Health and Care Professions Council (HCPC) shows that the numbers are still significantly below the national average with lower levels of Asian and Black HCPC registrants (5.9% and 2.7%) than there are in the NHS staff population as a whole in England (10.4% and 6.1%)

Literature

There is a breadth of research outlining the importance of ethnic diversity in the workplace. Hunt (2020) is a robust report that provides a compelling case for ethnic diversity in the workforce, providing better outcomes and more successful working. Their research from 2019 showed that companies in the top quartile in terms of racial diversity outperformed those in the fourth by 36 percent in terms of profitability.

A review of the literature identified seven key pieces of current research relevant to this project; most of the research available relates to the physiotherapy profession. There is little research available about other AHPs.

Bolliver (2015) investigated the ethnic inequality in the university admissions process for Russell Group universities by studying UCAS data and found that ethnic minority applicants remain less likely to receive offers from Russell Group universities than comparably qualified white applicants

even when other contributing factors are controlled for. However, this examined general admission data and was not specific to AHP courses.

Hammond et al (2019) used focus groups to explore the experience of BAME pre-registration physiotherapy students and determined that students had a feeling of being an outsider and identified behaviours by others that marginalise BAME people. The research paper demonstrated a range of challenges which students from BAME backgrounds face within an academic and practice learning environment. They identified that there is training needed for educators to listen to these students and understand where practices could be more inclusive. Norris et al (2019) found similar findings to Hammond et al (2019) but also found that students in this study had a desire to work with the profession to improve inclusion within the workforce. Shanley et al (2019) focused on the experience of international physiotherapy students, using focus groups; they found that greater training was required for clinical educators and suggested that building knowledge in cultural competence was important not only for the students, but for academic staff and practice educators.

Norris et al (2018) reviewed physiotherapy student marks in the south east of England and found that there were significantly lower assessment scores for Asian, Black and Other/Mixed ethnicity groups, most notable in clinical and observed assessments, compared to their white British colleagues. BAME students were more likely to receive a lower overall award or no award. These findings suggest significant attainment gaps in pre-registration physiotherapy education in this specific geographical region, particularly for BAME students.

Hammond et al (2017) looked at the experiences of newly qualified nurses and physiotherapists seeking employment and discovered that graduates described accommodating strategies where they modified aspects of their identity to fit in. Participants from minority ethnic backgrounds avoided applying to certain hospitals due to perceptions of discriminatory cultures. In contrast, some participants recognised that other graduates gained from their identity.

The North East ambulance service recognised their lack of diversity and set up a project using BAME ambassadors to promote job roles within their service, set up career open days and have conversations with members of the BAME community regarding jobs.

Local AHP and Population Data

The People of Nottinghamshire (2017) reported on the percentage of BAME people across Nottingham and Nottinghamshire and found that 12% of people identify their ethnicity as BAME. There is a significant difference between Nottingham city (28.5%) and Nottinghamshire County (4.5%). Within the city, 13.1% of people are Asian, 10.1% of people are Black, 6.6% Mixed Ethnicities and 1.27% other ethnicity. Whereas in the county 2.18% are Asian, 0.68% are Black, 1.36% are of

Mixed Ethnicities and 0.26% other ethnicity. The East Midlands as a whole has a BAME population of 11.7%.

Within Sherwood Forest Hospitals NHS Foundation Trust (SFH) and Nottinghamshire Healthcare NHS Foundation Trust (NHC) the percentage of BAME AHP staff is well below the national average and in some cases even below the average for the local area. The table below shows the percentage of BAME AHPs within SFH, NHC and the ICS as a whole. Data has not been provided for Nottingham University Hospitals NHS Foundation Trust or Nottingham City Care Partnership.

AHP	%BAME at SFH	%BAME at NHC	% BAME across ICS
Physio	2.8	9.4	6
O.T.	1.8	9.9	8
Dietitian	12.5	13.8	12
Orthotists	14.3		25
Orthoptists	20.5		20
SLT		6.6	5
Podiatrists		12.3	5
Radiographers	7.2		13
Art/ Music/ Drama Therapists		11.1	11

Rationale

Although there is research to highlight some of the barriers for BAME people considering university and issues within the university setting such as increased attrition rates and an attainment gap, there is no research available to determine if the same still applies to AHP courses within the Nottingham and Nottinghamshire ICS. Much of the literature found is focused on the physiotherapy profession and there is limited research that focuses on other AHPs or AHPs as a whole. Therefore, this project will look at scoping out the educational and careers opportunities and barriers for BAME people considering a role as an AHP, with a view to provide recommendations to help to achieve the national targets set out in the WRES and The NHS People Plan.

Aims

- To identify how well understood AHP professions are among sixth form and college students
- To determine if students are taking the A Levels required to gain admission to AHP courses
- To find out where students seek career advice from
- To determine which factors affect students' choice of university
- To identify any barriers relating to the admissions process for university
- To understand the university experience for BAME AHP students

- To understand the AHP placement experience for BAME students within Nottingham and Nottinghamshire ICS
- To understand the reasons why BAME students are not choosing Nottingham and Nottinghamshire ICS as a place of work once they finish their studies.

Method

A mixed method methodology was chosen for this project, combining both qualitative and quantitative data. As this is the first project around ethnic diversity among AHPs in this area, it was deemed that quantitative data was required in order to understand the current situation from a wider perspective. However, it was also necessary to gather qualitative data to be able to understand the lived experience of the students who attend placement within Nottingham and Nottinghamshire ICS.

Ethics

The project outline was discussed with the research and ethics team at Sherwood Forest Hospitals who recommended that the project be undertaken as a service evaluation, therefore ethics approval was not required and the recommendations that will be made are for the Nottingham and Nottinghamshire area only.

Questionnaires

Questionnaires (Appendix A) were sent to college and sixth form students across Nottingham and Nottinghamshire with the help of Sherwood Forest Hospitals Communications Team, comprising of both closed and open questions through a Survey Monkey link to make it accessible to college students. The aim of the questionnaire was to establish:

- If students are taking a science or social science at A Level in order to be able to apply for an AHP course.
- What influences their career choices and where they get their career advice from.
- Which AHPs are most well-known and considered as a future career.
- Which are least well known and not considered as a potential career by this group of students.

In collaboration with the work experience leads across the ICS a questionnaire was produced and sent to school career advisors across Nottingham and Nottinghamshire via a Survey Monkey link (Appendix B). The career advisors were then sent a reminder email two weeks later to encourage participation. The questionnaire was designed to help identify:

- If there were any barriers to accessing information that would direct students towards AHP careers advice/ resources.
- What they felt the most popular AHP careers are.
- Any barriers to ethnic minority students applying for AHP courses.

- If there are any barriers to students attending work experience.

Work Experience Data

Quantitative data was also provided by the work experience leads across the ICS to show the numbers of students applying for work experience in an AHP role and a breakdown of student ethnicity was also provided. This data helped to identify if there is equal access to work experience across the ICS and if work experience is available across all professions. Also, the ethnicity data around work experience may help to highlight if some AHP careers are more popular than others for ethnic minority students.

University Admissions Data

Quantitative data was gathered through freedom of information requests; universities were asked to provide data for the past three years to show the following:

- The number of applications received from ethnic minority and ethnic majority students
- The number of interviews offered to ethnic minority and ethnic majority students
- The number of offers of places made to ethnic minority and ethnic majority students
- The attrition rate for ethnic minority and ethnic majority students
- The percentage of teaching/ academic staff from an ethnic minority

The following HEIs were chosen as they run AHP courses that send students on placement into the Nottingham and Nottinghamshire ICS.

- University of Derby
- Nottingham Trent University
- University of Nottingham
- Sheffield Hallam University
- University of Sheffield
- University of Huddersfield
- University of Northampton
- University of Salford
- Birmingham City University
- De Montfort University
- University of Lincoln
- London School of Osteopathy (Anglia Ruskin University, ARU)

Collecting this data helped to identify potential barriers faced by ethnic minority students when accessing AHP courses. It also identified any differences between application to offer rates based on ethnicity.

One to One Interviews

Qualitative data was gathered from completing one to one interviews with current AHP students. Students were recruited via a poster campaign sent to a range of AHP students who had either been on placement within Nottingham and Nottinghamshire ICS or through their course leaders promoting the project to their students at Nottingham Trent University, University of Derby and University of Nottingham, and through word of mouth from other students. This was to ensure that students from a range of universities, and a range of AHPs were able to take part in the interviews. The inclusion criteria were agreed as being;

- Enrolled on an AHP course at a local university
- Attended placement within Nottingham/ Nottinghamshire ICS
- From an ethnic minority background

In total nine interviews were completed. Consent was gained to complete and record each interview for the purpose of transcription. Data was anonymised and stored on a password protected NHS laptop to ensure data protection. The data was coded and themes were created using a recognised thematic analysis process. Semi structured interviews were used to allow for the students to express their thoughts and discuss the issues that were important to them. See Appendix C for the interview guide. Students were signposted to where to access support if required following the interview, as it was recognised that talking about issues surrounding racism can be traumatic for the individual.

Discussions with Local Universities

The local universities were contacted and discussions held with either their EDI lead or admissions tutors for AHP courses. The aim was to identify any work underway to address issues such as higher attrition rates and poorer attainment rates for ethnic minority students. The universities chosen provide a wide range of AHP courses and many of their students have placements within the Nottingham and Nottinghamshire ICS. As universities appear to be at different stages with regards to EDI and widening participation, these discussions were less structured and the information will be recorded in table format to capture the key points.

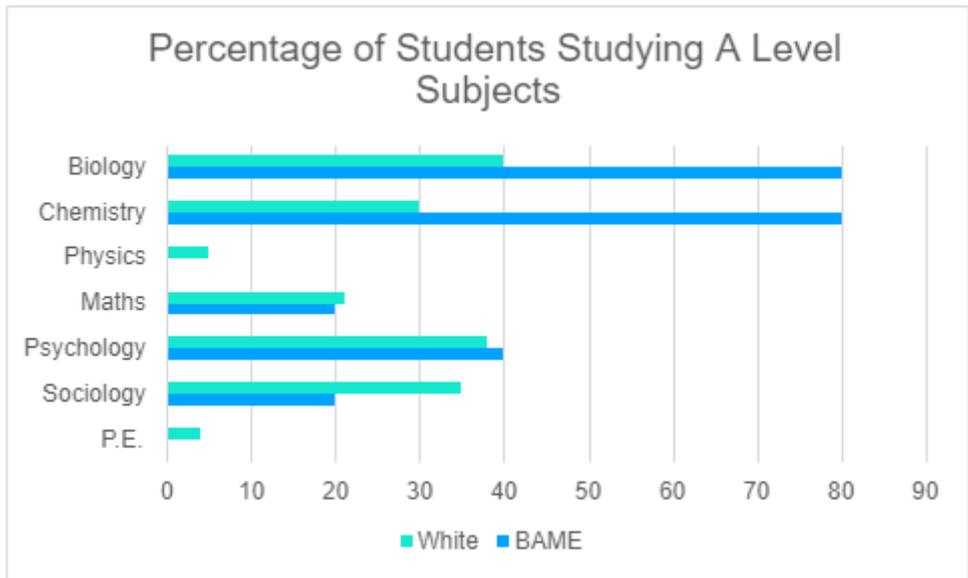
Results

Student survey responses

Career Planning and Decision Making

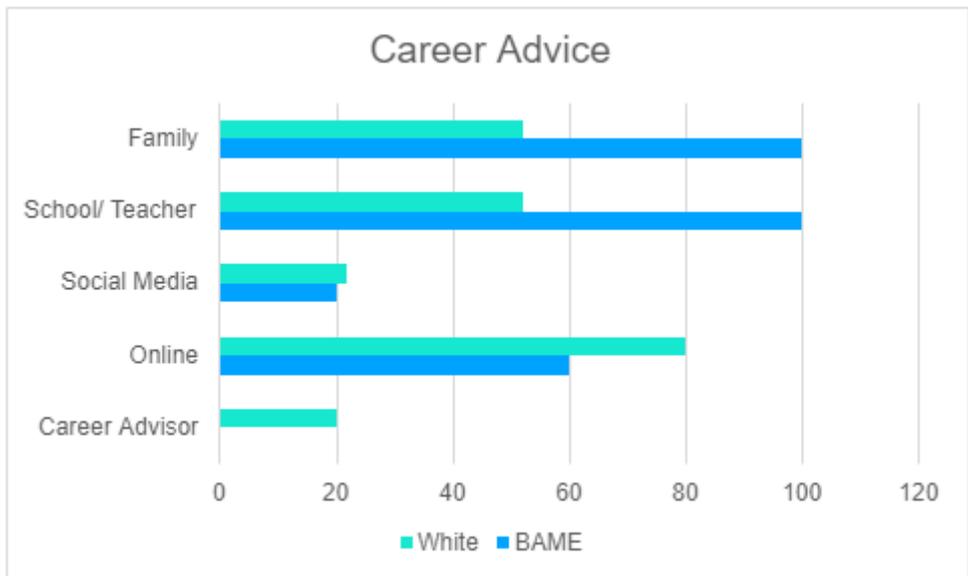
In total 46 college students completed the survey. Out of these 46, five of these students were from ethnic minorities. Two identified themselves as being Indian, one Black British, one British Chinese and one Sri Lankan.

In total 85 per cent of the students surveyed are studying a science or a social science at A Level.



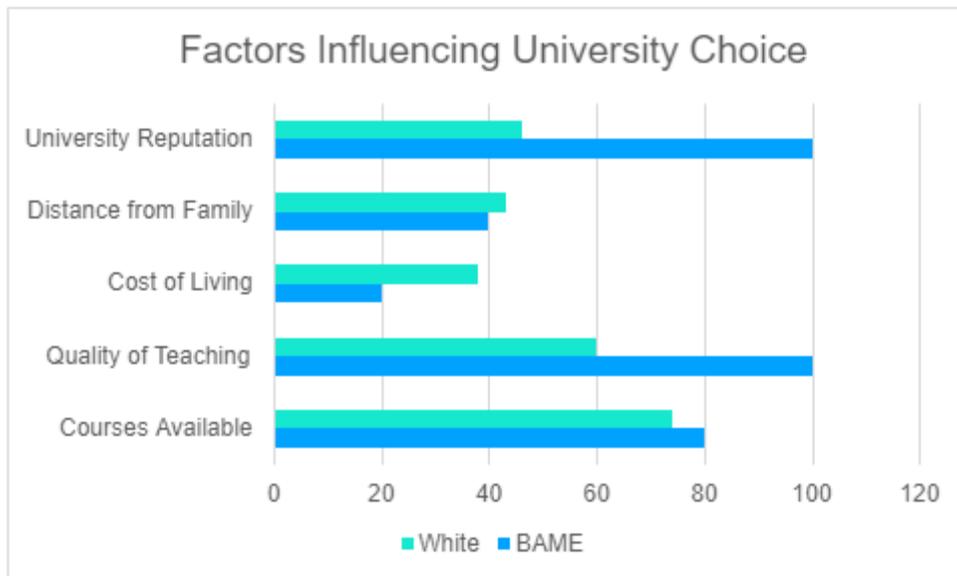
Of the students surveyed it can be seen that BAME students are more likely to be studying biology and chemistry at A Level than their ethnic majority peers, however, less likely to be studying physics or P.E. Although a small sample size, it is demonstrating that correct A Levels are being chosen to attend AHP courses.

Students were asked to identify where they seek careers advice from. The graph below shows what percentage of students accessed careers advice from various sources.



The data suggests that BAME students are far more likely to consult family members for careers advice and consider the expectations of their family more often when deciding on their future careers. This highlights the need to raise awareness of AHP careers throughout the wider community, not just focusing on the students themselves. Differences were also noted in the response to the question regarding which factors influence a person's choice of university. BAME

students considered the reputation of the university and the quality of teaching to be the most important factors when deciding on a university.



There are very few Russell Group universities that offer AHP courses; this may have an impact on the decision to choose an AHP course if the reputation of university is the most important factor within the BAME students that responded to our survey. The most common barrier to attending university was cost, followed by predicted grades. Of the students we surveyed 83 per cent (38) are planning to attend university, of the 17 per cent that are not, one has a job offer and seven are looking for apprenticeships.

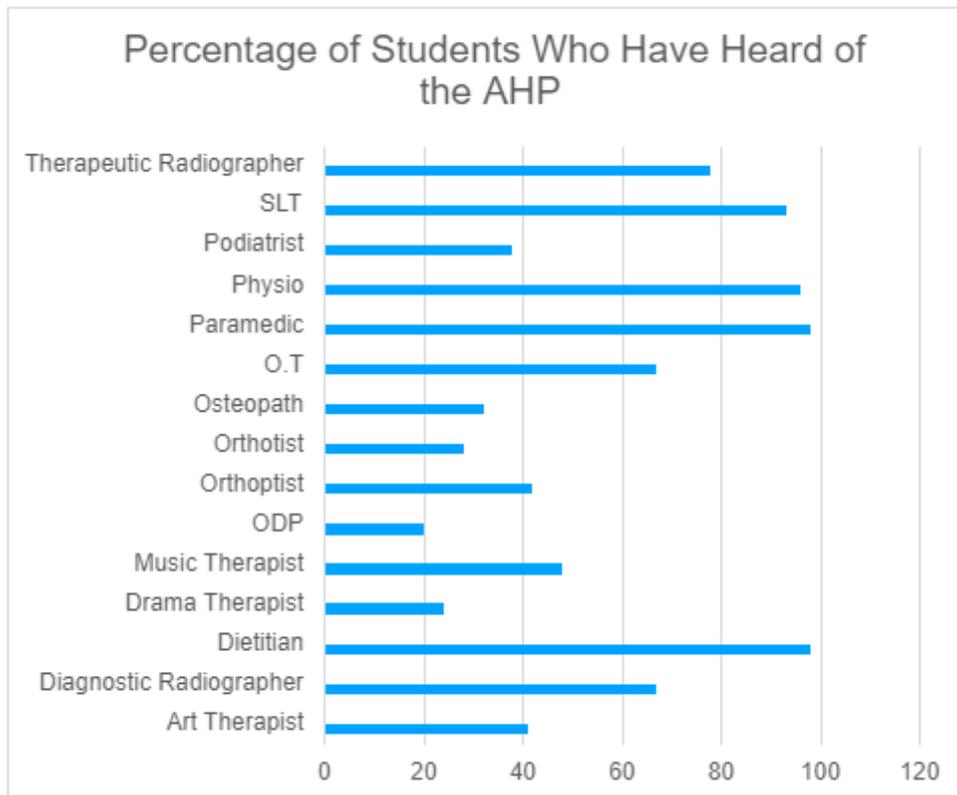
Only 43 per cent of the students surveyed reported they would feel confident attending an admissions interview for university. Students reported that having practise interviews or having more guidance on what to expect would increase their confidence going into an admission interview.

Work Experience

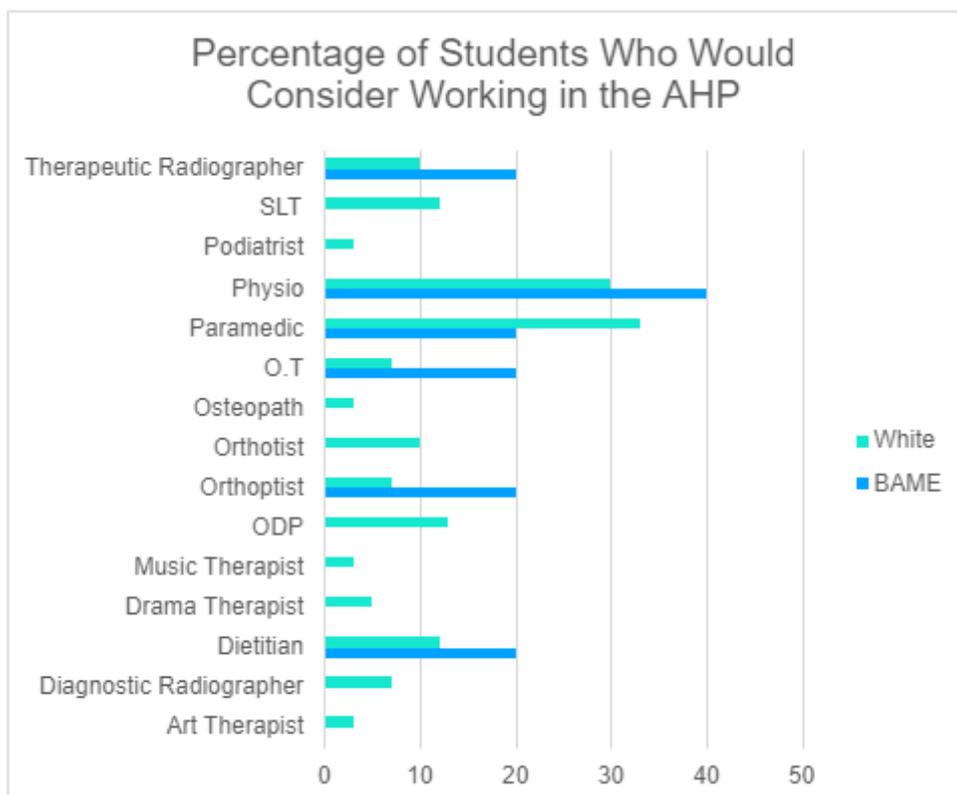
80 per cent of the BAME students surveyed have attended work experience compared with 54 per cent of the ethnic majority students. There were several barriers identified to attending work experience, the main ones being Covid-19 (not allowing face to face work experience, especially in healthcare), availability of work experience and age restrictions on attending work experience - commonly work experience time is allocated in year 10 (age 15) and many healthcare settings require the students to be 16 or 17 to attend work experience. Students reported attending virtual work experience, rather than face to face work experience.

Awareness of AHPs

The chart below demonstrates what percentage of students have heard of AHPs. Overall, there isn't much difference in knowledge of AHP roles between BAME and white students, however there are certain professions that are far less well known than others, such as orthotics and ODP.



Out of the 46 responses, 31 students said they would consider working as an AHP. The chart below shows the AHP careers students are most likely to consider working in.



The charts show that students are considering all AHP careers, although some careers are more popular than others. Physiotherapy and paramedicine are the most popular professions, with osteopathy, music therapy, podiatry and art therapy being the least likely AHP careers to be considered. Therapeutic radiography and orthoptist are more likely to be considered by BAME students than their ethnic majority peers, which may be due to the fact that these professions are more diverse than other AHPs.

Careers Advisor Survey

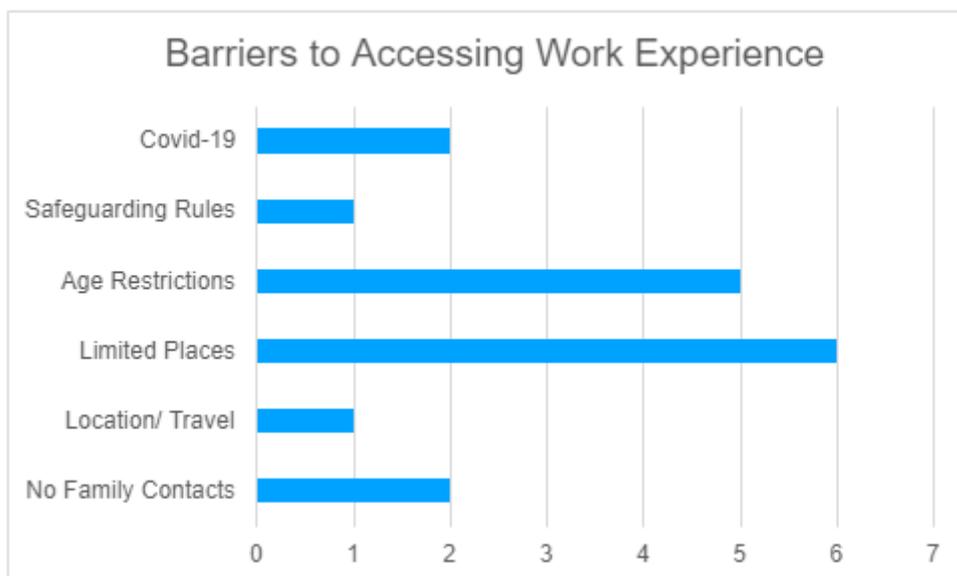
Ten careers advisors from across Nottingham and Nottinghamshire responded to the survey. Careers advisors were asked in an open question to determine where students get their careers advice from. The chart below summarises their response.



The most common responses were teachers and careers advisors. This demonstrates a difference of opinion to those which students reported, as many of the students surveyed reported they found careers advice on the internet, with only one student mentioning careers advisor.

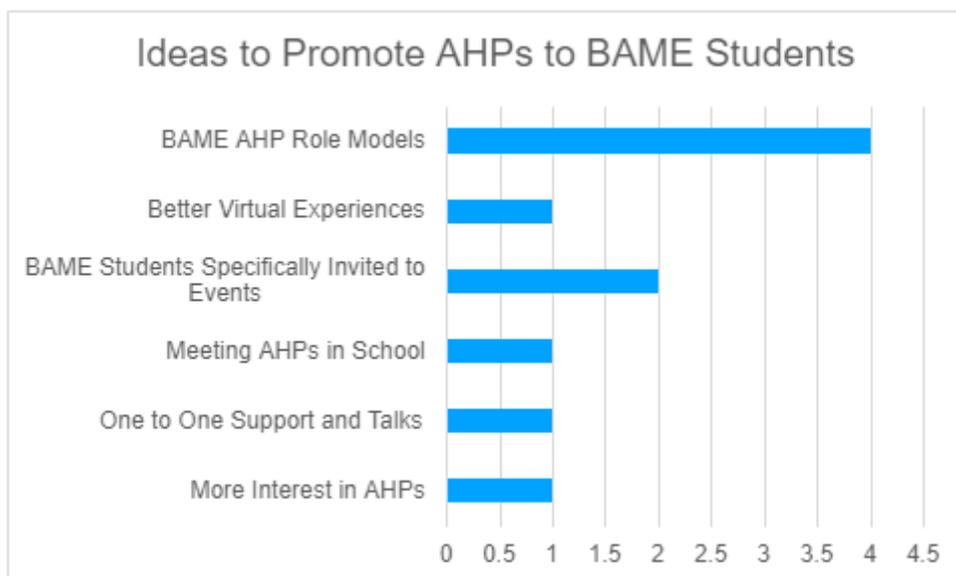
Only 40% of careers advisors reported that students are given time to attend work experience, however, 70% reported that their students have attended some virtual work experience. This highlights the importance of a virtual platform for work experience in the current Covid-19 pandemic. Year 10 is the most common year for students to attend work experience with eight out of ten careers advisors reporting students attend work experience in this year, compared to 6 stating work experience happens in year 12. It is interesting to note that 40 percent of careers advisors did not recommend students completing work experience outside of the school work experience week, which could result in further competition for places.

The chart below identifies the most common barriers to students attending work experience. Interestingly careers advisors feel that having a family contact within the area the student wishes to complete work experience is a benefit.



The majority of careers advisors report that they can confidently direct their students to the work experience portal for Nottingham/ Nottinghamshire, and report they have enough AHP career resources to direct their students to. However, when asked which websites or resources they would recommend for their students, the GMC website and RNC website were mentioned which suggests a lack of understanding of AHP roles among careers advisors. Careers advisors reported they would like more information regarding pathways into the professions and what students can expect when it comes to admission interviews for university. Interestingly 90% report that support is in place for students to help them prepare for their university interview, however the survey of students found that only 43 per cent of students would feel confident with the interview.

Career advisors were asked if they felt there were any barriers to ethnic minority students applying for AHP courses. Six out of ten reported they did not feel there were any barriers, however, the main barrier identified was the lack of family connections within AHPs, followed by cost of university. In addition, it was also highlighted that there was a lack of knowledge about the possible barriers BAME students may have, therefore identifying a need for cultural training for all careers advisors so that they can better support BAME students. The chart below shows the ideas careers advisors had to encourage more ethnic minority students to apply for AHP courses.

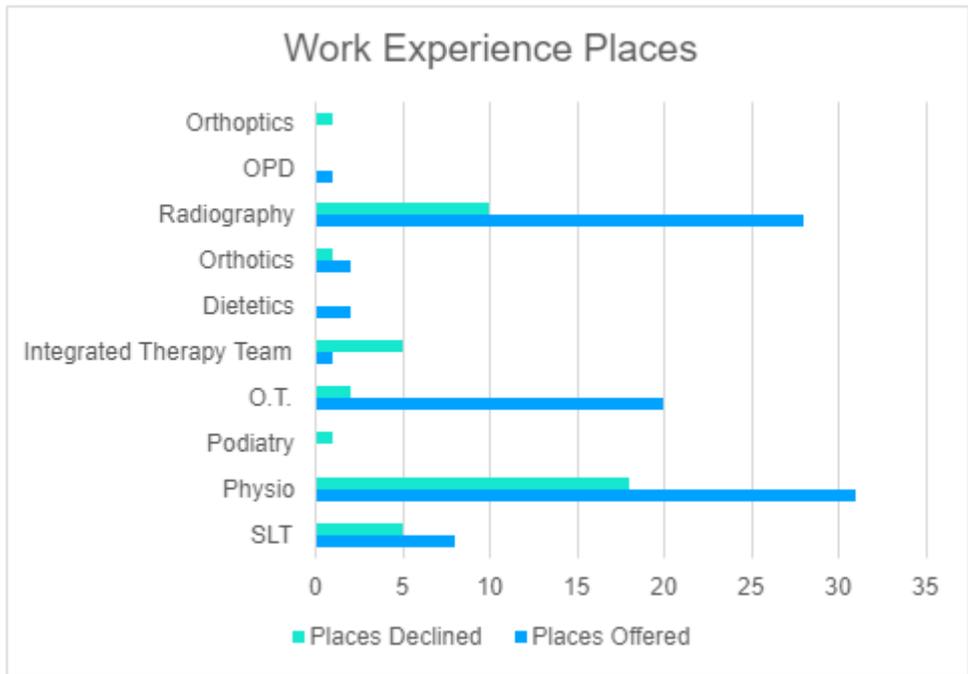


Career advisors felt confident in directing students to apprenticeships but recognised that there was a lack of apprenticeships within Nottinghamshire. Through the survey it was identified that paramedic and physiotherapist were the most popular careers choices out of AHPs, however, careers advisors stated that many of the AHPs are not at all popular with their students, with the least popular being art therapist, drama therapist, music therapist and podiatrist. This echoes what the students have reported to some extent.

Work Experience Across the ICS

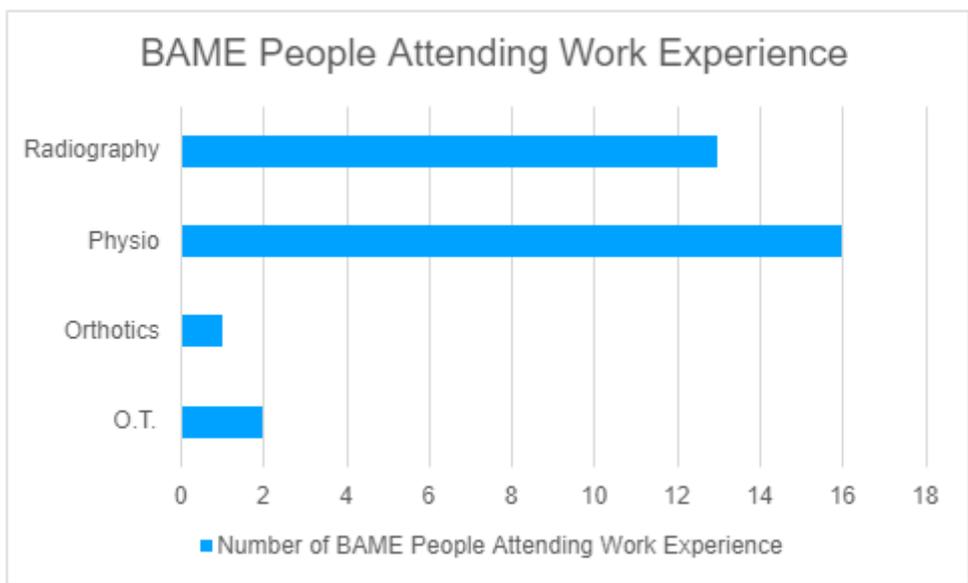
Data has been kindly provided by the work experience leads; however, no data was available for paramedics. The data used in this report is from 2019 as it is recognised that face to face work experience within the healthcare setting has been stopped due to Covid-19. Work experience offered through the work experience hub is on a first come first served basis. Although university admissions tutors report that their criteria for applicants to have attended work experience in their chosen profession has changed due to Covid-19, they are still expecting an applicant to have gained knowledge about the profession and to demonstrate this in their application.

In the 2019-2020 year the ICS offered 917 work experience placements. 147 people applied to do work experience within an AHP role; of those 147, 93 people were offered work experience. 32 people offered work experience within an AHP role were BAME.

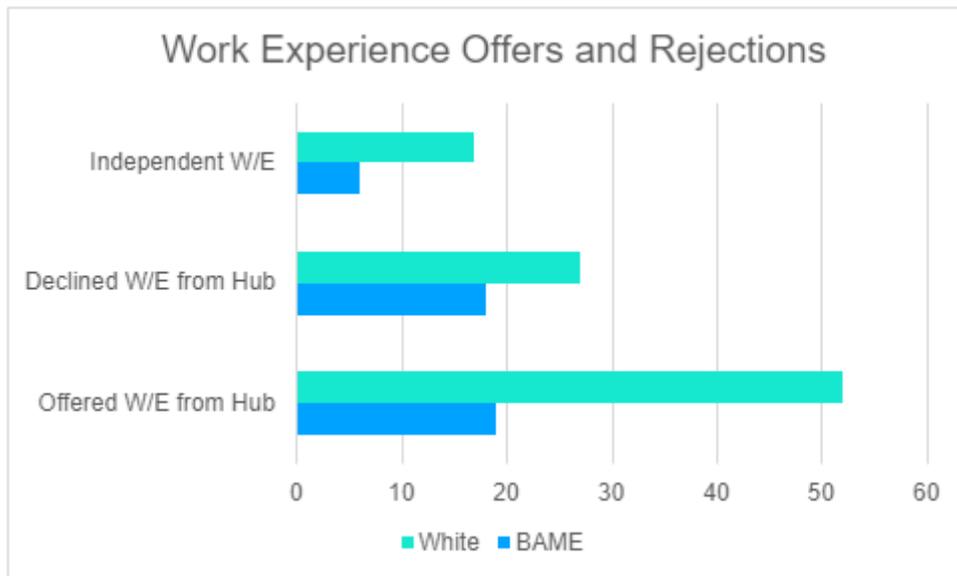


The chart above shows the AHPs that offered/ declined work experience applications throughout the ICS. 23 of these places offered were organised independently, not through the work experience hub. ODP and dietetics only offered work experience to people who organised it independently. Podiatry and orthoptics did not offer any work experience places and declined the request for work experience. Some AHPs did not receive a request for work experience or offer any places, such as art, music or drama therapy.

Across the ICS, BAME students attended work experience in only four AHP areas, with physiotherapy and radiography being the most popular choice. However, it is recognised that not all data may have been captured if work experience placements were arranged independently.



Better access to work experience across the AHPs will help to promote the AHP roles that are less well known and give more opportunity for potential applicants to gain an insight into these careers to aid their university application.



The chart above shows data from across the ICS on the number of people being offered or declined work experience based on ethnicity. This shows that you are more likely to get a work experience place if you are from a white background. As the work experience hub offers work experience on a first come first served basis other factors need to be considered, such as when schools in the more diverse areas of Nottingham and Nottinghamshire are encouraging their students to apply for work experience.

Across the ICS, there needs to be an offer from each Allied Health profession of work experience, via the work experience hub. This would reduce the the potential bias of only family and friends of healthcare staff being able to attend work experience arranged independently. Virtual work experience days may be beneficial in the current Covid-19 pandemic. It would also be beneficial for college/ school careers advisors to advise students wanting work experience in an AHP role to apply early for work experience.

University Data

Limitations of the data

The limitations of the data need to be considered when examining the results in this section.

- Not all universities provided all the data requested.
- The university of Salford provided limited data, affecting the quality of information for orthotics.
- Due to the risk of identifying specific individuals universities are unable to provide exact numbers in some cases, documenting <5 as an alternative. If the exact figure could not be extracted from the data, then this data was excluded.
- Some universities reported high numbers of “unknown ethnicity” in their data

Percentage of Ethnic Minority Teaching Staff

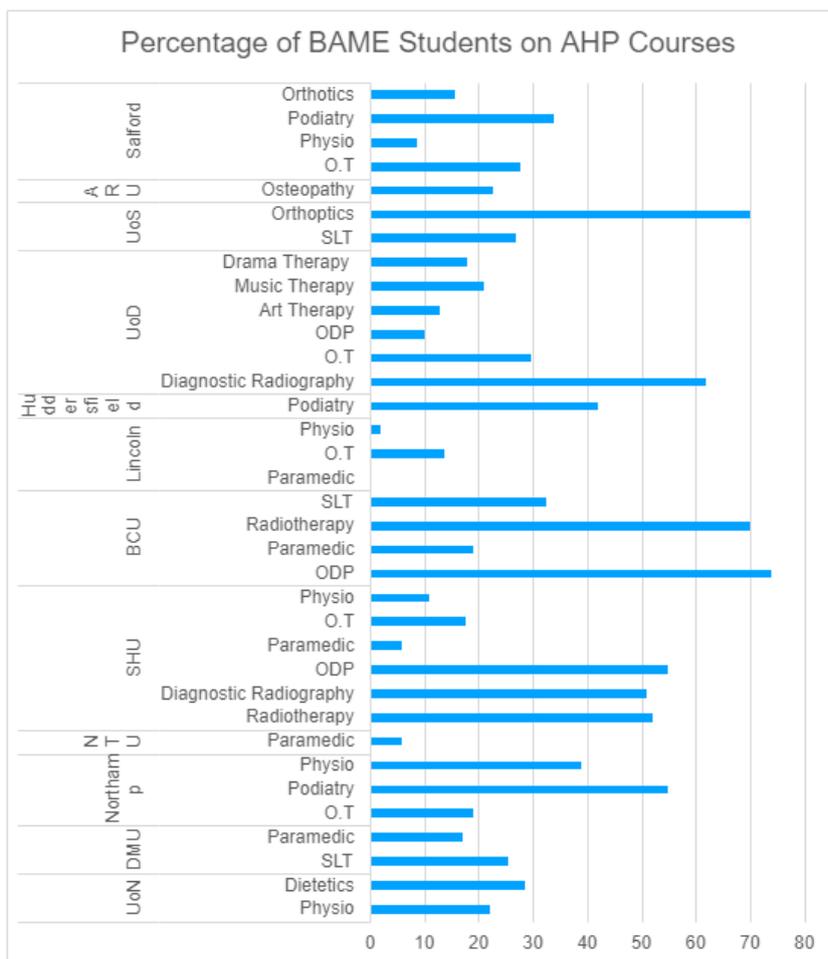
As research suggests role models within their chosen profession are very important for ethnic minority students, universities were asked to provide data on the percentage of teaching staff that are from an ethnic minority background. This data was provided by seven universities, for the last three academic years. The universities who did not provide data on this stated that their Human Resources department does not hold ethnicity data on staff. On average **8.03%** of AHP teaching staff are of an ethnic minority. ARU reported the consistently highest percentage of **17.7%** on their Osteopathy course. Several courses reported **0%** of their teaching staff as being from an ethnic minority.

Attrition Rates

It is widely reported that BAME students have a higher attrition rate than white students from university courses. However, limited information was available on AHP courses. Attrition data was provided by seven universities for the last three academic years for each of their AHP courses. On average the attrition rate for BAME students was **6.7%** compared with **3.8%** for white students on AHP courses.

Diversity on AHP Courses

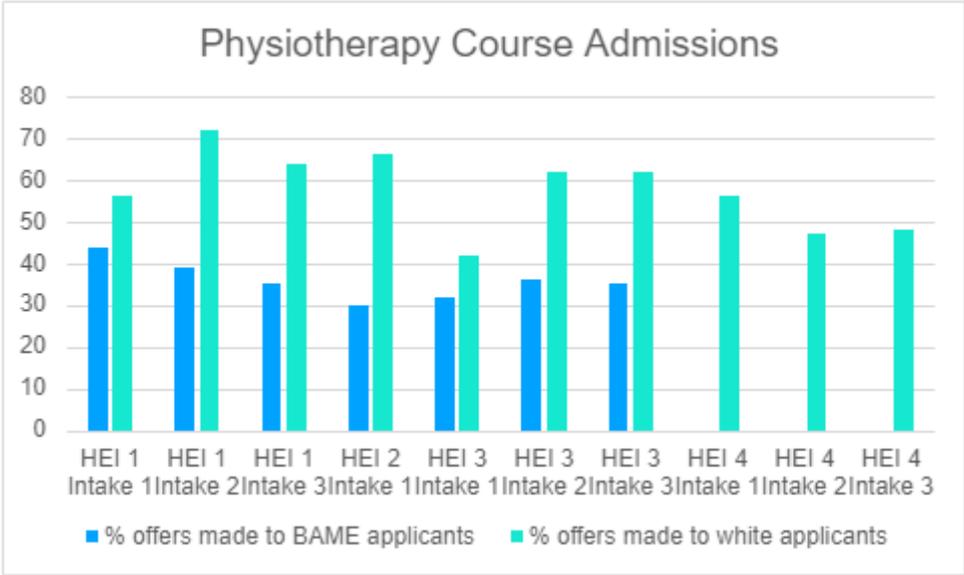
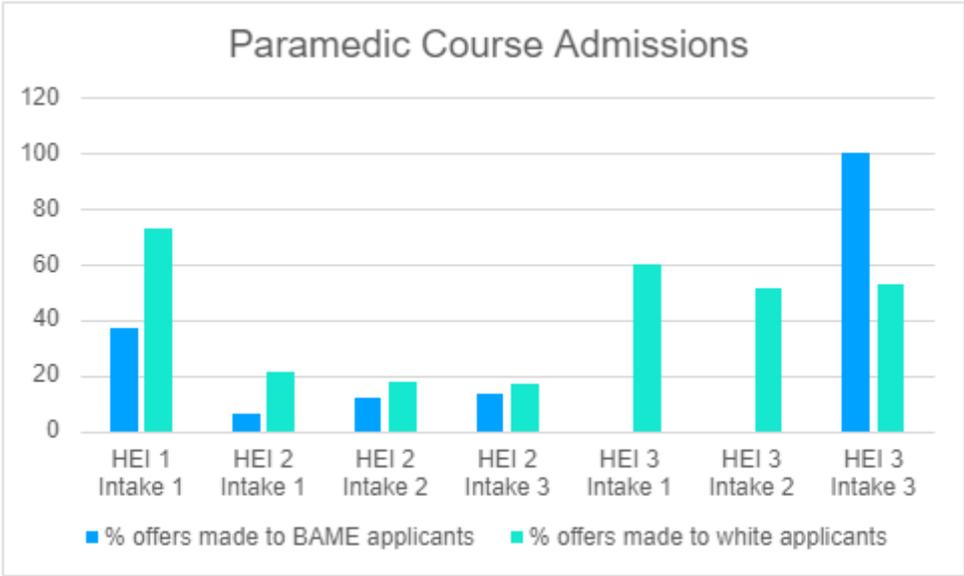
Universities were asked to provide data on the percentage of BAME students on their AHP courses. This was to identify if the low number of BAME staff in AHP roles within the Nottingham and Nottinghamshire ICS was due to low numbers of BAME students training to be AHPs. The percentages shown are an average on each course over the last three academic years.

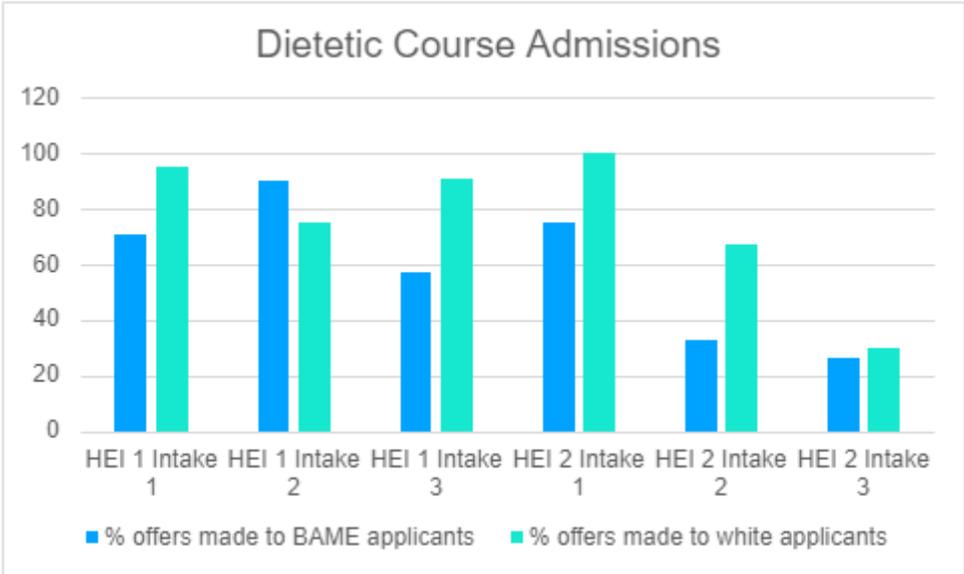


The chart above shows the percentage of BAME students on AHP courses. It is clear that there is a vast difference between the most and least diverse courses. Commonly the AHPs of podiatry, radiotherapy, diagnostic radiography, ODP and orthoptics are the most diverse courses with over 50% of students on most of these courses being BAME. However, despite being the most well know AHP courses, physiotherapy and paramedic science were the least diverse, with as little as 0-2 % of BAME students on some courses.

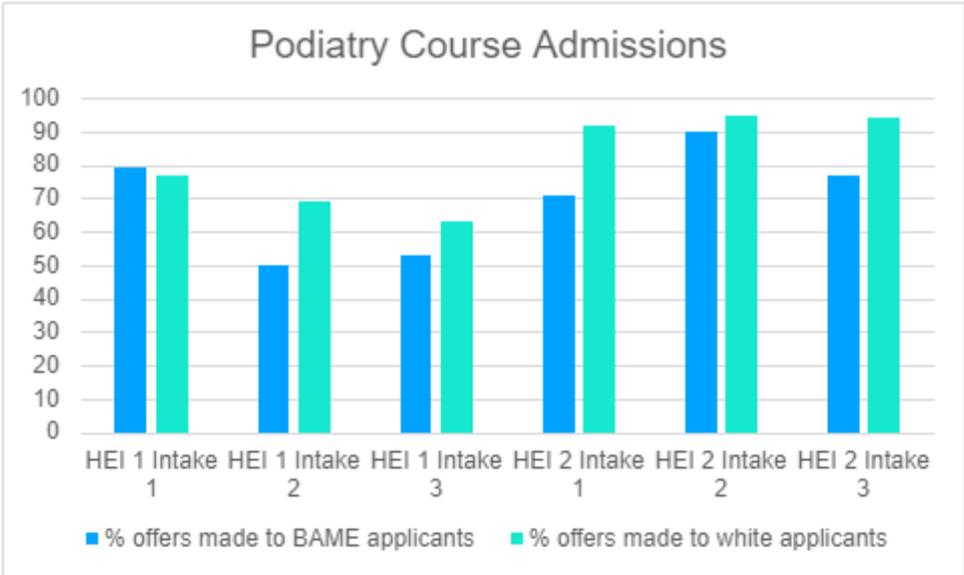
Admission Data

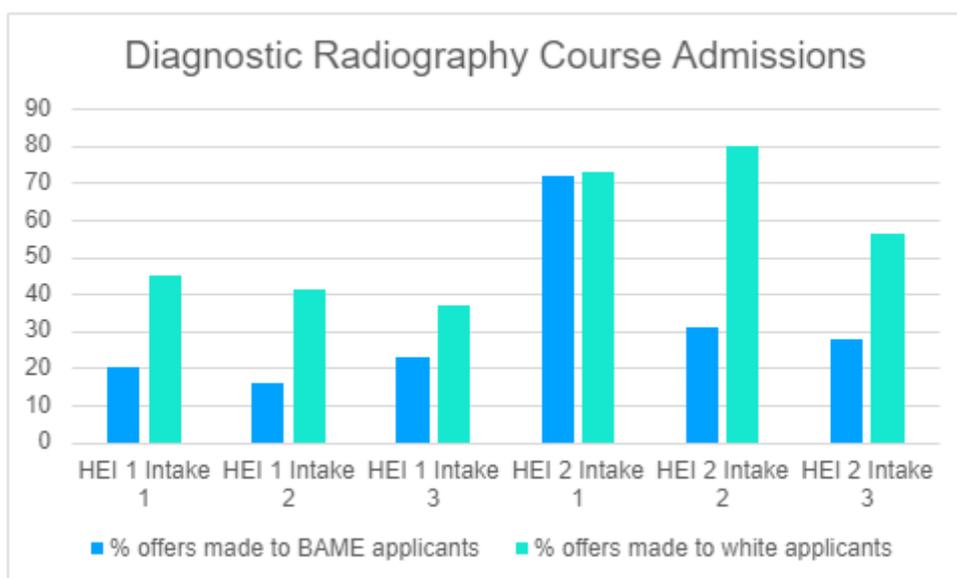
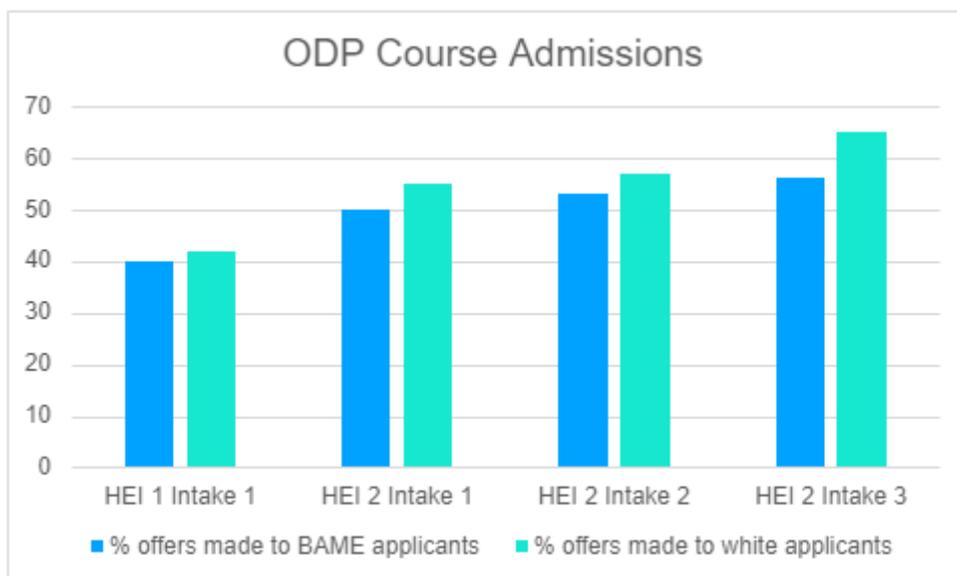
By requesting data on the number of applications made to AHP courses by BAME students and the numbers of offers then made by universities to each ethnicity it was possible to determine the percentage of students given offers by the university based on ethnicity. As the results are shown in percentages, it does not show the actual numbers of applications which in some cases were low.





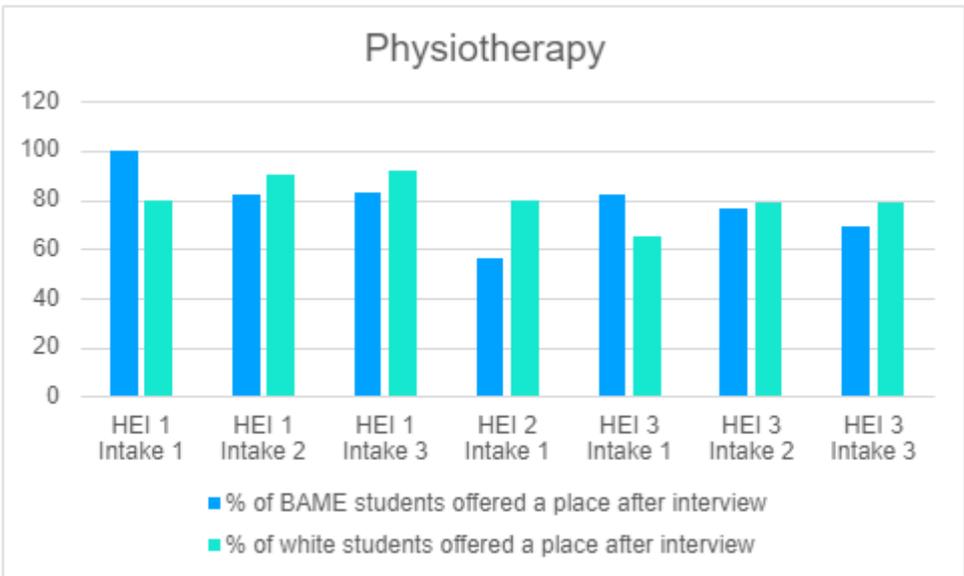
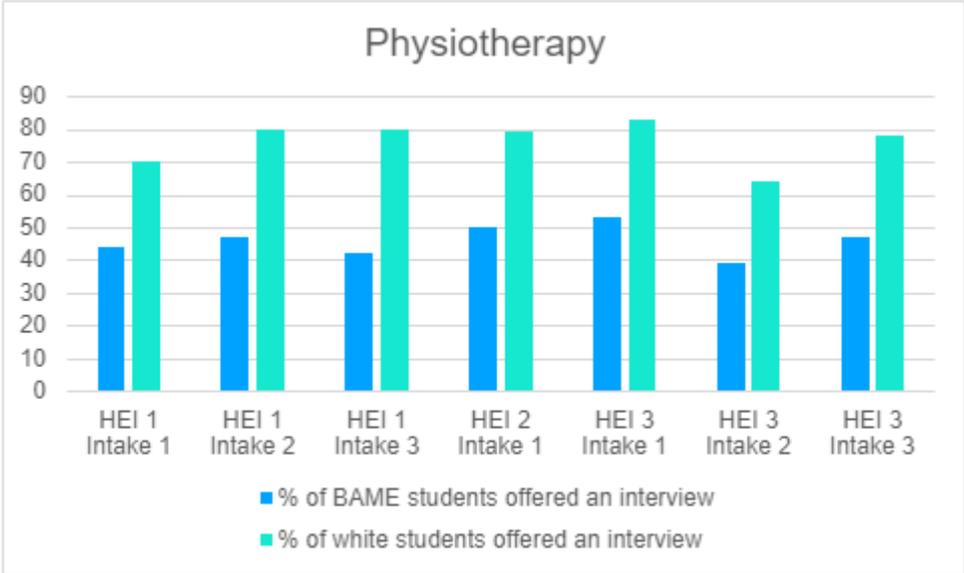
The three charts above show how likely a person is to be offered a place on one of the three courses depending on if they are of an ethnic minority or ethnic majority. The chart shows all the years that data was provided for. Although there is the odd exception to the rule, this demonstrates that a white student would be far more likely to be offered a place on a course compared to a BAME student. However, it must be noted that in columns five and six on the paramedic course and eight-ten on the physiotherapy course, very few applications were received from BAME people.



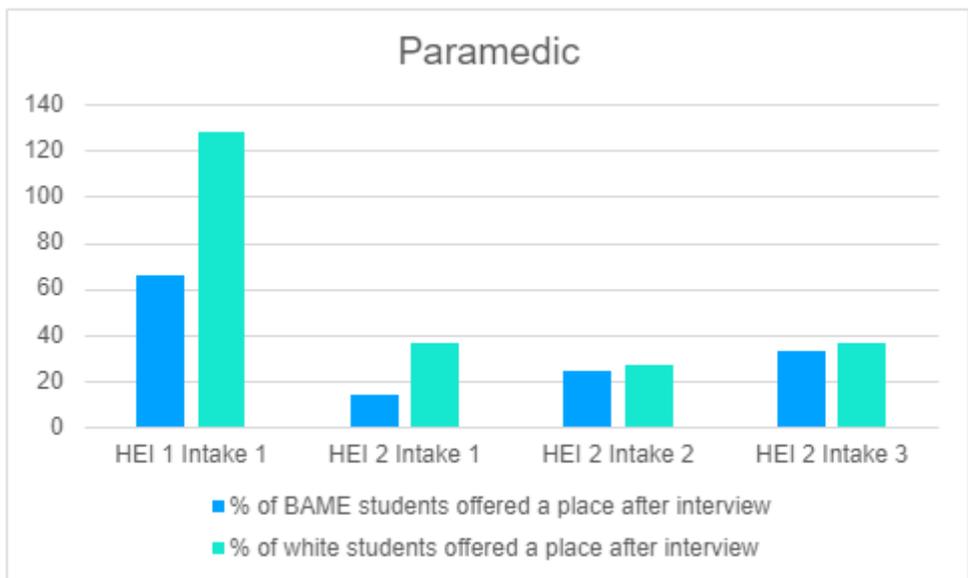
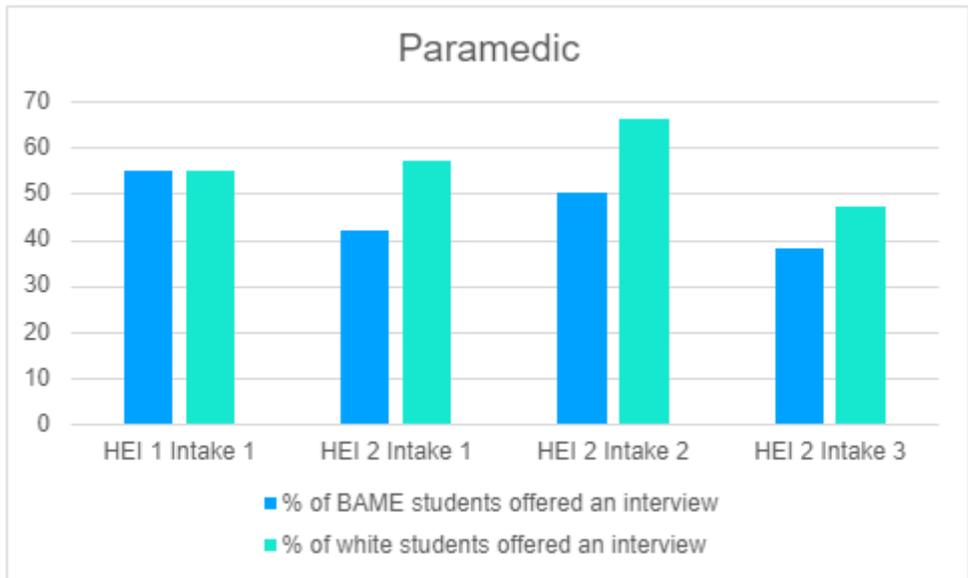


Although there is still a difference, it appears that the percentage of offers made from applications is much more similar between the two groups on the more diverse courses such as podiatry and ODP. However, this trend is not followed with diagnostic radiography.

In order to try and identify at which stage in the application process, BAME students are becoming unsuccessful, we have tried to derive the percentage of students being offered interviews and from those interviews, the percentage of students that are offered places on these courses. It was not possible to do this for every course or every university due to the data provided. Focus has been given to those courses with a lesser percentage of BAME students and it will be presented by profession and not by university.



The two charts above demonstrate that, within physiotherapy, it is likely to be the application form stage where BAME student applications are unsuccessful, rather than at the interview stage. University admissions teams are blinded to ethnicity on application suggesting that something is missing on the application form. This pattern is consistent across universities and requires further research jointly with HEIs to gain a deeper understanding.



The data for paramedic courses provides a less obvious pattern, although there is a difference for progressing past both the application and interview stage, with so few courses providing this data it is difficult to draw any firm conclusions.

Key findings from FOI requests

- There are none or very few teaching staff on most AHP courses in local universities which identify as BAME.

- From the data available BAME students have an almost 50% higher attrition rate than white students
- Some AHP courses have less 2% of BAME students in their cohort
- White students would be more likely to be offered a place on most local AHP courses compared to a BAME students

University Work to Support EDI

The table below summarises the EDI work being undertaken by the five closest universities that have AHP students on placement within the ICS.

University	EDI Work
1.	<ul style="list-style-type: none"> • Helped with HCPC project on diversity within AHPs. • The university is working on increasing cultural awareness, they have invited local faith leaders in to the university for staff and students to have the opportunity to ask questions to find out more about particular faiths. • A lot of work is being completed on decolonising the curriculum. Case studies are being re-written to ensure they are more diverse. The text books used are also being reviewed to ensure they are inclusive. • Student group has been set up to look at the attainment gap that is well reported to exist for ethnic minority students. A system for anonymous marking has been introduced to reduce bias within the marking system. • The university recognises that not all clinical placements are inclusive for students and to help address this they are producing case studies to use as a learning opportunity on clinical educator updates.

	<ul style="list-style-type: none"> • Work is being done to look at diversity within it's teaching staff and seeing if there is any way they can increase the numbers of staff from an ethnic minority background to help provide role models for their students.
2.	<ul style="list-style-type: none"> • Work is being done to ensure that advertising for AHP courses at the university is showing diversity. • The university is currently setting up an EDI group to look at some of the issues around EDI. • Teaching staff try and promote the BAME network to students. • The university have several projects to help with widening participation generally.
3.	<ul style="list-style-type: none"> • The university has general initiatives in place, one called "Success for all" which focuses on all students being able to achieve their best grades, nothing specific in place to address the attainment gap for ethnic minority students at present. • The course leaders are trying to ensure that advertising for the course shows diversity. • The university has an EDI group which checks all interview questions for admissions interviews to help ensure no one is biased by the questions asked. • They recognise they are only at the beginning with regards to EDI.

4.	<ul style="list-style-type: none"> • The University has an EDI lead for AHP courses. • The university is very focused on improving the experience for ethnic minority students. They have developed training packages on white privilege and a 5 and a half hour training package to help people to identify their own biases which has been rolled out throughout the staff and students. • Work is being done to find ways that students feel able to report racist abuse. • The university held focus groups with students to look at their experience of being an ethnic minority student on placement. They found that some placements were really inclusive whereas some were not supportive of students when they experienced racist abuse from patients.
5.	<ul style="list-style-type: none"> • The university was contacted; however, they unfortunately have not found time to discuss or engage with this project.

All universities in the local area are making attempts to improve EDI and recognise the importance of making their AHP course more diverse. Two universities have put new ways of working in place to help address some of the issues faced by students. One university is having great success closing the attainment gap with the help of a student group focussing on this issue, as well as raising cultural awareness by using faith leaders from the local community to answer questions regarding their beliefs; by taking steps to decolonise their curriculum they are ensuring their courses are inclusive for all. Another university is using more of a deconstructive approach by getting staff and students to explore their own unconscious bias and providing training on white privilege. They have also completed a project looking at the experiences of ethnic minority students' experience on placement and will use this information to feedback to clinical educators on their educator conference.

Another local university is in the process of setting up an EDI group for AHP courses which hopefully will help drive forwards initiatives to help address issues regarding EDI. They are making efforts to ensure that all promotional material is diverse, and take time to promote their BAME network to their students. A further university recognises that as they are running a new course, they still have work to do to ensure EDI but are taking steps to do this. They are also ensuring diversity is portrayed

in their promotional material and are making use of the university's EDI group to ensure the questions they ask on admissions interviews do not discriminate on the grounds of race. Unfortunately, one university did not provide any information for this project.

One-to-One Interview Results

The one-to-one interviews aimed to gain understanding into the experience of BAME AHP students. The data was collected through a one-to-one interview which was then transcribed, coded and themed into eight key themes using thematic analysis.

1. Family and Culture
2. Career Choices
3. University Life
4. Belonging
5. Racial Bias/ Racism
6. Learning opportunities
7. Self-Belief
8. Moving Forwards

Family and Culture

The data identifies the importance of family in the decision of what to study at university. Students reported that family members would sometimes advise them to choose other careers and this often stemmed from a lack of understanding about what the profession was.

“So, my dad always wanted me to be like a doctor as cliché as it was”

“My mum kind of understands it because she did all the research but wider than that it's a bit awful because I don't think like my grandparents and that side, they just basically think like I'm a less good doctor. They're just like “ah so you just do massages” which is kind of annoying but I mean they roughly know what it is but I don't think very well.”

Many students reported that their families were supportive of their decision once they had a better understanding of the profession, but they also noted certain cultural pressures that they faced when deciding on the correct career path for themselves.

“They really wanted me to go down the engineering route”

“You can often feel forced by what your parents think about your career you want. And if you go into a uni course that you really don't care about, yeah it's not going to work.”

Most students felt the influence of family when making their career choice. Some students chose to remain living at home during their time at university and picking a university that was close to home was an important factor in their decision making, particularly when placements are involved.

Career Choices

The data identified that, apart from the influence of family, other factors determined the career choices of the students. Many students reported that they wanted a job where they could help people and that they had an interest in healthcare roles but weren't interested in nursing and didn't have the grades to do medicine. Generally, the AHP role was not the first role that the student considered. Some students had personal experience of the job role, for example, attending physiotherapy after having a sporting injury, whereas others researched the careers online, or saw the role on the television or in the media.

"I'm not going to get into medicine course because I don't have the grades, not that smart, and I didn't have the patience for a five-year course, and junior doctorships and stuff like that. So, I really did research into it and found like even, you can become a paramedic"

Whereas some students reported they had good careers advice at school, most reported that there was a lack of careers advice when it came to AHPs.

University life

This theme can be split into two sub themes:

1. Challenges with University
2. Positive experiences

The challenges with university subtheme incorporates issues such as financial difficulties and difficulties on the course as well as a poor experience of applying for the course. Although many of these challenges will be faced by all students, some issues highlighted were specific challenges to those students who are BAME, particularly international students.

"Like if you're an international student you have to be financially stable because it's a lot of money and you know you have to limit it."

"Coming from Nigeria, for me even A levels I sort of struggled in my first year a lot doing A levels. So, I feel like did their first degree then came here, they would struggle more."

Although many universities have support in place for BAME students through their BAME networks, many students report not engaging with this network or not knowing about it in the first place, potentially missing out on help and support.

"I've just never really engaged with them. I don't read the emails or go to the meetings or anything like that."

"don't know anything or recall of anything that was specific to supporting black people. It may be there, um but I personally don't recall of anything or have anything in mind that they have set in place."

It is important to note that many students reported very positive experiences at university. Most enjoyed the university environment and campus they were based on, and reported they found good support from their university tutors when they needed it. Students liked the open-door policy in place at some universities and also were really happy when the tutors knew them by name.

“The uni has an open-door policy and I feel like they do act on that, they answer any questions you have and they are pretty approachable in my opinion.”

Students made positive comments about the application process. They particularly liked being able to have an online interview and in some cases, this was one of the reasons why they chose to study at that particular university. It made them feel that they were set up for and understood international students, or students that would find it difficult from a cost perspective to travel for an interview.

Belonging

A sense of belonging is something that students felt particularly strongly about, and this theme featured throughout all of the interviews in one way or another. The most common part of this theme was students feeling that they were the only person of colour and that led to them questioning if they belonged on their course.

“Yeah, I was just like a token. I wasn't I wasn't sure especially because I'm just like, okay there's one Black person and one Asian person. Is it like what? They've just ticked their boxes.”

“I probably knew there weren't going to be that many like black people, or that many, BAME people there, but I was very surprised when I got there and realized that there were only two of us. So that kind of made it a little bit I guess I felt a little bit uncomfortable, I felt like I stuck out a little bit and just coming I think just coming out of my old job. I knew that it can be difficult when you are you're a person of colour working in a sector that isn't necessarily diverse. “

The feeling of belonging has an important role to play in how someone settles into university life and affects attrition rates which are reportedly higher in BAME students. As well as recognising the lack of diversity on their course, students also recognised a lack of inclusivity and this had an effect on how they settled into placements and then on if they would consider that placement provider as a place to work after graduating. If BAME students are put off from staying within the local area after finishing university due to lack of inclusivity either at university or within the workplace this will have a significant impact on the workforce.

“That was too much for me. Um and just that feel of it being my first placement and not feeling accepted in that place.”

“My only worry is simply what reception that I'm going to get”

“Although I feel like there's conversations like you know when you go on your lunch break and you're talking like not much chit chat it's a bit different because some things they say, or whatever they do on their weekends is probably different to what I would do, or that kind of thing. On that kind of level, I wasn't so close to people. I mean, I don't know, I feel like there's lots of lovely people,

but I feel like there's a few people I don't get along with, and I feel like if I had to work there, I think mentally I might struggle."

Students reported ways of trying to fit in, such as changing how they dress to feel more accepted in the university setting; however, students struggled if they felt a lack of inclusivity out on placement and often felt they couldn't speak up about it.

Students appreciated the attempts some courses were making to be inclusive, although often felt that more could be done.

"They have tried to make it more sort of inclusive but at the same time I don't know if it's been done justice if that makes sense. I don't know if there is as much diversity as there could be or if they could've included other things as well"

Students recognised the importance of role models within their professions and reported that it made them feel that they could achieve within their career, especially if the role model was in a senior position and of a similar cultural background to themselves. Students reported the lack of diversity within teaching staff at their university and expressed that at times they find it difficult to find someone who can relate to them. Therefore, role models in the clinical setting become even more important to students.

"Having seen people who are from the same ethnicity as you in high up positions, I think it's very good, you can picture yourself in those positions. "

Students have at times reported good examples of inclusivity, particularly on placement; this seems to be down to the area and team that they are placed with.

"They were like some of these patients say things that are like racist or whatever and this is how you deal with it and this is how you handle it that felt very inclusive in terms of going through something like that."

Racism/ Racial Bias

This theme can be split into three subthemes; racism, equality and acceptance.

Every student who participated in these interviews was impacted by racism in some way. Even if they felt racism was not directly towards them and they had not experienced it on their course, it was something that very much played on their minds. This added a worry to going out on placement that their ethnic majority peers would not have to consider. One student reported that they felt they hadn't experienced much racism in their life as they are from a multicultural area and are living at home whilst studying. However, despite this, they reported that they would not go to certain areas for fear of racism and tend to stay in familiar areas. This protective strategy is now being tested during their paramedic course as they are not able to stay in the areas where they feel safe.

"Yeah, I come from a family that grew up here so they kind of knew the areas that maybe it wouldn't be the best idea is to go to and I avoided them. And I was worried that on placement, you know, you

can't see the area I'm going. I'm not going, my dad said he got beat up there once, so I'm not going there.”

Some students were more directly affected by racism and experienced racist comments from patients and their senior colleagues at times whilst out on placement. When this occurred, students felt that they didn't have anyone to turn to or report it to. Some students reported that they didn't think the university would do anything if they reported it to them as they knew the universities are desperate for placements so felt they wouldn't support the students. Students also reported racist incidents at university and international students felt that the country as a whole was racist so they had an expectation that any large institution such as a university would be racist to some extent.

“But I think the thing that makes it a little bit more difficult is when it comes from superiors. When it comes from people that are meant to be sort of like responsible for your well-being and things like that, it makes it harder because it feels like you don't have anyone to turn to or report to. So that's been my experience like working in healthcare before”

“Yeah. I don't really want to repeat any of them, but they basically just hint at your skin colour, how it's different to theirs.”

Despite the upset that racist comments cause the students, there was a certain level of acceptance. They reported that they accepted it as part of the job, they would expect to face it and reported that they would try and deal with it by being very professional and polite. One student reported “So sometimes you do get certain comments, but I guess it's part of the job.” And another said;

“I think when it comes to patients there's this kind of idea that you have to just accept it because you do your duty to help them. It's your job. So, it kind of feels like no matter what they say, you just have to get on with it. “

Many students felt that when they were out on placement and at university, the majority of the time they felt they were treated fairly with regards to marking and experiences on placement.

“I think in terms of how the lecturers treated everyone quite equal. I never felt quite disadvantaged in anyway. “

However, students did report that there were some differences for white people, particularly with regards to choosing university and courses. Inequality was raised generally, and students discussed race inequality as well as other inequalities such as gender and highlighted the importance of raising awareness of inequality within society as a step to make positive changes.

“Whereas their counterparts, so Caucasians? It's you know, typically that pressure doesn't exist, so they have a lot more free will, and they almost go into university by choice, because they want to get a degree, or they want to further their studies and experience university”

“It's something I have to deal with that other people may not. And again, I'm not saying that race is the only issue, because there are gender inequalities as well, so again, just to raise awareness. I think that's like the first step to a better world. “

Learning Opportunities

The theme of Learning Opportunities includes experiences on placement and any barriers to learning that the students have experienced both on their course and out in clinical practice. Students reported many good experiences on placement and many placements within the Nottingham and Nottinghamshire ICS were really well enjoyed.

“I really love it and I love my educators. I love the ward that I'm working on and the confidence that it's bringing me and the opportunities as well that my educators are providing and working to make sure that I have and see and learn. “

“With this placement, I think throughout they've encouraged me to give feedback to them as well, and because it's been quite a safe environment, I've not felt scared to ask something or if I don't understand why something was done to kind of voice that.”

However, there were also some examples of poor experiences on placement which provided difficult environments for students to learn in. The affect a challenging placement has on a student should not be underestimated and as previously reported is linked to higher attrition rates.

“I hated my first placement. Um I was sad the whole time and my mental health was going downhill. But I think that was just down to the pressure that was put on me with my educators. That lack of relationship I had with my educators”

Students spoke of some barriers to learning. Covid-19 was a mentioned frequently as a barrier to learning during the past year, limiting face to face teaching and preventing some placements from happening as well as the fear of catching Covid-19 and the disproportionate impact it is having on BAME people. Other barriers were noted as tutors having differences of opinions on certain parts of the curriculum causing confusion for students, and others spoke about a barrier of being BAME in a majority white class and the difficulty that brought of settling in and focusing on learning.

Self-Belief

The theme of self-belief incorporates the points expressed by the students on the uncertainty felt at various aspects of university, whether that be their suitability for the course due to feeling they were just “ticking a box” due to their ethnicity, or uncertainty that they have chosen the right career, as well as general feelings of uncertainty around university work. Placements were another source of uncertainty. This made students doubt their own ability and again, question their belonging on the course.

“At first like I was alright to extent but you know I just felt uncertain like I didn't know if I was going to enjoy it that much or not”

Many students spoke about how they felt their personalities were a barrier to progressing well on the course and out on placement. They reported comparing themselves to their peers who they perceived as having more confidence and better communication skills.

“I wasn't very confident talking to people, people I don't know, stuff like that and everyone in the course is great.”

However, as it has been previously reported that many BAME students worry about the reception they may experience from others, this may explain why BAME students can lack confidence talking to new people. This will not only impact them at university but also when joining new teams on placement and treating patients.

Moving Forwards

Students were positive about ideas to help improve the issues they were facing and discussed measures that they felt would be useful. Students reported they would find having a mentor of someone from a similar cultural background to themselves really helpful as they felt that would give them someone to talk to who would understand some of their concerns.

“I think it would be so helpful just to have someone that sort of has like experienced the same things that you have or can sort of relate to your experiences. And they can also if you have any career specific questions, they can help with that as well. I think it's really helpful to see someone like yourself you know representing in different things because it makes it easier for you to feel like okay, I can do this as well.

As well as finding the idea of having a mentor really helpful, they also expressed that promoting AHP courses to the wider community would be a good way to attract more BAME people into the roles. They highlighted the influence family has on career choice and suggested the need to not just talk to students in school about AHPs but also their parents and the wider community too. Giving school children role models in the professions from different ethnicities would give school children the self-belief that they could enter the AHPs.

“So, I think it's important, especially in, in like black Asian communities to give the to make it clear that the option to be a paramedic is there because I think like a lot of the time it isn't made clear.”

Students were also very positive about projects such as this one and any way in which a spotlight can be shone on inequality.

Analysis

Key Issues

This project demonstrates that there are different issues regarding increasing the BAME AHP workforce depending on the allied health profession. Many of these issues are complex and require more investigation. It was originally considered that knowledge around the AHP and the university course would be a factor in the number of BAME students that complete AHP courses and then enter the workforce, however this does not appear to be the case. The data shows the most well-known professions to be physiotherapy and paramedic; however, the percentage of BAME students

on these courses are low, and therefore there are low numbers of BAME physiotherapists and paramedics in the Nottingham and Nottinghamshire ICS workforce. The data from the college and sixth form student survey suggests that BAME students want to work in these roles so more consideration needs to be given to why BAME students are not accessing the courses. It is possible that access to work experience may be a limiting factor, particularly in physiotherapy, as a high number of BAME students are not progressing past the application stage of the admissions process.

For other AHPs the issue is very different. Despite not being quite so well known, diagnostic radiography, radiotherapy, podiatry, orthoptics and some OPD courses are ethnically diverse with some courses reporting over 50 per cent of their students are BAME. However, the percentage of BAME graduates entering the AHP workforce within Nottingham and Nottinghamshire ICS is still low and more research needs to be completed to look at the issues within these professions specifically. Some students report that they wish to return to their local area after graduating to either be near family or friends or to go back to living in a more diverse area. If many students return to their home address after university it is vitally important that AHPs are well promoted within the local communities, particularly focusing on the more diverse areas.

For the smaller AHPs, knowledge of the professions and courses seems to be a limiting factor. Some AHPs such as music therapy, art therapy and drama therapy are studied at Masters level only which significantly limits the number of people who are eligible to apply. There are other limiting factors such as cost, which BAME students reported as an issue that would prevent them attending university for an undergraduate degree; therefore, it is likely that this would also be a factor for post graduate study. Promotion of the smaller AHP roles will be vital to attract more people into these professions. Offering work experience within these roles will also be beneficial to help increase knowledge and awareness of the professions.

Contributing factors

School Support and Access to Work experience

Work experience is vitally important when considering future careers but also as evidence of knowledge of the career when applying to university for an AHP course. Data provided by the work experience leads shows that although work experience is provided throughout the ICS, there are some AHPs that have only provided work experience to students who have applied independently, and not through the work experience hub which is where work experience gets allocated on a first come, first served basis. By only providing work experience to students applying directly, it favours people who know someone working in the profession already and disadvantages people who do not have those contacts, limiting their chances of finding out more about the profession. Some other AHPs only provide a few work experience places per year which also limits chances of gaining work experience. Schools report that work experience commonly takes place in year 10, having a

minimum age for work experience of 17 within the ICS prevents a lot of students from being able to attend. Other parts of the country do not have this minimum age requirement; therefore, this could be explored.

The work experience leads are very keen that work experience applications go through a single point to make the allocation of places as fair as possible. This work could be supported by all AHPs within the Nottingham and Nottinghamshire ICS by providing them a list of dates for work experience throughout the year which could be allocated on a first come, first served basis and limiting the number of places provided to students applying directly. Promotion of how to apply for work experience needs to be well communicated to schools and colleges as none of the career advisors reported that they would direct their students to the CARE4Notts website for careers advice.

However, access to work experience is only one factor as the data gathered for this project shows that many BAME students attended physiotherapy work experience but there is still a low percentage of BAME students who are on physiotherapy courses, despite this. Although having access to work experience is important, there must be other factors preventing students from getting past the application stage of the admissions process. This needs to be further explored with university admissions tutors to understand the reasons for this. The one-to-one interviews suggest that family members having limited knowledge about AHP courses, or not having been to university themselves may mean that BAME students do not get as much help from family with the university application process which may be a contributing factor.

Giving careers advisors the CARE4Notts website and the Health Education England website to direct students to would be of benefit as it has been identified that students have been directed to nursing and medicine career websites previously. Also ensuring that they have the correct information regarding routes into professions and an awareness of apprenticeship opportunities. The Nottingham and Nottinghamshire ICS need to ensure it is reaching out to the more diverse schools within the region to promote AHPs.

Although many universities have widening participation programs in place and are working hard to ensure inclusivity and equal opportunities, some still have a little way to go to achieve this. Many universities have a discrepancy in offer rate for BAME students compared to white students which is well reported in data from UCAS, but also clear that the same applies for AHP courses at many of our local universities. However, the universities that have a strong focus on EDI have far less of a discrepancy than the universities that have less of a focus on EDI. Although universities are blinded to ethnicity on application, it is clear for some courses that many BAME students fail to progress through to the interview stage. Therefore, work needs to be done to ensure that BAME students are not indirectly discriminated against at this stage by the grading system for applications.

Role Models and Influence of Family

The results from the student survey demonstrates that BAME students value the opinions of family members more than white students when they are considering their career choices. However, the results from the one-to-one interviews show that many family members do not understand the roles of AHPs and tended to try and steer their family member into more well-known roles within healthcare such as a doctor or nurse, or even roles such as engineering. This suggests that raising awareness of AHP roles is not just important for school age children that are considering their future careers but also the wider community, particularly in the more diverse areas within Nottingham and Nottinghamshire ICS. If the AHPs are more well known throughout the wider communities then family members may be more open to their loved one entering those professions.

Many current AHP students spoke about the importance of having role models in their professions that are of similar ethnicities to themselves. This was shown to be important in attracting BAME people into professions. Students reported that it helped them visualise themselves within the roles and gave them confidence be able to complete their course. Many other students reported that it was nice to talk to someone else in the role who could understand their barriers and help with inclusivity. Most students reported that their courses were not diverse and they often felt like “the only one”. They reported having a role model in their profession helped them to know that they were not by themselves. Ensuring that BAME role models are visible throughout the Nottingham and Nottinghamshire ICS and within universities is important. Most teaching staff on AHP courses are white and this in itself can make students feel that they struggle to join in or feel understood. Making use of BAME networks both within the university setting and within the ICS can provide good role models and help with inclusivity, even if they are not from the same profession.

Inclusivity and racism in the workplace

As previously mentioned, some professions have a diverse undergraduate population, however there are still significantly lower numbers of BAME professionals entering the workforce in the Nottingham and Nottinghamshire ICS. During the one-to-one interviews some students reported that despite having a placement within the ICS they would not want to work there. The reason for this was mainly due to how inclusive they felt the workplace was. One student said that they felt they had little in common with some of the other team members and at times felt uncomfortable. Other students reported that they did not get on with their clinical educator which led to a difficult placement experience. This highlights the importance of providing culturally sensitive, inclusive placements for students and ensuring that they have a feeling of belonging when they are out on placement. Further research is needed to understand if clinical educators understand how to ensure an inclusive placement and what if any, training is needed around this.

Many students who participated in the one-to-one interviews reported experiencing racism from patients. The students who reported this appeared quite accepting of the fact that they would come up against these sorts of comments from patients and reported that they still tried to be

professional. Other students found the comments upsetting, especially if they felt unsupported by their clinical educator during the experience. This often led to a feeling of having a bad placement, which research shows increases attrition rates and will reduce the number of students wanting to join the workforce in the Nottingham and Nottinghamshire ICS once graduated. It will be important going forwards to understand how clinical educators feel about challenging racism from patients and how the ICS can best support them to be able to do this and support students who experience racism on placement. The importance of initiating conversation around possible racism at the beginning of a placement was also highlighted - this then opens a safe place for conversation if these incidents were to occur.

Limitations

As this is the first project commissioned by Nottingham and Nottinghamshire ICS regarding diversity within AHPs then this is necessarily a fairly broad overview of a very complex situation and it is recognised that further investigation is required to gain a deeper understanding into some of the issues. Although several allied health professions were included in the one-to-one interviews, it was not possible to include all AHPs within the interviews and therefore some professions have not been represented in this data. However, there were common themes that arose from the interviews that appear to apply across a range of AHPs. Unfortunately, not all universities responded with all of the data requested from the FOI requests and some data had to be omitted. However, some trends were still able to be identified. In addition, not all universities within the local area engaged with the project, therefore it is not possible to report on all the work being done by local universities to widen participation. Only five of the 46 students who responded to the student survey were BAME therefore it is recognised that this low number may affect the results. This shows a need for education and further conversations to highlight inequality, discrimination and inequity across the Nottingham and Nottinghamshire ICS.

Recommendations

For Further Research

1. To further understand the barriers and enablers for clinical educators in creating inclusive placements and addressing racism faced by students on placement
2. To understand the migration patterns of AHP students from BME backgrounds and why they are not represented in the NNICS qualified workforce (especially for those training courses such as ODP, podiatry, orthoptics, diagnostic radiography, radiotherapy, where the student cohorts are more diverse).

3. To establish a deeper understanding of the barriers that are preventing physiotherapy and paramedic applicants from BME backgrounds getting places on training courses

For the ICS

1. The ICS should continue to provide and further promote visible and inclusive leadership, ensuring opportunities for organisations to develop all aspects of inclusivity and diversity in the workplace
2. Ensure the workplace culture offers opportunities and transparency to initiate conversations around race, discrimination, equity and culture.
3. Provision of bespoke training required for all staff on cultural competence, discriminations and allyship
4. Consider setting up a mentor program for BAME AHP students aiming to help inclusivity, provide support and reduce attrition rates, as well as provide good links to the ICS for these students which might be useful when they are considering future employment.
5. Collaborative working with Higher Education Institutions (HEIs) to ensure issues identified as training needs for clinical educators are included in clinical educator updates or newsletters.
6. Ensure recruitment teams work closely with EDI leads so that information portrayed is inclusive and encourage people from BAME communities to apply.
7. Consider the use of external support/ advocates to deal with any possible incidents around racism during student placements, as this is less likely to impact on placement provider and university relations.

For Higher Education Institutions

1. BAME networks at universities to be more accessible so students know how to find them and can attend.
2. Ensure BAME students feel supported and understood, by making certain that tutors have knowledge and understanding of student's race/ culture and possible barriers and giving student information on how to report incidents of racism. The HEI should make sure that any incident reported should be dealt with appropriately.

3. Universities should take steps to decolonise the curriculum- consider which resources are being used to ensure inclusivity.
4. Consider admissions criteria to ensure application scoring and interviews are not biased to favour White people over BAME.
5. Ensure that training courses within degrees are offered around cultural diversity, discrimination, racism and allyship so that all students are better equipped at treating their fellow colleagues and patients with respect and these conversations are embedded.
6. Training for clinical educators would be beneficial to empower them in challenging racism from patients and other staff, to support students from BAME communities if they experience racism on placement and to understand barriers BAME students may have and how to better support them.

For Work Experience/ Career promotion

1. Promote AHP career information and opportunities within schools that have a high percentage of BAME students, including information about writing a good application, work experience etc.
2. Increase access to work experience and promote understanding amongst qualified AHP staff of the importance of this in creating access and inclusivity; explore virtual work experience options to reach greater numbers.
3. Work with career advisors/ schemes to help promote AHP to younger ages.
4. Provide career advisors with appropriate websites to direct students to and provide information regarding career pathways and apprenticeship opportunities.

For Schools/ Colleges

1. Improve links with ICS wide career and work experience platforms to ensure all students are aware of AHP careers and understand routes into these professions
2. Ensure careers advisors receive training around culture/ race and possible barriers so they can better understand BAME student needs

3. Continue to bridge disparity of attainment between ethnic groups
4. Offer appropriate support to BAME students when applying for AHP courses

Conclusion

This the first project which has a focus on diversity in AHPs within the Nottingham and Nottinghamshire ICS. Data obtained shows the disparity between BAME and white students in terms of the local university application process and highlights the types of BAME student experiences that could lead to poorer attrition rates. Overall, the findings show that there is much more research and improvement required to not only encourage people from a BAME background to choose AHPs as a career but also allow them to feel included when on such courses and within the workplace.

Some AHPs are less well known but have a diverse student population, however this does not seem to be translating into a more diverse workforce within Nottingham and Nottinghamshire ICS. Other AHPs are well known but there appear to be barriers to BAME students progressing through the admissions process and entering onto a course, resulting in there being low number of BAME students on some AHP courses in local universities which will have an effect on the diversity of the workforce.

The ICS can work on promoting the roles of AHPs to the wider population, ensuring there is good access to work experiences for all AHPs across the ICS, that student placements are more inclusive and that staff feel empowered to challenge racism from patients and colleagues. Working on building links with EMAS to ensure paramedics are involved with the work of the AHP Faculty would also ensure that all the AHPs were working together. This report gives an overview of the situation across all AHPs, however further research is required to gain a deeper understanding of some of the issues affecting certain AHPs which will require collaboration with HEIs to look at not only the experience of AHPs on certain courses, but also the admissions process to address the difference in offer rate for BAME students.

There are some larger issues which may also play a role and which can only be resolved if all stakeholders work together. For example, with BAME students prioritising reputation of university and teaching quality when considering what to study at university, as well as the cost of going to university. AHP courses that are only run at a few universities across the country may not be considered due to the university that supply the course and the distance from where the person lives.

This is the first step in understanding racial diversity in AHPs, so that we can ensure that the service we provide is fit for purpose, and the overall effectiveness of our departments are improved. This may then lead to better engaged staff, cost savings and better patient outcomes.

Future

The last step of this project will focus on disseminating the project results and recommendations to help improve the BAME student experience on AHP courses, increase the number of students accessing such courses and encourage BAME students to take up jobs in the Nottingham and Nottinghamshire ICS.

Each trust and organisation within the Nottingham and Nottinghamshire ICS has its own legal obligation to improve diversity within the workforce, meet patient cultural needs and improve experience of the BAME workforce. This report will help inform and lay foundations for current or future strategies or action plans.

Another vital aspect is ensuring that the learning and recommendations generated from this project are used to make and sustain positive changes within the ICS. Therefore, the project has been extended for a further six months to explore the experiences of the BAME AHP workforce.

References

Boliver, V. (2015). Exploring Ethnic Inequalities in Admission to Russell Group Universities. *Sociology*, 50(2). DOI: 10.1177/0038038515575859.

Coghill, Y. Chinembiri, O. (2019). Workforce Race Equality Standards- AHPs. NHS England and NHS Improvement.

Hammond, J., (2019). 19(372) *BMC Medical Education Working hard to belong: a qualitative study exploring students from black, Asian and minority ethnic backgrounds experiences of pre-registration physiotherapy education*. DOI: <https://doi.org/10.1186/s12909-019-1821-6>

Hammond, J. Marshall-Lucette, S. Davies, N. Ross, F. Harris, R. (2017). Spotlight on equality of employment opportunities: A qualitative study of job seeking experiences of graduating nurses and physiotherapists from black and minority ethnic backgrounds. *Int J Nurs Stud* Sep;74:172-180. doi: 10.1016/j.ijnurstu.2017.07.019

HCPC data report Nov 2020

<https://www.hcpc-uk.org/news-and-events/blog/2020/hcpcs-first-diversity-data-report>

HEE data

<https://www.hee.nhs.uk/our-work/allied-health-professions/enable-workforce/ahp-faculties>

Hunt, V., S. Prince, S. Dixon-Fyle und K. Dolan (2020), Diversity wins. How inclusion matters, McKinsey & Company Report, 19. May 2020

Norris, M. Hammond, J. Williams, A. Grant, R. Naylor, S. Rozario, C.(2018). Individual student characteristics and attainment in pre registration physiotherapy: a retrospective multi site cohort study, Norris, M., et al., *Physiotherapy*, 2018. 104(4): p. 446-452.

Norris, M., [Hammond, J.A.](#), Williams, A. and [Walker, S.](#) (2018) Student explorations of black and minority ethnic attainment inequalities in pre-registration physiotherapy - a qualitative study. *In: Physiotherapy UK 2018*; 19-20 Oct 2018, Brimingham, U.K.
<https://doi.org/10.1016/j.physio.2018.11.302>

Nottinghamshire Joint Strategic Needs Assessment (2017) The people of Nottinghamshire.

Office of Students

<https://www.officeforstudents.org.uk/data-and-analysis/access-and-participation-data-dashboard/>

Shanley, J. Steel, P. Sellars, J. Knowles, N. Williams, N. Wyres, M. (2019). Responding to a changing population: the need to develop a culturally competent workforce. *Physiotherapy* 105(1). DOI:<https://doi.org/10.1016/j.physio.2018.11.277>

The People plan

<https://www.england.nhs.uk/wp-content/uploads/2020/07/We-Are-The-NHS-Action-For-All-Of-Us-FINAL-March-21.pdf>

WRES report 2020

<https://www.england.nhs.uk/wp-content/uploads/2021/02/Workforce-Race-Equality-Standard-2020-report.pdf>

Appendix

Appendix A

Questionnaire for Students

We would like to understand what influences your career choices and if you have or will consider working in healthcare. All surveys are anonymous and there are no right or wrong answers. The survey will only take about 5-10 minutes to complete.

Are you studying any of the following subjects at A level? Tick all relevant subjects

Biology/ Human biology

Chemistry

Physics

Maths

Psychology

Sociology

P.E.

Where do you look for career's advice?

Family members

School/ Teachers

Social media

Internet

Other.....

When considering your future career what is important to you?

Potential earnings

meeting family expectations

meeting school expectations

job satisfaction

Enjoyment of job

Other.....

Do you plan to apply/ have you applied to university?

Yes/ no

If yes:

What influences your choice of university?

Reputation of University

Distance from home

Cost of living

Quality of teaching

Course available

Other.....

If no:

What are your reasons for not applying?

Job offer

Apprenticeship

Cost of university

Predicted grades

Other.....

Have you completed any work experience?

If yes where at?

Are there any challenges to completing work experience?

Have you heard of any of these careers? Tick all the ones you have heard of.

Art Therapist

Dietician

Drama Therapist

Paramedic

Physiotherapist

Occupational Therapist

Podiatrist

Orthoptist

Operating Department Practitioner

Music Therapist

Osteopath

Radiographer

Radiotherapist

Speech and Language Therapist

Orthotist

Would you/ have you considered any of these careers? Tick all that apply.

Art Therapist

Dietician

Drama Therapist

Paramedic

Physiotherapist

Occupational Therapist

Podiatrist

Orthoptist

Operating Department Practitioner

Music Therapist

Osteopath

Radiographer

Radiotherapist

Speech and Language Therapist

Orthotist

If no, why not?

If yes, what attracted you to the career?

If you had to attend an admission interview for university, would you feel confident?

Yes/ No

If no, what would help you to feel confident?

How would you describe your ethnicity?

Appendix B

Questions for careers advisors

AHP careers are an integral part of the NHS and wider health care system. Being a AHP provides great job satisfaction, financial security and endless opportunities. There are low numbers of people from BAME communities working as AHPs and we would love to work with you to help change this. Please take part in this survey and tell us what you think, your invaluable feedback will help us to shape this initiative...

Where do students turn to for careers advice?

Do students get the time to attend work experience?

In what year do students attend work experience?

Have your students been involved in any virtual experience opportunities?

Do you direct your students to apply for work experience outside of your planned work experience weeks/ or independently if you don't have work experience weeks, e.g. in the school holidays?

Are there any barriers in accessing work experience for health care careers?

Can you confidently direct your students to the work experience portal for Nottingham/shire?

In your opinion, do many students ask about the following Allied Health Professions (AHP)?
(scale from least to most popular)

[Art Therapists](#)

[Drama therapists](#)

[Music therapists](#)

[Chiropodists/podiatrists](#)

[Dietitians](#)

[Occupational therapists](#)

[Operating Department Practitioners](#)

[Orthoptists](#)

[Osteopaths](#)

[Paramedics](#)

[Physiotherapists](#)

[Prosthetists and Orthotists](#)

[Radiographers](#)

[Speech and language therapists](#)

Do you have access to enough information to advise your students on applying to study Allied Health Professions?

What resources would you direct your students to?

In your opinion are there any barriers to students from BAME backgrounds that prevent them from applying for AHP courses?

Is there any support available to help students prepare for university admission interviews?

Is there any other information you would like to be able to advise your students on AHP careers?

What do you feel would help BAME students to want to apply for AHP courses?

Does your higher education establishment have any scheme to empower and give confidence to people from a BAME background?

Can you confidently advise your students on where to find NHS Apprenticeship vacancies?

How well is your school meeting the Gatsby benchmarks for careers advice/interventions?

Do you have any other comments?

Appendix C

Semi structured interview questions and prompts

This project is hoping to explore the lived experience of BAME AHP students, identify themes and hopefully use this information to help create a workforce that is inclusive and more diverse.

We would like to understand your experience of being an AHP student and your experience on placement.

Permission to record.

OPENING QUESTION

What is your ethnicity?

Tell me about why you chose to study...(insert AHP course)...

Does family/people within your culture understand what your course/ profession involves?

Did you have support from your family when picking this career?

How did you find out about this course?

UNI

Which uni do you go to?

How did you find the application/interview process?

Why did you pick university?

How did you feel about starting uni?

How did you settle in?

Were there any barriers to settling in?

Did the uni have anything in place to help BAME students settle into uni life?

Some research states that Universities are institutionally racist. What are your thoughts on that from your experience?

COURSE

How did you feel starting the course?

Were there any barriers to learning?

How do you get on with your lecturers?

Research shows there is a higher drop out rate for students from BAME backgrounds, particularly in the first year. Why do you think that is?

PLACEMENTS

Was your placement within the nottingham/shire ICS?

Tell me about placements

How did you feel going out on placement?

Any worries about placements?

Any challenges?

Were the placements inclusive?

Did you settle in ok?

Did you feel your clinical educator treated you fairly?

FUTURE WORK

Would you consider working for any of the places where you have had placements?

Why would you/ would not?

How do you think inclusivity can be improved?

ROLE MODELS/ MENTORS

How do you feel about the diversity portrayed throughout your education experience so far?

Do you feel that you have had any BAME role model, if yes how has this helped you?

What benefits do you think of having a AHP specific mentor of similar cultural background have?

CLOSING QUESTION

Is there anything else that is important to you that you would like to tell me to help with this project?

If you feel that you would like to discuss any of your experiences discussed today further, please contact the project leaders, who will be able to signpost you for further support.

We are in the early stages of setting up a BAME AHP mentorship scheme and will contact you in due course. Are we able to contact you after this interview?