



Royal College
of Physicians

Our approach to improving diversity and inclusion

An update on RCP activities 3 years
after the Summerskill report



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**We're committed to strengthening
a culture of diversity and inclusion
at the RCP**

Foreword

Back in 2020 we commissioned expert Ben Summerskill to carry out an independent review of diversity and inclusion at the RCP. His report brought to light that some members regarded the college as distant and inaccessible, and included some first-hand experiences of colleagues who felt they were treated differently and had fewer opportunities to engage with the RCP.

Although it made for uncomfortable reading, we welcomed the report and its wide-ranging recommendations, which presented a clear vision of what we needed to achieve in order to improve diversity and inclusion across the RCP.

Three years on, this progress report provides an update on the steps we've taken to achieve the recommendations in different areas of our work. I'm pleased to report that we've made significant progress, with 20 of the 29 recommendations now either completed or on track for implementation within the planned timeframe. I'm really proud of our strong commitment to strengthen a culture of diversity and inclusion at the RCP, how the organisation as a whole has engaged in this important area of work and the difference it is starting to make.

We know that a diverse and inclusive environment is vital to the way we engage with our members, customers and stakeholders, and essential to our approach to appointing, developing and retaining our staff, officers and volunteers.

This marks our last specific progress report on achieving the recommendations set by Ben Summerskill. However, having diversity and inclusion as enablers in our 2022–24 strategy shows that it is by no means the end of our work in this area and commits us to publishing progress each year as part of our annual report. We will continue to champion diversity and inclusion, striving for continuous improvement to ensure that the RCP is a modernising membership organisation accessible to all.



Dr Ian Bullock
RCP chief executive officer

Our approach

Ben Summerskill's [2020 report on diversity and inclusion](#) made it clear that to remain aligned to our mission of improving health and healthcare for everyone, and to retain credibility and influence, the RCP must actively commit to addressing bias within our processes and perspectives, reflecting our wider membership and celebrating diversity. The report set out recommendations and challenges which allowed us to take a strategic approach to tackle the issues as part of a multi-year process.

Three years down the line we have made good progress in many areas. This short report gives an update across the different areas of our work and identifies how we will make further progress in the years to come.

Some of the 29 recommendations in the 2020 report relate to particular functions and were integrated into business planning for individual departments. Where recommendations required cross-RCP collaboration, two task and finish groups drew on expertise around the RCP. These groups focused on:

- > showcasing diversity
- > data, recruitment and onboarding.

A Diversity and Inclusion Delivery Group (DIDG) is overseeing the achievement of the recommendations. The group includes:

- > staff leading areas such as member engagement, support and committees; communications, events and media; and people and culture
- > our membership, including fellows, trainee doctors, SAS doctors and physician associates
- > our Patient and Carer Network (PCN).

We want to ensure we reflect our wider membership and celebrate diversity

Our people

People are at the heart of the RCP's drive to improve diversity and inclusion – from our membership, college officers, leadership team, staff and volunteers, to those we nominate for honours.

Our membership

Our 40,000 members and fellows are an incredibly diverse group. From students to experienced consultants, they represent today's modern RCP and NHS workforce. We also host the Faculty of Physician Associates (FPA). Ensuring that we remain relevant to our existing members and are welcoming to new members is key to our future.

The annual consultant and SAS (specialist, associate specialist and specialty) doctor census is carried out by the RCP on behalf of the three royal colleges of physicians each year. In 2023 we introduced the collection of diversity information via the census, together with obtaining consent from respondents to add this information to our customer relationship management (CRM) system. Over time we hope this will help us to build up a robust picture of the diversity of our membership. We currently hold diversity data on around 13% of our membership, a small increase on the previous year.

Our new more inclusive [fellowship proposal process](#), which launched in 2022, is now fully embedded. The updated process is fairer and more transparent and designed to keep pace with the values and diversity of modern medicine. The changes include ensuring that a proposal is no longer submitted without a candidate's knowledge and the grading process is anonymised. We monitor the diversity of new fellows and this is reported regularly to Fellowship Council. In 2023 a total of 982 doctors became fellows. Of these, 694 were men and 286 were women, 32% were Asian, 17% White, 9% other, 5% Black, 1.5% mixed and 36% unknown.

Published in 2021, our SAS doctor strategy champions the work and engagement of SAS doctors and aims to ensure that they are treated equitably within the RCP. We now review RCP officer and clinical roles to see whether they are suitable to be open to non-fellows. SAS doctors can become fellows so this is not a barrier to taking up roles that might be restricted to fellows only. Twenty-two SAS doctors became fellows in 2023.

The [Faculty of Physician Associates](#) (FPA) continues to ensure that FPA members from across the UK are represented. The latest FPA census survey was sent out in December 2023 and includes a request for respondents to fill in diversity data.

Our more inclusive fellowship proposal process has been designed to keep pace with the values and diversity of modern medicine

We continue to grow our international membership, who made up 26% of our total membership at the end of 2023. The RCP has over 60 international advisers – our representatives around the world, who engage with members and fellows locally and help to identify opportunities for RCP activity. We are appointing an increasingly diverse group of doctors as international advisers – they currently represent over 30 countries and over a quarter are women.

The Medical Training Initiative is a mutually beneficial scheme that provides trainee doctors from all over the world with the opportunity to work and train in the UK, while gaining expert experience for practice in their own countries. The RCP scheme is the largest of all the UK college programmes, supporting more than 250 international medical graduates currently working in the UK.

Our leadership team, senior officers and Council

We have been carrying out and publishing an annual ‘snapshot’ survey on the data we hold about the diversity of our leadership team, college officers and Council. This is reported to RCP Council on a regular basis.

In 2022 a specific objective to measure delivery of diversity outcomes was introduced for our executive directors as part of their performance objectives. We have evolved this in 2023 with the option of more integrated equality, diversity and inclusion (EDI) objectives into other key objectives or a specific objective as appropriate for the role. This has now become ‘business as usual’, where EDI plays a key role all objectives of the leadership team and this starts to cascade down to staff roles. Further work is needed to ensure that this is mirrored for our senior officers, but the principles have been taken forward.

Application packs and job descriptions for new and replacement roles now include the following standard wording to emphasise our goal to promote inclusivity and reflect diversity: ‘We value diversity

and each other’s contributions. The Royal College of Physicians welcomes and actively seeks to recruit people to its activities regardless of race, religion, ethnic origin, disability, age, gender and sexual orientation. The RCP aims to reflect the diversity of its members in all its committee, senior roles and staff in general.’ Roles are also now routinely advertised as being suitable for a job-share arrangement to open them up to a wider field of potential applicants.

Our volunteers

We are enormously grateful to our many volunteers, who work across clinical and non-clinical roles at the RCP.

Using Microsoft Teams, volunteers can remotely join meetings using a standard modern web browser or from a client application that can be downloaded for free and is available on all major platforms. Teams-hosted meetings offer a number of accessibility features, including screen magnification, high contrast colours, auto-captioning, selectable backgrounds and meeting recording. Although participation in a Teams meeting usually requires a computing device and an internet connection, dial-in facilities and freephone options are also provided by the RCP.

We also continue to invest in meeting room audio and visual equipment to ensure volunteers attending a meeting remotely have a clear visual and audio experience to enable them to fully engage with the meeting.

We have recently started to provide childcare for members attending ceremonies and have now also introduced this for fellowship ceremonies.

Our staff

In recruitment, our interview panels now customarily include a similar number of men and women (for both voluntary roles and staff) and aim for at

least one person on all such panels to be a woman (or a man) and one from an under-represented group unless unavoidable. As a result, we have noticed an improvement in gender balance in our interview processes. In 2024 we will report on this on a quarterly basis as part of a dashboard for our leadership team to monitor and promote.

We continue to explore our ability to enter one of the diversity benchmarking exercises for employers to test the assumption that the RCP performs well as an employer. However, a number of challenges with our existing systems and website are hampering progress. Once the new RCP website is launched, we will work towards the Disability Confident employer recognition. We will explore further benchmarks in 2024 to demonstrate our commitment in this area.

We have committed to launching a Women's Network in 2024 to improve the experience of female employees at the RCP. This year we spent some time developing a role profile for the chair of the network using focus groups and a survey to help determine the priorities for the role, which will be advertised early in 2024 and tasked with setting up the network.

Although we are disappointed in our gender pay gap for 2022, we have invested time in the past 2 years to better understand our data. We now have greater insights into our profile as an employer, which has a 70% female workforce with disproportionate balance in our upper quartile. This year we spent time reviewing our data and considering the longer-term actions we must take to reduce our gender pay gap. We are keen to support women in the workplace and offer 'women into leadership' conference places to staff. We continue to review the support we provide to women in their experience of motherhood and taking family leave.

We are introducing adjustments to ensure that our people systems for staff reflect all diversity strands. This will support constructive management analysis of progression, disciplinary action and training support. This is a key objective and highlights

the importance of monitoring. We have adapted Cascade, our key people system, to ensure it has the ability to capture and monitor diversity information. We continue to have challenges with some legacy systems; however, we will ensure that any future system will include diversity at the core of its requirements.

On unconscious bias training for staff, we have explored various options including off-the-shelf, bespoke and internal training to identify a learning solution to fulfil our operational needs and ensure value for money. Although we found useful materials none of the courses met our needs. Our plan in 2024 is to further explore internal collaboration to develop and utilise materials to reinforce inclusive recruitment. We will draw on the experience of our employee diversity, inclusion and belonging representatives and women into leadership programme participants.

In 2024 we will be offering a coaching programme to develop our internal coaching resource and to provide coaching-informed mentoring. Once this is established, we will look to extend the provision to support reverse or 'mutual' mentoring.

Diversity benchmarking can raise standards. During the development of our people strategy in 2024, the senior leadership will consider how diversity accreditation might add value to the RCP.

New employees continue to be invited to equality and diversity training when they join the RCP as a mandatory part of their induction programme, and then to take part in 'renewal' training every 3 years. From 2024 the content of the renewal course will focus on conscious inclusion, as a progression from the induction course.

Finally, we were proud to launch a new 'Living our values' framework for staff, which outlines a set of behaviours to underpin our values. The framework outlines what we can expect from each other in order to work more effectively together and build an environment of trust, positivity and inclusion.

Nominations for honours

The RCP Honours Committee continues to meet biannually and is chaired by the treasurer. The committee membership includes representatives from different regions, ethnicity, gender and age groups. We currently have four men and three women, of which two are Asian British and five are White British, the age range is 53–65, giving an average age of 59.

The remit of the committee is to identify meritorious candidates who can be considered for honours and to ensure that the lists truly reflect the diversity of the health and care workforce. It seeks nominations across all levels and particularly for:

- > women
- > people from Black, Asian and minority ethnic backgrounds
- > younger people
- > NHS staff working directly with patients
- > those working in areas outside the south-east of England.

Due to the nature of the honours process the committee is unable to specify any particular award. However, previous nominations resulted in the award of the following in 2023: two OBEs and one MBE, which were awarded to two White British men and one White British woman. The age range was from 55–68, giving an average age of 62.

In 2023 the committee considered nominations and requests for letters of support received which broke down as follows: six were men and six were women, eight were White British, two were White Irish, one was Asian British, one was Black African.

In keeping with our diversity goals, we have seen an increase in the nomination of women from two in 2022 to six in 2023. However, we have been less successful in other areas: the average age of candidates has increased, we have had

more London-based candidates, and the number of candidates from ethnic minority backgrounds dropped from three in 2022 to two in 2023. We plan to increase awareness and encourage the nomination of a more diverse group of candidates in 2024 and beyond.

Tackling misogyny and misconduct in medicine

This year saw an important spotlight on misconduct and misogyny in medicine, with the RCP responding in a number of ways. We have signed the [NHS sexual safety charter](#) and the [BMA pledge to end sexism](#) and following the publication of the [Working Party on Sexual Misconduct in Surgery report](#) in September, we published a [zero-tolerance statement](#) and signed an [open letter](#) in Wales. We hosted a roundtable with female senior college officers from the past decade, chaired by our president.

The findings from these discussions will form the basis of an article in our membership magazine [Commentary](#) about their experiences, shining a light on the barriers these senior women have faced. The February issue of [Commentary](#) will also have a wider focus on inclusion with input from the [RCP Trainees Committee](#).

We are developing an action plan that sets out how RCP teams and directorates can contribute to this agenda in an operational way across membership, education, clinical standards and communications. This will be presented to Council, at regional updates and RCP events where appropriate. We are collecting data on sexual harassment as part of the 2023 annual [census of UK consultant and SAS physicians](#) and will look to publish the results in 2024.

We are revisiting the [2018 RCP Code of Conduct](#) and looking into whether we can offer bystander training to fellows/members in collaboration with specialist societies.

Our buildings

Our two main buildings RCP at Regent's Park in London and RCP at The Spine in Liverpool give us an opportunity to showcase our work and signal that we embrace a diverse and inclusive future.

The RCP at Regent's Park building, now almost 60 years old, was designed to host our centuries-long history. In recent years we have worked to include the more modern face of the RCP alongside our historical displays. Following our 'We are the RCP' campaign, comprising images and quotes from a diverse group of fellows and members outside our main lecture theatre, this year we installed AV screens in the Lasdun Hall to purposefully promote inclusive RCP initiatives such as the Emerging Women Leaders Programme and the Medical Training Initiative as well as a visual representation of the diversity of our membership. The slides also give us an opportunity to provide context for the lack of diversity in the portraits we have on display. An amended version is being rolled out to our Liverpool home, The Spine.

As a new building, The Spine was designed to fully meet accessibility requirements so our focus in 2024 will be on work to improve accessibility in our Regent's Park building. Most staff and services have now moved out of the Nash terrace houses that form part of our estate in London. The houses are Grade I listed and we were only able to provide limited accessibility to building users. Staff have been relocated into our Regent's Park building. Although we have not been able to obtain formal feedback on the accessibility of the building from internal stakeholders due to lack of footfall in 2023, we are exploring input and suggestions following improvements made during 2022 and 2023, including enhanced signage as well as braille, improved lighting and the installation of a lift platform in the lecture theatre in late 2022. We will assess the work and prioritise changes that are achievable within our budget constraints.

New digital screens in our buildings illustrate the diversity of our membership

Education and exams

We want to reflect the medical workforce and ensure that equality, diversity and inclusion are championed in the RCP's education programmes and exams.

As part of our [MSc in Medical Education](#), run in collaboration with University College London, we have included specific topics on differential attainment, team dynamics, microaggressions and working and learning together across diverse teams. We also explore the standard setting, and selection processes across medicine to further inform these important topics, and encourage learners to consider these topics as part of their final year individual research projects.

In 2023, we successfully delivered the [Global Women Leaders Programme](#) in Pakistan. The programme aims to reduce the gender leadership gap and inspire women in healthcare to reach their potential. We trained 27 champions who supported 25 aspiring female leaders to complete the programme through a combination of virtual and face-to-face workshops. Feedback demonstrated that the workshops were well received, and the positive impact they had on the delegates and how they can use the skills they have learned to make a difference in the workplace. Prior to the programme, 64% of attendees had confidence in their leadership, which grew to 100% on its completion. The programme continues as champions work with attendees as mentors to continue to build leadership capacity, capability and confidence. We are also actively seeking funding opportunities to enable the programme to be replicated in other countries.

Unconscious bias training is now an integral part of our examiner induction training.

Through the Federation of the Royal Colleges of Physicians of the UK we're working to understand and help to address the causes of differential attainment in medical education. We welcomed the General Medical Council's (GMC) Fair Training Cultures Programme as an opportunity to further investigate differential attainment. As part of this work, the Federation has constructed an EDI action plan designed around four main priorities:

- 1** Ensuring all statutory and regulatory responsibilities are met.
- 2** Developing the evidence base to increase understanding of factors leading to differential attainment and thereby designing more effective interventions.
- 3** Piloting new interventions with trainees to determine what might work well with particular 'at-risk' groups.
- 4** Developing trainers to better support trainees from an EDI perspective.

The action plan is being overseen by the Federation Board and the GMC and is currently on track against key timelines.

Showcasing diversity in our communications

We continue to actively showcase the diversity of our membership and the medical profession through all our communications, events, campaigns and policy work, with the ambition of being a welcoming and inclusive organisation for all.

In 2021 we published a policy outlining [our commitment to equality, diversity and inclusion](#) in relation to communications and events. This is now shaping the way that all RCP communications and events are delivered.

We continue to make progress on diversity and inclusion in our main conference programmes. For the first time there were more female than male speakers at two key 2023 conferences – our annual conference Medicine 2023 and autumn conference Med+. In total, 52% of speakers were women and 28% were from Black, Asian and minority ethnic backgrounds. Diversity in our speakers and panels is just one element of the work we are doing to improve inclusion in our events. In addition, we:

- > recently introduced a breastfeeding room, multi faith room and hearing loop in all lecture theatres as standard and all content is captioned post event. We have also developed our conference webpages to clearly signpost accessibility support
- > have ensured that our conference webpages and our streaming service RCP Player have a built-in accessibility widget, which includes options such as ADHD-friendly profiles, seizure safe profiles, screen readers, content scaling and text magnifiers
- > ensure that the imagery used for conference themes reflects the diversity of our membership
- > have requested all staging to have ramps and handrails
- > have introduced creche facilities at new fellows and members ceremonies and always try to accommodate delegates wanting to bring infants along to any event.

Many items in the RCP collections were acquired during Britain's highly exploitative colonial history. The RCP museum is committed to publishing details of previously unacknowledged links to systems of institutional discrimination within RCP collections.

52% of speakers at our two main conferences were women and 28% were from Black, Asian and minority ethnic backgrounds

So far we have published downloadable PDFs listing individuals with links to the [20th-century eugenics movement](#) and the [transatlantic slave trade on our values page](#). We have also published a broader [public statement on decolonising collections](#).

Our 2023 exhibitions showcased a diverse range of contributors and experiences. To create our [Unfamiliar](#) exhibition, the RCP museum worked with photographer Theo Deproost and physician associate Debbie Jegede to bring together the worlds of medicine and art. The stunning results were displayed alongside the original objects to highlight their hidden richness and beauty. And our current exhibition, [Fortitude](#), which opened in September 2023, shares the experiences of RCP members and other healthcare professionals working during the COVID-19 pandemic. From trainee doctors and consultants to GPs and physician associates, survey respondents from over 20 medical specialties and professions describe how their lives were transformed.

We participated in a range of awareness days and months, including International Women's Day, LGBTQ+ History Month, South Asian Heritage Month and Black History Month. Our This Doctor Can campaign continues to share stories from RCP members, fellows and healthcare professionals from a wide range of backgrounds. Its goal is to celebrate diversity and promote equality by showcasing role models from a broad spectrum of physicians all aimed at making every doctor feel included and inspired to progress in their careers. Examples of blogs from 2023 include [Dr George Varughese](#) describing his path to becoming an NHS consultant, and [Dr Hilal Al Saffar](#) on the thriving new RCP Iraq Network.

The RCP's brand guidelines were updated in 2023 and re-emphasise the importance of being mindful of diversity in the photography and imagery we use across all our published materials. We have also introduced a range of skin tones to convey diversity in our illustrations.

Our 2023 exhibitions showcased a diverse range of contributors and experiences

Tackling health inequalities

Ben Summerskill's report was clear that the RCP must be diverse and inclusive if it is to have credibility in its work on health inequality and related issues.

Policy and influencing

Health inequality continues to be both a key influencing priority for the RCP and an area of focus for the sector as a whole. This year our advisory group on health inequalities and senior leadership team continued to oversee and develop work across our strategic priorities.

We were pleased to publish the findings of our project led by our clinical fellow for health inequality, Dr Ash Birtles. It helped us to understand how we can support our members to address health inequalities in their practice and is informing the development of educational resources. These include bitesize audiovisual resources and a new e-learning package on health inequalities.

Following years of us highlighting the issue, we welcomed the Labour Party announcement that it would establish a 'mission delivery board' to 'bring together all departments with an influence over the social determinants of health'. We also welcomed the Liberal Democrat Party commitment to prevent ill health, tackle health inequalities and create a 'health creation' unit in the Cabinet Office. In October we marked the third anniversary of our Inequalities in Health Alliance, which grew to over 250 members collectively campaigning for a cross-government strategy to reduce health inequalities. We published an update to our policy paper, RCP view on health inequalities: a call to action for a cross-government strategy.

Widening participation

We strengthened our relationship with the Social Mobility Foundation, welcoming chief executive Sarah Atkinson to a meeting of our Council alongside Professor Peter Chiodini FRCP. We published a statement that working in medicine is a privilege that shouldn't just be for the privileged, plus an article by Peter. He talked about his experience of studying medicine as someone from a working-class background and the work he does with the Social Mobility Foundation (SMF). We encouraged all our members – and all physicians – to consider becoming an SMF mentor as part of its Aspiring Professionals Programme. We also promoted In2MedSchool, founded by RCP member Dr Brian Wang, which also provides mentoring opportunities.

Our museum team now offers on-site careers-focused sessions for secondary schools. These free interactive learning sessions use RCP historic collections to inspire and educate pupils about careers in medicine. Through the unique RCP collections, pupils explore the development of medicine, the range of jobs available in healthcare today and take part in activities that help identify the skills, qualities and knowledge needed for a career in healthcare. So far we have delivered four sessions with local secondary schools and are now receiving enquiries for 2024.

Next steps

This document summarises our progress over the past year in improving diversity and inclusion at the RCP. Although this marks our last specific progress report on the subject, we will continue to focus on achieving the recommendations to ensure the RCP is as diverse and inclusive as our staff, membership and the medical workforce. We will publish future updates on diversity and inclusion in our annual report.

Health inequality continues to be a key influencing priority for the RCP

Appendix:

Our progress at a glance

The numbered recommendations are listed in full below the table.

Recommendations	Lead group/dept	Year 1 / RAG rating	Year 2 / RAG rating	Year 3 / RAG rating
What we know				
1	P&C/PRCP/CEO			✓ Red
2	P&C/CEO/PRCP			✓ Amber
3	PRCP/CEO	✓ Completed		
What people see				
4	Showcasing Diversity T&F Group	✓ Completed		
5	P&C			✓ Green
6	P&C	✓ Green		
7	Showcasing Diversity T&F Group		✓ Completed	
	Corporate Services (Property Services)	✓ Completed		
8	Corporate Services (Property Services)			✓ Amber
What people think				
9	MSGE	✓ Completed		
10	MSGE			✓ Amber
11	P&C			✓ Green
12	MSGE			✓ Completed
13	P&C			✓ Red
14	MSGE/CPR			✓ Completed
15	MSGE			✓ Completed
Keeping the best people				
16	MSGE	✓ Completed		
17	MSGE			✓ Amber
18	MSGE			✓ Green
19	P&C			✓ Green
20	P&C			✓ Green
Using data wisely				
21	P&C/MSGE/CP&R		✓ Completed	
22	MSGE/P&C			✓ Amber
23	P&C			✓ Red
24	P&C			✓ Amber
25	P&C			✓ Amber

Recommendations	Lead group/dept	Year 1 / RAG rating	Year 2 / RAG rating	Year 3 / RAG rating
Ways of working				
26	CP&R	✓ Completed		
27	Strategy Executive	✓ Completed		
28	Showcasing Diversity T&F Group	✓ Completed		
29	Corporate Services (IT)			✓ Completed

Key

CEO = chief executive officer; PRCP = president of the RCP; P&C = People and Culture; MSGE = Membership Support and Global Engagement; CP&R = Communications, Policy and Research; T&F = task and finish

Progress rating (RAG)

Green – on track for implementation in given year

Amber – good progress but may be implemented with a slight delay

Red – behind schedule. To be implemented the next year

The Summerskill diversity and inclusion report's recommendations in full

What we know

- 1 Announce an ambition that by 2030 those in both voluntary and staff roles across the RCP should reflect the diversity of the qualified medical workforce, at all levels including trustees and Council.
- 2 Feature measurable delivery of diversity outcomes in the performance objectives of all senior staff and senior officers, as well as in their role descriptions. Appraisals (and any discretionary part of their remuneration in the case of staff) should be linked to these, as with other key deliverables.
- 3 Task the chief executive with reporting annually on progress on Diversity and Inclusion – both in voluntary and paid workforce and service delivery – to trustees and Council and publishing the data.

What people see

- 4 Review the RCP website at points of entry and furnish it up front with strong examples of senior role models, both members and staff, from a range of backgrounds.
- 5 Include at the beginning of all application packs, for both voluntary and paid roles, a prominent rubric emphasising the RCP's keenness to recruit in the complexion of the wider medical workforce and patient base.
- 6 Update recruitment monitoring forms to use 21st-century language unlikely to deter potential applicants.
- 7 Review visual representation of members, past and present, in reception areas so that they better represent the RCP's ambitions for breadth of membership.
- 8 Execute an access audit for both the RCP's existing London premises and The Spine, with disabled staff and members enabled to contribute to its findings.

What people think

- 9 **Part 1:** Advertise all voluntary roles, and include clear details of the expectations of time and expertise necessary. Introduce and advertise a presumption that such roles can be job-shares. Re-advertise such roles after an appropriate, RCP-wide, tenure such as 6 or 8 years. **Part 2:** Introduce and advertise a presumption that such roles can be job-shares. Re-advertise such roles after an appropriate, RCP-wide, tenure such as 6 or 8 years.
- 10 Introduce 'observer' opportunities for all members, inviting them to attend committee meetings or examination panels and 'shadow' officers, subject to appropriate protections around confidentiality.
- 11 Adopt an organisational ambition of having a similar number of men and women on interview panels (for both voluntary roles and staff) and a requirement that least one person on all such panels be a woman (or a man) and one from an under-represented group unless unavoidable.
- 12 Review whether any roles currently restricted to fellows might be opened to non-fellows, including SAS members.
- 13 Request that all members of any appointment panel engage in a light-touch training module in unconscious bias provided by the RCP. Require chairs of such panels to have used such a module.
- 14 Engage in a focused communications drive with the NHS and trusts to emphasise the importance of RCP roles for the NHS and the profession.
- 15 Review the objective criteria for appointment as a fellow, and monitor the diversity of appointments annually. Consider how the nomination process might be more transparent, eg by publishing the names of referees.

Keeping the best people

- 16 Extend guidance issued to all committee chairs on appointment to include awareness of Diversity and Inclusion. Require chairs within 6 months of appointment to engage in a light-touch RCP training module in unconscious bias.
- 17 Regularise the management of volunteers across the RCP – including development of volunteer agreements, performance review and the payment of all travel expenses.
- 18 Carry out a feasibility review to consider the possibility of funding child- or other care expenses incurred by those in voluntary roles, both women and men.
- 19 Require that Equality and Diversity training now provided to staff at the point of recruitment is refreshed every 3 years.
- 20 Pilot goal-driven staff network groups for some cohorts of staff (eg women and BAME employees) tasked with supporting RCP business objectives such as closing the gender pay gap and delivering the Workforce Race Equality Standard. Engagement in such network groups should be regarded as an organisational investment, not a cost.

Using data wisely

- 21 Execute and publish annual ‘snapshot’ surveys of the make-up of all volunteer groups – including trustees and Council – and staff, featuring all the current ‘protected’ characteristics and also school background and London/non-London breakdown.
- 22 Introduce a programme of mentoring and ‘reverse mentoring’ to support both staff and members from under-represented backgrounds in developing within the RCP.

- 23 Enter one of the diversity benchmarking exercises for employers, such as Stonewall’s (cost-free) Workplace Equality Index, to test the assumption that the RCP performs well as an employer. Extend the engagement to other benchmarking exercises over time.
- 24 Consider piloting annual publication of data on the ethnicity pay gap in advance of it becoming a legislative requirement.
- 25 Adjust people systems for staff, as they’re renewed, to reflect all diversity strands for purposes of constructive management analysis of progression, disciplinary action and training support etc.

Ways of working

- 26 Make explicit reference in the RCP’s new 4-year strategy to the importance of Diversity and Inclusion in support of its external work in areas such as national and global health inequalities.
- 27 Senior officers, trustees and senior staff should commit to individually promoting Diversity and Inclusion through each of their usual communications vehicles.
- 28 Ensure that all panels at RCP conferences, education and training events comply with recently introduced guidelines to include speakers from a range of backgrounds.
- 29 Invest in appropriate IT infrastructure and training so those in voluntary roles based outside London or with caring responsibilities can much more easily engage fully in meetings.

Ben Summerskill’s report, *A 2020 vision*, and our [annual progress reports](#) are available to download from the RCP website.

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