

Workforce Race Equality Standard

April 2024 – March 2025



The NHS Workforce Race Equality Standard (WRES) is an initiative aimed at addressing racial inequalities within the NHS workforce. It focuses on ensuring that employees from ethnic minority background have equal access to career opportunities and receive fair treatment in the workplace.

The WRES requires NHS organisations to collect, analyse, and publish data on race equality indicators such as recruitment, career progression, and disciplinary actions. By highlighting disparities and holding organizations accountable, the WRES seeks to create a more inclusive and equitable working environment for all NHS staff.

The 2024-2025 WRES Report is based on a snapshot of our workforce data as at 31 March 2025. Benchmark data, used for comparison, is based on staff survey results from NHS organisations of a similar size and nationally compiled data.

We have undertaken a range of initiatives across the year in response to last year's data and we have aligned our plans to the national NHS EDI Improvement Plan six high impact actions.

The Trust introduced mentoring in November 2025 and continue to develop its programme of EDI Champions who are trained to respond to unprofessional behaviours and Inclusion Recruitment Champions who support interviews for Band 8B and above staff.

Our board have engaged with staff across all protected characteristics to learn more about their lived experience and what we have heard has helped us to address some of the thematic challenges. We recognise that discrimination disproportionately affects staff from ethnic minority

backgrounds and we are committed to continue to address this, our Leadership Conference (June 2025) will in part focus on anti-racism and the Trust is currently developing a guide to address racist incidents which will launch in the autumn of 2025.

Ethnic minority staff representation

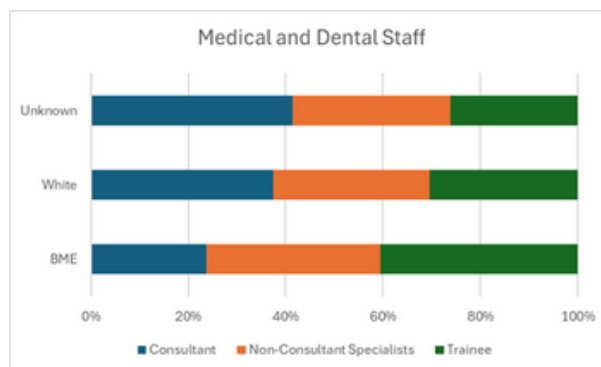
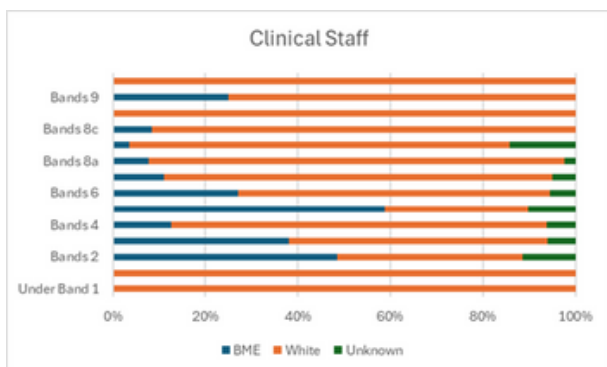
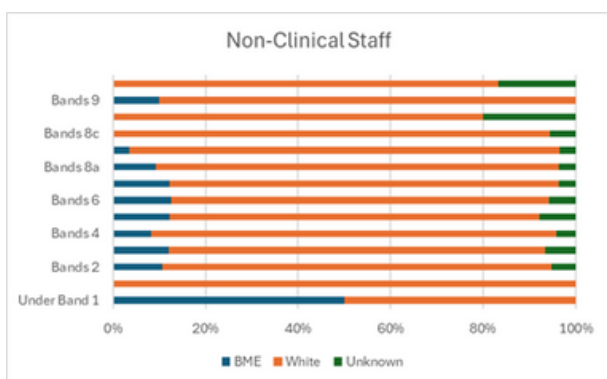
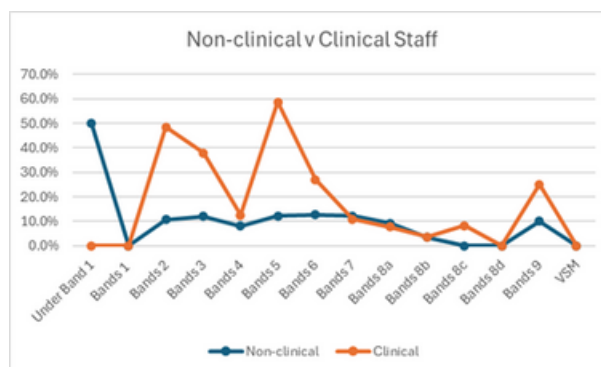
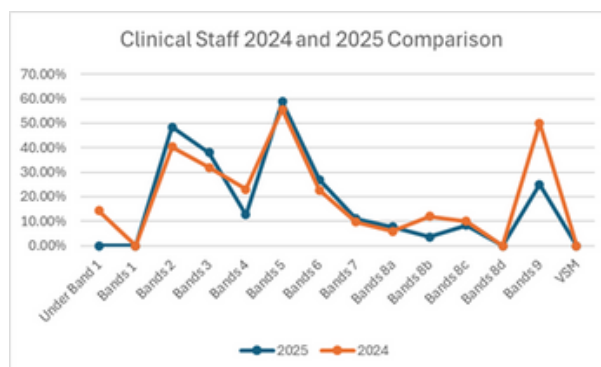
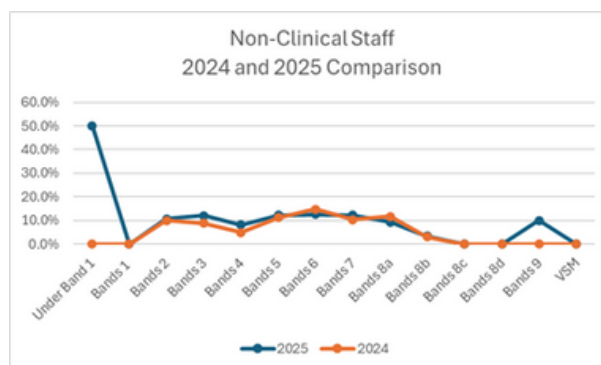
We continue to improve overall representation of ethnic minority staff in the Trust, an increase of 232 staff, from 1624 (27%) in 2023/24 to 1856 (30%) this year.

- Agenda for Change (AfC) Non-clinical roles – there is less representation of ethnic minority staff in non-clinical roles, 11% compared to 36% in clinical roles. Representation declines sharply at senior non-clinical levels, Band 8a and 8b (7%, 11 out of 157 staff) and Band 8c to VSM (0 out of 8), suggesting a need to improve progression opportunities. When compared to last year, there is relatively no change in representation between Under Band 1 to Band 4, indicating some stagnation. The Trust now has one senior leader at Band 9, in 2024 there were no senior leaders in non-clinical roles between Band 8C and Very Senior Management (VSM) from an ethnic minority background.
- AfC Clinical roles – there is strong representation of ethnic minority staff in clinical roles (38%, 971 out of 2554 staff). Like non-clinical staff, there is a significant drop in representation in senior roles (Band 8a to 8b is 7% BME, 11 out of 157 and Band 8c to VSM is 9% BME, 2 out of 23), despite there being a high presence in operational

bands 5 to 7. The higher proportion of staff at mid-level banding indicates a good progression pipeline and the Trust will continue to offer leadership development opportunities for all staff including mentoring, which was re-introduced in November 2025 and improve recruitment practices to ensure they are fair and equitable.

- Medical and Dental roles – representation of ethnic minority staff is lowest in the most senior roles, 40% are trainees, 36% are non-consultant specialists and 24% are consultants. Ethnicity is unknown for 11% of medical and dental staff, improving ethnicity data completeness would help to develop more targeted interventions. Staff receive an annual reminder to update their demographic information, which is making improvements over time.

This data will be explored with the Trust Board and representatives of the Race Equality staff network during the summer of 2025.



AfC Non-clinical staff	BME		White		Unknown		Total
AfC Bands <1 to 4	100	11%	751	83%	51	6%	902
AfC Bands 5 to 7	35	12%	232	82%	17	6%	284
AfC Bands 8a to 8b	6	7%	74	89%	3	4%	83
AfC Bands 8c to VSM	1	3%	35	90%	3	8%	39
Total non-clinical	142	11%	1092	83%	74	6%	1308

AfC Non-clinical staff	BME		White		Unknown		Total
AfC Bands <1 to 4	461	35%	750	57%	94	7%	1305
AfC Bands 5 to 7	971	38%	1390	54%	193	8%	2554
AfC Bands 8a to 8b	11	7%	139	89%	7	4%	157
AfC Bands 8c to VSM	2	9%	21	91	0	0%	23
Total non-clinical	1445	36%	2300	57%	294	7%	4039

WRES Improvements

We have continued to see an improvement in overall representation and in ethnic minority staff experiencing harassment, bullying or abuse from colleagues in last 12 months, this has reduced by 1.69% since last year, this is 1.23 percentage points lower than the benchmark average.

There is no significant change for White staff, however, this has worsened by a small increase of 0.47%.

The WRES Metrics below, indicate where we have made improvements and where the metrics have worsened. Numbers in green indicate an improvement, numbers in red indicate the metric has worsened and numbers in yellow indicate there is relatively little or no change.

The three high priority areas for improvement include bullying and harassment from patients, discrimination and equal opportunities/progression (metric 5, 7 and 8) are noted in the table in the next section (high priority areas for improvement), including actions for 25/26 in response to this data. This will include taking steps to understand their perceptions and lived experience around equal opportunities in order to develop appropriate responses.

The discrimination metric has improved slightly since last year, however, this remains the Trust's EDI Pillar Metric (Improving Together focus) for the second year in a row, to maintain the momentum on actions underway, particularly as there is a correlation between the types of behaviour experienced through harassment and bullying and discrimination – this number also remains considerably higher than the benchmark.

WRES Metrics

Ten metrics in table below, highlighting changes since last year. National data* and the Trust's benchmark data are highlighted in blue.

No	WRES Metric	Bench-mark	2023-2024	2024-2025	Difference	Direction
1	Percentage and number of staff in the Trust by ethnicity (AfC Bands 1-9 and VSM)	28.6%*	27.20%	30.30%	4	Improved
2	The relative likelihood of white applicants being appointed from shortlisting compared to BME applicants <i>A figure above 1:00 indicates that White candidates are more likely to be appointed from shortlisting than BME candidates. The gap could be higher, 18% of candidates have not stated their ethnicity.</i>	80% of NHS Trusts report White applicants are significantly more likely to be appointed, figure broadly unchanged since the inception of WRES*	1.27	2.01	0.74	Similar

3	The relative likelihood of BME staff entering the formal disciplinary process compared to white staff A figure below 1:00 indicates that White staff are more likely than BME staff to enter the formal disciplinary process. The ethnicity status of 8% of staff is unknown.	1.09*	0.44	0.92	0.48	Similar
4	The relative likelihood of white staff accessing non-mandatory training and CPD compared to BME staff A figure of 1:00 indicates parity.	Range 0.8 – 1.25, except Southwest avg. 0.79*	1.02	0.91	-0.11	Similar
5	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months	28.30%	26.80%	27.90%	1.1	Worsened
6	Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months	24.80%	25.20%	23.50%	-1.7	Improved
7	Percentage of staff believing that their trust provides equal opportunities for career progression or promotion	49.70%	45.60%	44.60%	-1	Worsened
8	Percentage of staff experiencing discrimination at work from other staff in the last 12 months	15.70%	19.50%	18.60%	-0.9	Similar
9	The representation of BME people amongst board members	16.5%*	1	1*	0	No change

Board representation

This data excludes Associate Non-Executive Directors. The Trust currently has two associates, one from a BME background.

2023 Board Membership						Overall Workforce	Rate of ethnicity from staff
	Voting	Non-Voting	Executive	Non-Executive	Total		
Ethnic Minority	1	0	0	1	1	30%	30%
White	14	1	8	7	15	62%	69%
Unknown	1	0	1	0	1	7%	

High priority areas for improvements for WDES and WRES

Metric	Description	2024-2025 Actions (reporting year)	2025-2026 Planned Actions
WDES3	Formal disciplinary process (capability)	· Evaluate data by demographic group to identify any disparities and audit via a monthly case work meeting · One-day Expectations of Line Managers workshop, covering all aspects of line management responsibilities · Training to support implementing the Just & Learning 4 step model	· Pilot Cultural Ambassadors to improve the experience of staff involved in formal and informal processes and reduce the imbalance in severity of disciplinary actions against minoritised staff. Current three staff trained in role
WDES4 WRES5	Harassment, bullying and abuse from patients, relatives and visitors	· Launch of Maybo training (reduce risk of behaviours of concern and workplace violence) for priority areas · Introduction of EDI Champions – currently 62 across the Trust · Launch of 'Addressing Unprofessional Behaviours' and 'Bystanders' training · Launch of 'Cultural Competence' training that includes ableism · Staff access Freedom to Speak Up Guardian Service · Staff receive support from disabled staff network and its chair	· Safe to speak engagement: bullying and harassment from patients and visitors · Launch of Never OK campaign in June 2025, including Go & See to wards with police staff · Increase number of EDI Champions · Slice of Life: Board engagement - values-led behaviours: engagement with staff to explore their lived experience · Regular comms to promote available support - EDI Lead to launch drop-in clinic (sessions) for staff to seek advice and guidance
WDES5 WRES7	Equal opportunities for career progression and promotion	· Train Inclusion Recruitment Champions to sit on interview panels 8B+ roles · Leadership and CPD development accessible to all staff. 7% of staff who accessed CPD training stated they had a disability, 30% were BME · Apprenticeships accessible to all staff, 27% are BME, staff preferred not to share sexual orientation or disability status	· Focus on development of existing staff, due to reduction in recruitment across the NHS: · Increase number of Inclusion Recruitment Champions · Improve demographic data capture for Leadership programmes · Promote mentoring through all Staff Networks and extensively across the Trust

WDES4 WRES5 WRES8	Discrimination from other colleagues (which will have a positive impact on metric 6, harassment and bullying)	· Introduction of EDI Champions – 62 across the Trust · Launch of 'Addressing Unprofessional Behaviours' and 'Bystanders' training · Launch of 'Cultural Competence' training that includes racism · Staff access Freedom to Speak Up Guardians (x number) · Staff receive support from Race Equality staff chair and EDI Lead	· Slice of Life: Board engagement - values-led behaviours: engagement with staff to explore their lived experience · Continue with provision of training to address unprofessional behaviours · Continue to recruit, train and deploy EDI Champions who can support colleagues locally
WDES6	Felt pressure from their manager to come to work, despite not feeling well enough to perform their duties	· Line manager training to support health and wellbeing conversations · One-day Expectations of Line Managers workshop, covering all aspects of line management including EDI, health and wellbeing and supporting attendance	· Continue with training offer including Expectation of Line Manager workshops (aiming 90% of Band 6 to 8C who are identified as a supervisor on the Electronic Record System)