Mersey and West Lancashire Teaching Hospitals NHS Trust

Workforce Race Equality Standard Report

April 2024 – March 2025

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1. Executive Summary

This report provides the Trust Board with the Annual Workforce Race Equality Standard (WRES) data for the Mersey & West Lancashire Teaching Hospitals Trust (MWL). The publication of this report is for the period 2024-2025 in line with the NHS Standard Contract requirements to publish the WRES indicators.

2. Introduction

NHS England introduced the Workforce Race Equality Standard (WRES) in 2015. The WRES exists to highlight any differences between the experiences and treatment of white staff and Ethnic Minority staff in the NHS and places an onus on NHS organisations to develop and implement actions to bring about continuous improvements. The main purpose of the WRES is:

- to help NHS organisations to review performance on race equality, based on the nine WRES indicators,
- to produce action plans to close any gaps in workplace experience between white and Ethnic Minority staff,
- to improve Ethnic Minority representation at the Board level of the organisation.

3. A year in review: 2024-2025

The Trust has worked to implement anti-racism actions agreed within the 2024 WRES report, as well as the EDI Operational Plan 2022-2025, activity to support the implementation of the NHS EDI High Impact Actions[1] (HIA), the Equality Delivery System[2] (EDS) and our commitment to join the NW Anti-Racism Framework[3].

Key activities that have taken place between November 2024-October 2025 include:

- **EDI SMART Training Objective (HIA1)**: For the 2025 Appraisal, all members of staff are being asked to identify a person EDI Training and Development Objective. Guidance and examples have been provided as well as things to do, watch, read, and participate in.

- **Senior Anti-Racism Champion**: Rob Cooper (Chief Executive) has been appointed as the Trusts Anti-Racism champion.

- **MWL Anti-Racism Statement**: After an extensive consultation the Trusts new Anti-Racism statement was adopted by the Board in August 2025.

[1] NHS EDI Improvement Plan High Impact Actions
[2] NHS Equality Delivery System
[3] NHS North West BAME Assembly

- **Staff Training**: For 2025-2026 a new training course on Race Equality Awareness was introduced, open to all member of staff to attend. This course is in addition to sessions on Harassment & Civility for Managers, Unconscious Bias, Removing Bias from Recruitment, and Equality Impact Assessments. Cultural Competency training has been trialled as part of the Perceptorship Programme with the plan to roll this out in 2025/26. Similarly, an Active Bystander training package has been piloted, with sessions offered this year (actions support HIA3 & 5).

- **Cultural Awareness**: The Trust has worked to raise awareness of race equality topics by engaging in events including Black History Month and Wear Red Day; as well as promoting/marking dates such as South Asian History Month, Ramadan, Eid, and Diwali.

- **Bullying & Harassment**: In addition to training, the Trust has continued to roll out Zero Tolerance posters across its sites; the Responding to Unacceptable Behaviour [from patients and visitors] policy has been reviewed an updated, and the Trust is looking to expand operational Cavell to Southport Hospital (actions support HIA6).

- **Online Resources**: The EDI (Workforce) Team has continued to expand the online resource available to staff. Anti-racism Hub resources have been expanded to include the NHS Anti-Racism Literacy Guide, and the NW Civility and Respect video series. Event hubs for South Asian History Month, Black History Month, Race Equality Week, Windrush Day, Ramadan, Holi, and Diwali have provided additional self-learning materials for staff.

- **Ethnicity Pay Gap (HIA3)**: Having completed the Ethnicity Pay Gap since 2022, in March 2025 the Trust published its 2024 Ethnicity Pay Gap on the public website. Overall, the Trust and Agenda for Change Ethnicity Pay Gaps are in favour of our ethnic minority staff population, with the pay gap for Medical & Dental staff in favour of our White medics.

4. The 9 WRES indicators

The WRES is an analysis of the following 9 data indicators, relating to workforce, recruitment, disciplinary, staff satisfaction, and board diversity:

1. **Staff Population**: Percentage of White and Ethnic Minority staff who are Non-Clinical, Clinical Non-Medical, by Agender for Change (AfC) pay bands, and Clinical Medical & Dental roles.
2. **Recruitment & Selection**: Relative likelihood of staff being appointed from shortlisting across all posts.
3. **Disciplinary**: Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.

4. **Training**: Relative likelihood of staff accessing non-mandatory training and Continuing Professional Development (CPD).
5. **Harassment from Patients**: Percentage of staff experiencing harassment, bullying or abuse from patients, relatives, or the public in last 12 months,
6. **Harassment from Staff:** Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months,
7. **Equality in Career Progression**: Percentage of staff believing that the trust provides equal opportunities for career progression or promotion,
8. **Discrimination**: In the last 12 months have you personally experienced discrimination at work from any of the following, a manager/team leader, or other colleagues,
9. **Board Representation**: Percentage difference between the organisations' Board membership and its overall workforce disaggregated: By voting membership of the Board; By executive membership of the Board.

4.1. Data and Methodology

Before reading the report, please familiarise yourself with the following information which provides a summary of the data sources and limitations. The time periods for the data sets are as follows:

- **Indicators 1 and 9**: snapshot date of the 31st March,
- **Indicators 2-4**: period from the 1st April to 31st March,
- **Indicators 5-8:** the relevant staff survey that took place between the 1st April to 31st March, usually in November/December.

The Trust collates data for Indicators 1-4 and 9 directly from Employee Staff Record (ESR), the TRAC recruitment system and HR Business Partners to create a final data set.

Benchmarking data has been sourced from the national staff survey website and Trust Staff Survey data[4] (2021-2024), Model Health system[5] (2020-2025), and the 2024 national WRES report[6]. Where 2025 data is not available, 2024 data has been provided.

4.1.1. Scope of reported population

The following data principles are applied to the WRES data:

- Data relates to the total substantive workforce on the relevant snapshot date with the exception of Indicator 1 which disaggregates the data by Non-Clinical, Clinical Non-Medical and Clinical-Medical, and by Pay Band.
- Bank staff are not included and the Bank WRES pilot was not repeated this year.

[4] NHS Staff Survey
[5] Model Health System (log in required)
[6] NHS WRES 2023 Data

- WRES data is only reported on the broad ethnicity categories of Ethnic Minority (aka Black and Minority Ethnic (BME)), White, and Unknown.

The WRES submission does not provide an in-depth analysis of the different demographics of the NHS workforce or the different source population and talent pipelines that make up the career groups, for example staff group is not analysed, nor data disaggregated by UK/Overseas domiciled or educated.

4.1.2. Note on terminology

The report uses the term Ethnic Minority to refer to all staff from a non-white ethnic minority group. This would include all staff who have identified as Asian, Black, Mixed/Dual Heritage, and Other. The term is comparable with Black, Asian & Minority Ethnic (BAME), People of Colour (PoC), Global Majority, Ethnic Minority, and Minority Ethnic.

5. Workforce WRES Data

5.1. Staff Profile Workforce Overview

In the snapshot date of 31st March 2025, Mersey & West Lancashire Teaching Hospitals Trust (MWL) employed 11,006 staff which consisted of:

- 16.3% Ethnic Minority staff
- 80.7% White staff
- 3.0% Not Stated/ unspecified / prefer not to answer.

Over the past 5 years (2021 v 2025), MWL has seen a year-on-year increase in the number and proportion of Ethnic Minority staff in the total workforce (1057/10.6% to 1795/16.3%), Non-Clinical (65/2.3% to 131/4.3%), Clinical Non-Medical (501/8.1% to 1163/16.7%) and Clinical Medical & Dental (M&D) (355/43.3% to 501/50.5%) (Figure 1). Further details for each category are set out below.

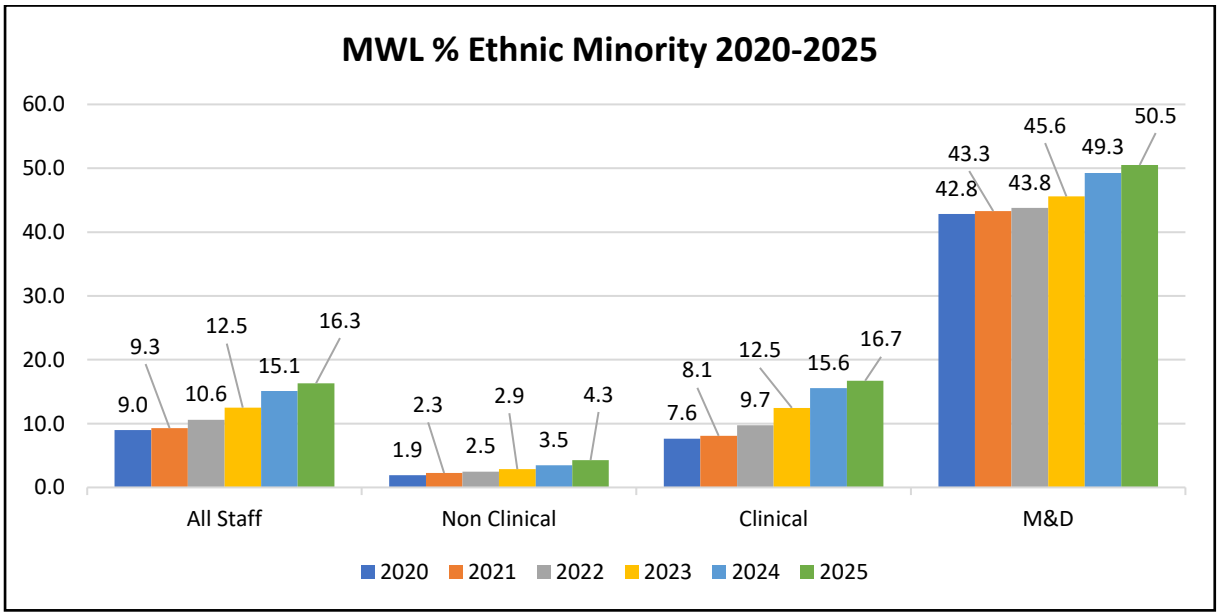

Figure 1

5.2. Indicator 1: Non-Clinical and Clinical Workforce

Indicator 1 is a review of the staff population by Non-Clinical Workforce by Agenda for Change (AfC) pay bands; Clinical Workforce not Medical by AfC pay bands; and Clinical Workforce Medical and Dental.

From March 2024 to March 2025, there was an increase in the number and proportion of Ethnic Minority staff:

- The total workforce from 1623 (15.1%) to 1795 (16.3%).
- Non-Clinical staff from 106 (3.5%) to 131 (4.3%)
- Clinical Non-Medical roles from 1052 (15.6%) to 1163 (16.7%)
- Clinical Medical & Dental roles from 465 (49.3%) to 501 (50.5%)

Overall, the proportion of non-clinical staff who are from a Ethnic Minority is 4.3% (Table 1), higher than the local Ethnic Minority population in all boroughs that MWL is located in, with the exception of Knowsley (Table 2). The proportion of Ethnic Minority staff in clinical roles is significantly higher than the local population and reflects national trends in nursing and medicine specifically, as well as previous overseas recruitment activities.

Table 1: Staff Headcount

Staff Headcount March 2025	White	Eth Min	Unk	% Eth Min MWL (2025)	% Eth Min National (2024)
Total	8886	1795	325	16.3%	28.6%
Non-Clinical Workforce (AfC)	2824	131	84	4.3%	18.8%
Clinical Non-Medical Workforce (AfC)	5620	1163	191	16.7%	29.4%
Medical and Dental Workforce	442	501	50	50.5%	48.7%

Table 2: Population Benchmarks

Benchmarks	%White	%EthMin	%Unk
MWL Total	80.7%	16.3%	3.0%
National (2024)	67.0%	28.6%	4.3%
North West (2024)	77.0%	19.4%	3.7%
National Census: Sefton	95.8%	4.2%	-
National Census: St Helens	96.5%	3.5%	-
National Census: Knowsley	95.3%	4.7%	-
National Census: West Lancashire	96.9%	3.1%	-
National Census: C&M ICB Area	93.0	7.0%	-
National Census: Liverpool City Region	91.7	7.3%	-

5.2.1. Indicator 1a: Non-Clinical workforce

The Non-Clinical workforce includes staff in administration, clerical and estates type of roles. Key observations:

- The total number of Ethnic Minority Non-Clinical staff increased from 106 to 131, with an increase in the proportion of Ethnic Minority staff on bands 2-7, and 8b (Table 3).
- There were no declared Ethnic Minority staff on Bands 1, 8c-VSM.

- Compared to the lowest local population, the proportion of Ethnic Minority staff are underrepresented on Bands 1, 4, 8a, 8c-VSM, with the remaining bands within the range of 3.4%-5.7%.

Table 3: Staff Headcount Non-Clinical Workforce

	MWL 2024		MWL 2025		National 2024
	%White	%EthMin	%White	%EthMin	%EthMin
Band 1	100.0%	0.0%	100.0%	0.0%	-
Band 2	90.3%	4.4%	90.1%	5.7%	19.9%
Band 3	92.3%	4.4%	91.8%	5.4%	18.2%
Band 4	96.4%	1.6%	96.1%	2.1%	18.4%
Band 5	91.9%	4.5%	92.7%	5.2%	19.9%
Band 6	91.9%	3.1%	94.5%	3.4%	20.9%
Band 7	95.5%	3.2%	95.3%	4.0%	19.1%
Band 8A	92.2%	3.1%	95.9%	2.7%	17.3%
Band 8B	93.1%	1.4%	93.5%	3.9%	15.8%
Band 8C	88.5%	3.9%	96.8%	0.0%	14.7%
Band 8D	100.0%	0.0%	100.0%	0.0%	12.2%
Band 9	100.0%	0.0%	100.0%	0.0%	11.0%
VSM	91.7%	0.0%	92.3%	0.0%	11.8%
Total	92.8%	3.5%	92.9%	4.3%	18.8%

5.2.1.1. Race Disparity Ratio Non-Clinical Staff

At the time of the writing of this report, the Trusts Race Disparity Ratio data had not been provided by NHSE.

The WRES report calculates a "race disparity ratio" which is the difference between the proportion of Ethnic Minority Non-Clinical staff in AfC bands Lower v Middle, Middle v Upper, and Lower v Upper; where Lower means bands 1-5, Middle bands 6-7, and Upper bands 8+. A ratio value of 1 means that there is no difference, a ratio of <1 means Ethnic Minority staff are more represented in the higher bands, and a ratio of >1 means that White staff are more represented in the higher bands.

5.2.2. Indicator 1b: Clinical workforce: Non-Medical

The Clinical Non-Medical workforce includes all allied health professionals, nursing and midwifery staff and relevant support staff. Key observations:

- The total number of Ethnic Minority Clinical Non-Medical staff increased from 1052 (15.6%) to 1163 (16.7%), with an increase in the proportion of Ethnic Minority staff on bands 2, 3, 6-8c (Table 5)
- There were no declared Ethnic Minority staff on Bands 8d, 9 or VSM.
- Compared to the local population, the proportion of Ethnic Minority staff is equal to or exceeds the Knowsley census population of 4.7% on Bands 2-3,

5-8c, and Bands 2, 5, 6, 8a and 8c exceeding the population of the Liverpool City Region.

Table 4: Staff Headcount Clinical Non-Medical Workforce

MWL	2024		2025		National
	%White	%EthMin	%White	%EthMin	%EthMin
Band 1	100.0%	0.0%	100.00%	0.00%	-
Band 2	85.2%	10.2%	80.43%	15.48%	31.5%
Band 3	92.0%	4.7%	90.38%	6.57%	25.9%
Band 4	88.5%	9.7%	93.70%	4.44%	23.0%
Band 5	63.1%	33.3%	64.63%	32.62%	45.7%
Band 6	86.8%	10.8%	85.68%	12.55%	25.2%
Band 7	92.0%	5.7%	91.30%	6.39%	18.8%
Band 8A	89.0%	8.9%	87.90%	9.51%	17.9%
Band 8B	90.9%	4.6%	90.32%	4.84%	15.7%
Band 8C	94.1%	5.9%	90.00%	10.00%	12.4%
Band 8D	100.0%	0.0%	88.89%	0.00%	13.1%
Band 9	100.0%	0.0%	100.00%	0.00%	14.8%
VSM	100.0%	0.0%	0.00%	0.00%	17.2%
Total	81.2%	15.6%	80.6%	16.7%	29.4%

5.2.2.1. Race Disparity Ratio Non-Clinical Staff

At the time of the writing of this report, the Trusts Race Disparity Ratio data had not been provided by NHSE.

5.2.3. Indicator 1c: Clinical workforce: Medical & Dental

The Clinical Medical & Dental workforce includes all staff on a medical and dental terms and conditions and includes Foundation and Resident Doctors and Consultants. Key observations:

- The total number of Ethnic Minority Clinical Medical & Dental staff has increased from 465 (49.3%) to 501 (50.5%) and the total number of White staff has increased from 414 to 442 (Table 7).
- The main increase of Ethnic Minority staff was for Trainee Grades (166 to 188), and Consultants (194 to 210).
- Compared to the local population, the medical workforce is significantly overrepresented by Ethnic Minority individuals. This is a reflection of national trends on the medical workforce, as well as overseas recruitment into the NHS.

The WRES data does not calculate a race disparity ratio for medical and dental roles and is therefore not reported.

Table 5: Staff Headcount Clinical Medical & Dental Workforce

MWL	MWL 2024		MWL 2025		National 2024
	%White	%EthMin	%White	%EthMin	%EthMin
Consultants	52.8%	42.4%	52.70%	43.57%	41.0%
Consultants also Senior medical manager	100.0%	0.0%	100.00%	0.00%	44.6%
Non-consultant	22.8%	69.1%	24.50%	67.55%	64.3%
Trainees	39.4%	51.9%	40.46%	54.34%	51.0%
Other	70.6%	11.8%	78.57%	7.14%	27.3%
Total	43.9%	49.3%	44.51%	50.45%	48.7%

Medical data does not include Lead Employer doctors in training, including those who are on placement within the Trust.

5.3. Indicator 2: Relative likelihood of Ethnic Minority and white staff being appointed from shortlisting across all posts.

Indicator 2 is an assessment of the Trusts recruitment and selection practices, and whether Ethnic Minority applicants are as likely as White applicants to be successfully shortlisted and appointed.

This indicator is assessed at “whole organisation” level and does not disaggregate the recruitment trends by job group or department where Ethnic Minority individuals may be more or less likely to form part of the talent pool e.g., Ethnic Minority people are overrepresented in the medical and dental profession.

Table 6: Percentage of candidates appointed from shortlisting

MWL	White	EthMin	Unknown
2023-2024	36.33%	20.35%	75.29%
2024-2025	36.95%	22.97%	52.19%

Table 7: Relative likelihood of appointment from shortlisting

MWL	White	EthMin	Unknown
2023-2024	0.36	0.20	0.75
2024-2025	0.37	0.23	0.52

Table 8: Relative likelihood of White candidates being appointed from shortlisting compared to a Ethnic Minority candidates

MWL	Ratio	National	North West
2023-2024	1.79	1.62	2.01
2024-2025	1.61	-	-

A value <1 means that Ethnic Minority applicants are more likely to be appointed, and value >1 means they are less likely to be appointed. For example, a value of "2.0" would indicate that White candidates were twice as likely as Ethnic Minority candidates to be appointed from shortlisting, whilst a value of "0.5" would indicate that White candidates were half as likely as Ethnic Minority candidates to be appointed from shortlisting.

Key observations:

- White applicants who are shortlisted are more likely to be offered a post compared to Ethnic Minority applicants (Table 8, 9)
- The relative likelihood of White applicant being appointed compared to Ethnic Minority applicants stands at 1.6 times more likely (Table 10), although this is an improvement on the previous year.

5.4. Indicator 3: Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation

Indicator 3 is an assessment of whether Ethnic Minority staff are more likely to face formal disciplinaries compared to White staff. There are relatively few formal disciplinaries each year, with 71 in 2021/2022, and 130 in 2022/2023 (Table 11).

Table 9: Likelihood of staff entering the formal disciplinary process

YES	White	EthMin	Unknown
2023-2024	1.81%	0.98%	0.76%
2024-2025	0.98%	0.50%	0.00%

In 2023/2024 the relative likelihood measure for this indicator was 0.84 (Table 12), meaning that White staff were more likely than Ethnic Minority staff to enter formal disciplinary processes. This was a slight increase compared to the previous year.

A value <1 means that Ethnic Minority staff are less likely to enter formal disciplinary processes, and value >1 means they are more likely to enter formal disciplinary processes. For example, a value of "2.0" would indicate that Ethnic Minority staff were twice as likely as White staff to enter a formal disciplinary process, whilst a value of "0.5" would indicate that Ethnic Minority staff were half as likely as White staff to enter a formal disciplinary process.

Table 10: Relative likelihood of Ethnic Minority staff entering the formal disciplinary process compared to White staff

	MWL	National	North West
2023-2024	0.54	1.09	0.90
2024-2025	0.84	-	-

Table 11: Proportion of staff entering a Disciplinary process, %Ethnic Minority

	MWL	Peer Median	Provider Median
2023-2024	9.0%	tbc	tbc
2024-2025	14.5%	-	-

Overall Ethnic Minority staff are less likely that White staff to enter a formal disciplinary process (Table 12, 13)

5.5. Indicator 4: Relative likelihood of staff accessing non-mandatory training and CPD

Indicator 4 is an assessment of whether Ethnic Minority staff have the same access to non-mandatory training and development as White staff.

Non-mandatory training refers to any learning, education, training, or staff development activity undertaken by an employee, the completion of which is neither a statutory requirement or mandated by the organisation. All training and development recorded on ESR that is not classed as mandatory training has been included in this data.

The relative likelihood measure for this indicator was 0.89 (Table 14), meaning that Ethnic Minority staff were more likely than White staff to access non-mandatory training and CPD in the reporting period.

Table 12: Relative likelihood of White staff accessing non-mandatory training and CPD compared to Ethnic Minority staff.

	MWL	National	North West
2023-2024	0.80	1.06	0.99
2024-2025	0.89	tbc	tbc

6. Staff Survey Questions

The 2024 NHS Staff Survey was conducted between October and December 2024 and completed by 3944 staff (36.8% response rate).

For the purposes of this report, the 2023 and 2024 staff survey results have been sourced from the Trusts staff survey reports, with benchmarking data being sourced from the National Staff Survey Dashboard.

6.1. Indicator 5: Percentage of staff experiencing harassment, bullying or abuse from patients, relatives, or the public in the last 12 months (Staff Survey)

Table 13: Harassment by patients

		2022	2023	2024	Change
MWL	EthMin	30.2%	25.9%	25.6%	-0.3
	White	26.4%	21.4%	19.4%	-2.0
	All	26.9%	23.7%	21.5%	-2.2
National	EthMin	30.4%	27.8%	28.6%	+0.9
	White	26.8%	24.1%	23.5%	-0.6
	All	27.9%	25.3%	25.1%	-0.2
North West	EthMin	27.2%	25.2%	26.9%	+1.7
	White	24.6%	21.8%	21.5%	-0.3
	All	24.9%	22.3%	22.5%	+0.2
C&M ICB	EthMin	29.6%	26.8%	26.0%	-0.8
	White	24.4%	20.4%	19.4%	-1.0
	All	24.9%	21.2%	20.3%	-1.9
Acute & Community	EthMin	30.4%	27.6%	28.4%	+0.8
	White	26.7%	23.8%	23.2%	-0.6
	All	28.0%	25.2%	25.0%	-0.2

Overall, there was a decrease in the proportion of staff reporting that they had experienced bullying and harassment from a patient, visitor, family member or member of the public (Table 15); although a higher proportion of Ethnic Minority staff (who are more likely to work in a patient facing role than white staff) report this. Specifically, there was a:

- 2.2 point decrease in the proportion of staff reporting experiencing bullying and harassment from a patient et al,
- 2.0 point decrease in the proportion of White staff reporting experiencing bullying and harassment from a patient et al,
- 0.3 point decrease in the proportion of Ethnic Minority staff reporting experiencing bullying and harassment from a patient et al,
- MWL has a lower proportion of staff, white staff, and ethnic minority staff reported experiencing harassment compared to the National Average, North West, and Acute & Community Trusts.

6.2. Indicator 6: Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months (Staff Survey)

Table 14: Harassment from Staff (Managers and Colleagues)

Yes		2022	2023	2024	Change
MWL	EthMin		17.6%	20.0%	+2.4
	White		17.6%	17.9%	+0.2
National	EthMin	27.7%	24.9%	tbc	
	White	22.0%	20.7%	tbc	

Overall, the proportion of staff reporting that they have experienced bullying and harassment from another member of staff (manager or colleague) increased for both Ethnic Minority staff (2.4 point increase) and for White staff (0.2 point increase) (Table 16).

6.3. Indicator 7: Percentage of staff believing that the Trust provides equal opportunities for career progression or promotion (Staff Survey)

This staff survey question asks; *"Does your organisation act fairly with regard to career progression / promotion, regardless of ethnic background, gender, religion, sexual orientation, disability or age?"* with the options to answer; Yes, No or Don't Know.

Table 15: Equal Opportunities in Career Progression

YES		2022	2023	2024	Change
MWL	EthMin	46.5%	52.2%	49.5%	-2.7
	White	61.3%	61.4%	59.4%	-2.0
	All	59.5%	59.9%	58.1%	-1.8
National	EthMin	46.4%	48.9%	49.5%	-0.4
	White	59.1%	59.4%	58.9%	-0.5
	All	56.0%	56.4%	55.9%	-0.5
North West	EthMin	45.5%	47.4%	49.4%	+2.0
	White	58.9%	59.0%	59.0%	0.0
	All	56.9%	56.9%	57.0%	+0.1
C&M ICB	EthMin	44.9%	46.2%	48.9%	+3.7
	White	59.2%	59.1%	59.4%	+0.3
	All	57.6%	57.3%	57.8%	+0.5
Acute & Community	EthMin	46.1%	48.6%	49.2%	+0.6
	White	58.7%	59.0%	58.6%	-0.4
	All	55.4%	55.8%	55.4%	-0.4

Overall, the proportion of staff reporting that they believed the Trust provides equality of opportunity in career progression decreased, with a lower proportion of Ethnic Minority staff likely to say so (Table 17). Specifically:

- 1.8 point decrease in the proportion of staff reporting Yes,
- 2.0 point increase in the proportion of White staff reporting Yes,
- 2.7 point increase in the proportion of Ethnic Minority staff reporting Yes,
- 0.7 point increase in the difference between the response rate of White v Ethnic Minority Staff (9.2 to 9.9 gap).

6.4. Indicator 8: Staff who have personally experienced discrimination at work from a manager, team leader or other colleagues in the last 12 months (Staff Survey)

Table 16: Discrimination from Manager or Colleague

YES		2022	2023	2024	Change
MWL	EthMin	18.0%	12.0%	14.3%	+2.3
	White	4.5%	4.4%	5.4%	+1.0
	All	5.9%	5.7%	6.7%	+1.0
National	EthMin	16.6%	15.5%	15.2%	-0.3
	White	6.7%	6.7%	6.8%	+0.1
	All	9.0%	9.1%	9.2%	+0.1
North West	EthMin	17.4%	16.2%	16.2%	0.0
	White	6.4	6.1%	6.2%	+0.1
	All	8.0%	7.8%	8.1%	+0.3
C&M ICB	EthMin	18.4%	16.9%	15.5%	-1.4
	White	5.6%	5.5%	5.6%	+0.1
	All	6.9%	6.9%	7.0%	+0.1
Acute & Community	EthMin	17.2%	16.0%	15.7%	-0.3
	White	6.8%	6.8%	6.8%	0.0
	All	9.4%	9.5%	9.6%	+0.1

Overall, the proportion of staff reporting that that had experience discrimination from a manager or colleague increased for Ethnic Minority and White staff, although Ethnic Minority staff are 3 times more likely to report experiencing discrimination (Table 18). The Trusts response rates were lower than the National, North West and Acute & Community averages. Specifically:

- 1 point increase in the proportion of staff reporting Yes
- 1 point increase in the proportion of White staff reporting Yes
- 2.3 point increase in the proportion of Ethnic Minority staff reporting Yes
- 1.3 point increase in the difference between White v Ethnic Minority staff, 2023 (7.6 points) to 2024 (8.9 points)

6.5. Indicator 9: Percentage difference between the organisation's Board voting membership and its overall workforce

Overall, 5.6% of Board Members or 12.5% of Non-Executive Board Members are from an Ethnic Minority (Table 21), representative a slight increase from 2024 of 4.2% and 5.3% respectively. In 2024 (most current benchmark data), nationally 16.5% of Board Members of NHS Trusts were from an ethnic minority background, including 11.8% of Executive Board Members.

Table 17: Board Membership 2023-2024

	EthMin	White	Unknown
Total Board	4.2%	79.2%	16.7%
Of which Voting Board Members	0.0%	100%	0.0%
Non-Voting Board Members	5.3%	73.7%	21.1%
Of which Executive Board Members	0.0%	100%	0.0%
Non-Executive Board Members	5.3%	73.7%	21.1%
Difference Total Board v Workforce	-11	-2	+13
Difference Voting Members v Workforce	-15	+19	-4
Difference Execuitve Members v Workforce	-15	+19	-4

Table 18: Board Membership 2024-2025

	EthMin	White	Unknown
Total Board	5.6%	94.4%	0.0%
Of which Voting Board Members	0.0%	100%	0.0%
Non-Voting Board Members	14.3%	85.7%	0.0%
Of which Executive Board Members	0.0%	100%	0.0%
Non-Executive Board Members	12.5%	87.5%	0.0%
Difference Total Board v Workforce	-10.8	+13.7	-3.0
Difference Voting Members v Workforce	-16.3	+19.3	-3.0
Difference Execuitve Members v Workforce	-16.3	+19.3	-3.0

7. Conclusion

Overall, the Trust continues to improve of key race equality metrics, including the proportion of Ethnic Minority staff within the workforce, and at key unrepresented bands, as well as some improvements in most staff survey results. However key issues remain with the higher proportions of Ethnic Minority staff reporting more negative experiences than White staff in the staff survey.

Overall, the WRES indicators show the following:

<u>Workforce data metrics:</u>

- An increase in the proportion of total Ethnic Minority staff to 16.3%; Non-Clinical staff to 4.3%; Clinical Non-Medical staff to 16.7%; and Clinical Medical & Dental staff to 50.5%
- There was an increase in the proportion of Ethnic Minority Non-Clinical staff on Bands 2-7 and 8b. There were no declared Ethnic Minority staff on Bands 8c,d, 9 or VSM.
- There was an increase in the proportion of Clinical Non-Medical Ethnic Minority staff on Bands 2, 3, 6-8c. There were no declared Ethnic Minority staff on Bands 8d, 9 or VSM.
- There was an increase in the proportion Clinical Medical & Dental staff on Trainee roles and Consultants,
- Ethnic Minority applicants as a population are less likely to be appointed from shortlisting compared to White applicants.
- Ethnic Minority staff are less likely to enter disciplinary process than White staff.
- Ethnic Minority staff are more likely than White staff to access non-mandatory training or CPD
- 4.2% of the Trust Board is from an Ethnic Minority, lower than the workforce, but comparable with the local population, and the Non-Clinical workforce.

<u>Staff survey data:</u>

- 25.6% Ethnic Minority staff state they have experienced bullying and harassment from a patient, family member or member of the public (28.6% nationally), compared to 19.4% of White staff, a difference of 6.2 points.
- 20.0% Ethnic Minority staff state they have experienced bullying and harassment from a colleague or manager, compared to 17.9% of White staff, a difference of 2.1 points.
  49.5% Ethnic Minority staff state they believe the Trust offers equality of opportunity in career progression (49.5% nationally), compared to 59.4% of White staff, a difference of 9.9 points
- 14.3% Ethnic Minority staff state they has experience discrimination from a manager or other colleague (15.2% nationally), compared to 5.4% of White staff, a difference of 8.9 points

8. Action Plan

The Trust has developed a new People Strategy within which Equality, Diversity and Inclusion are embedded. The key **Race related objectives** set out in the People Strategy delivery plan include:

Table 19: Action Plan

People Plan: Theme	Commitment	Measure	2025-26 Delivery Plan Actions
Looking after our people: We will develop a culture than empowers individuals to lead healthy lives and thrive in work by providing holistic wellbeing support	• Continue to embed health & wellbeing support and initiatives than champion a safe and healthy environment for all • Continue to harness a culture of kindness, openness and inclusivity where everyone is treated with civility and respect • Continue to develop compassionate and inclusive leaders than champion a culture of learning and improvement • Empower staff to work flexible, allowing them to balance both professional and personal commitments	• Improve staff sickness levels year on year • Undertake the Health & Wellbeing Diagnostic tool and implement improvement actions • Improvement in staff survey results for 'health and wellbeing', and 'we are compassionate and inclusive'	• Improve our understanding of our workforce relating to health inequalities and indices of multiple deprivation and ensure targeted and relevant advice, guidance and support is available to them. • Delivery of Sickness Improvement plan • Review our approach to awareness, education and intervention relating to physical health to ensure it is fit for purpose i.e. MSK, moving and handling, work related physical health instances. • Continue to develop and implement an MWL Trauma Support Pathway with key stakeholders. To support staff and managers with a clear process and procedure of practice and to support with a psychological safe environment

People Plan: Theme	Commitment	Measure	2025-26 Delivery Plan Actions
			• Launch a time to flex campaign to communicate the range of flexibility available to colleagues across the organisation.
Belonging in the NHS: We will develop an inclusive culture where everyone's voice is represented and celebrated	• Celebrate diversity and promote an environment of openness and inclusion • Tackle all forms of discrimination, harassment and bullying • Ensure that every person has a voice that counts by acting on feedback and involving staff in decision making • Champion and environment that enables all staff to "speak up", raise concerns, makes changes and shape learning • Improve the experience of those people with a protected characteristic	• Trust will be in top 25% for People Promise "we are compassionate and inclusive" • Continue to increase the % staff sharing their disability status with the Trust • Implement all 6 high impact areas under the NHS EDI Improvement Plan • Reduce number of colleagues experiencing harassment, bullying or abuse at work	• Achieve Bronze level anti-racism status • Implement a 'Culture and Engagement events plan' which includes events for EDI Week, Race Equality Week, Black History Month, Wear red Day, and Speak Up Month. • All staff in 2025 Appraisal to be asked to identity a personal EDI Training/Development objective • Provision of a suite of learning and development options in relation to EDI and wider inclusion that includes courses, reading, listening, watching and volunteering. • Implement active bystander training for colleagues across the Trust. • Refine MWL approach for Staff Networks in partnership with Trust Senior Leadership Group
Growing for the future: We will embrace new ways of working and	• Grow our relationships with local communities, schools and	• 70% of staff recommend the Trust as a place to work	• Implement the Band 5 BAME Career Development programme following the pilot.

People Plan: Theme	Commitment	Measure	2025-26 Delivery Plan Actions
create opportunities to enable our people to achieve their potential	colleges to develop health workers of the future • Continue to develop and improve our recruitment practices and processes • Develop and embed training and development pathways across all levels and professions	• Review and Improve exit interview processes • Continue to achieve compliance in appraisals across all staff groups	• Define our engagement area and map the High Schools and colleges then identify our key links • Develop and launch defined work experience programme across MWL.