

Workforce Race Equality Standard (WRES) 2025 Data Analysis

Key Findings:

29.2% of our workforce are from Black, Asian or Minority Ethnic backgrounds, an increase of nearly 12% over the past 5 years

26.9% of global majority colleagues have experienced abuse from patients and the public in the last 12 months compared to 23.4% of white colleagues

7% improvement in global majority colleague belief the trust offers fair opportunities for career progression / promotion. This is 11% less than white colleague belief

White applicants are 1.6 times more likely to be appointed from shortlisting compared to global majority applicants

5% improvement in global majority colleagues reporting bullying and abuse from other colleagues in the last 12 months

No difference in the likelihood of global majority employees entering the formal disciplinary process compared to white colleagues

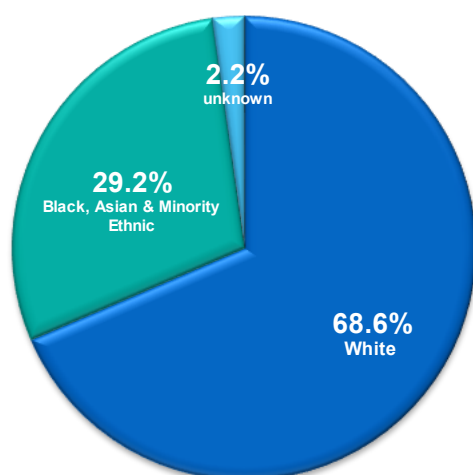
Global majority colleagues more likely to feel discriminated against by a colleague /manager/team leader at 18.9% compared to 8.2% of white staff

Global majority colleagues are unequally distributed across professional groups: 10.8% are in non-clinical roles, 27.7% in clinical roles and 67.3% in Medical and Dental roles

There is a gap of -19% between the representation of Black, Asian & Minority Ethnic board members and the composition of the overall workforce

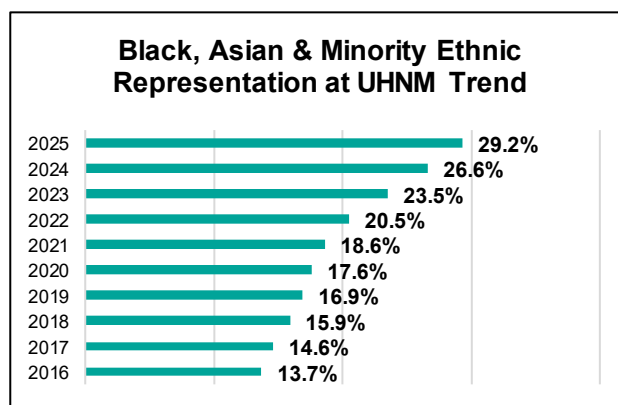
WRES Indicator 1

Percentage representation by ethnicity

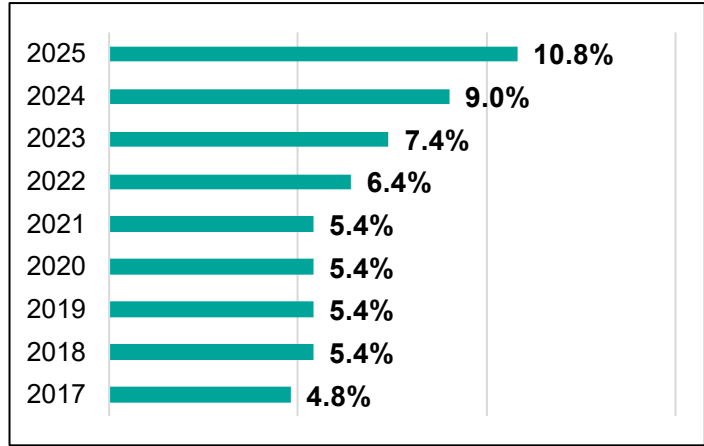


At 31st March 2025, Black, Asian and Minority Ethnic colleagues represented 29.2% of our overall workforce (3,859 people).

Across the NHS 28.6% of the workforce are from global majority, across the Midlands it is 28.2% (as at March 2024).



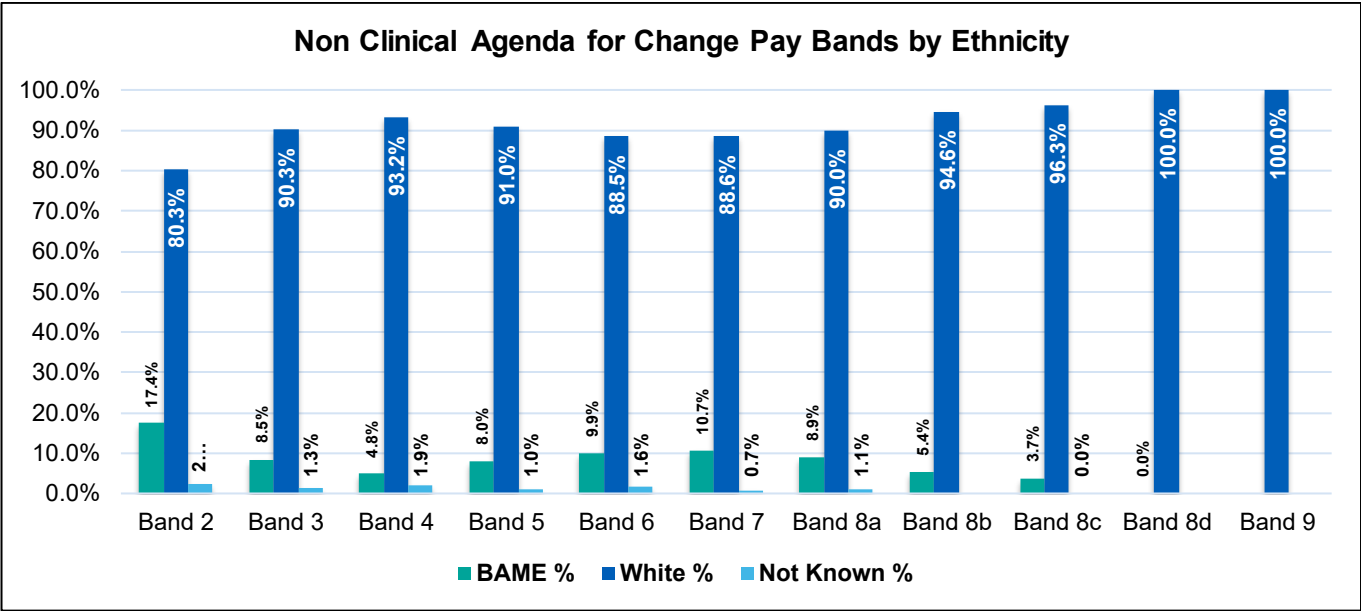
Percentage representation of Black, Asian and Minority Ethnic colleagues in Agenda for Change non-clinical pay bands:



Global majority representation in non-clinical roles has seen increases since 2021 and is now in line with local community representation within Staffordshire and Stoke on Trent.

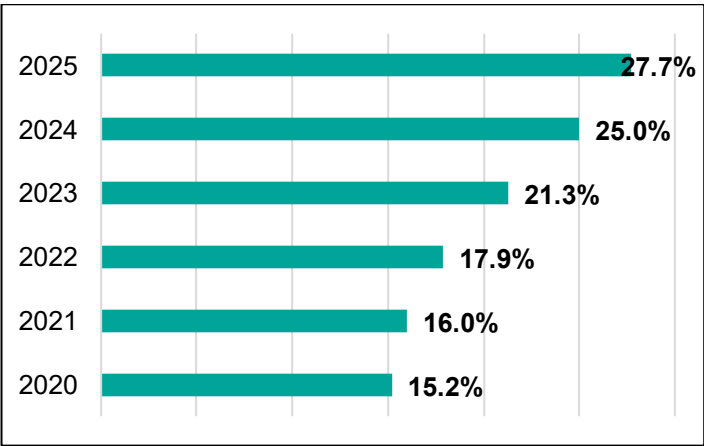
The greatest representation is at Band 2.

In the NHS, 18.8% of non-clinical workforce is from Black, Asian and minority ethnic backgrounds.



The percentage representation of global majority colleagues in senior non-clinical roles 8c and above, remains an area requiring improvement.

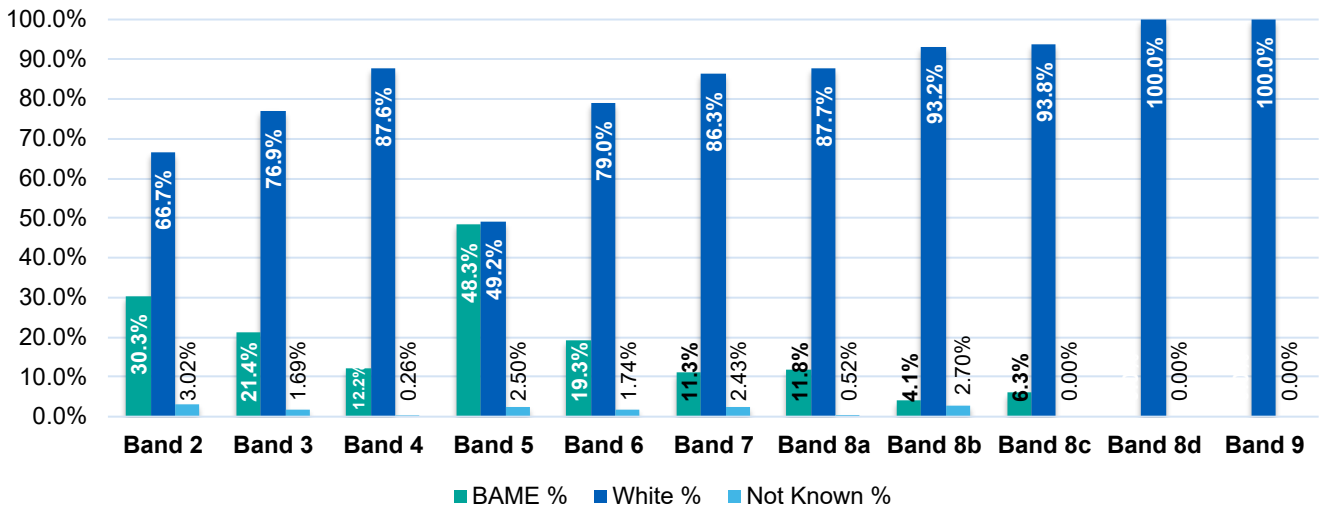
Percentage representation by ethnicity in Agenda for Change clinical pay bands:



Global majority representation has improved year on year in clinical pay bands, with a 12.5% increase over 5 years. International recruitment has influenced representation, particularly at Band 5.

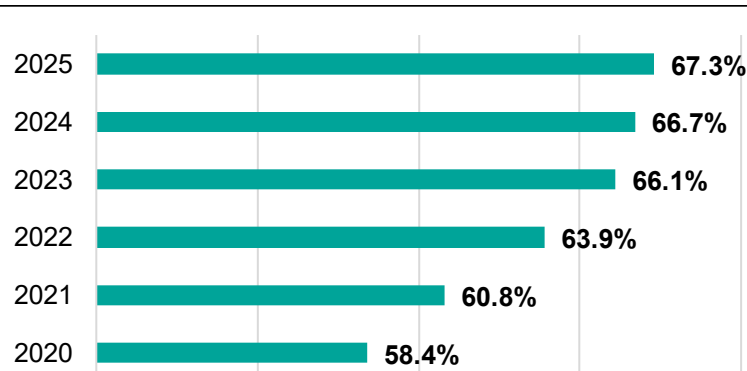
Representation above AfC Band 5 falls significantly, but there has been positive improvement in Bands 6, 7 and 8a over the past 12 months, which is also evidenced in the improved race disparity ratio for middle to upper and lower to upper representation.

Clinical Agenda for Change Pay Bands by Ethnicity



Nationally, representation is also highest at Agenda for Change Band 5 (45.7%), and above Band 5 falls dramatically to 25.2% at Band 6 and 18.8% at Band 7.

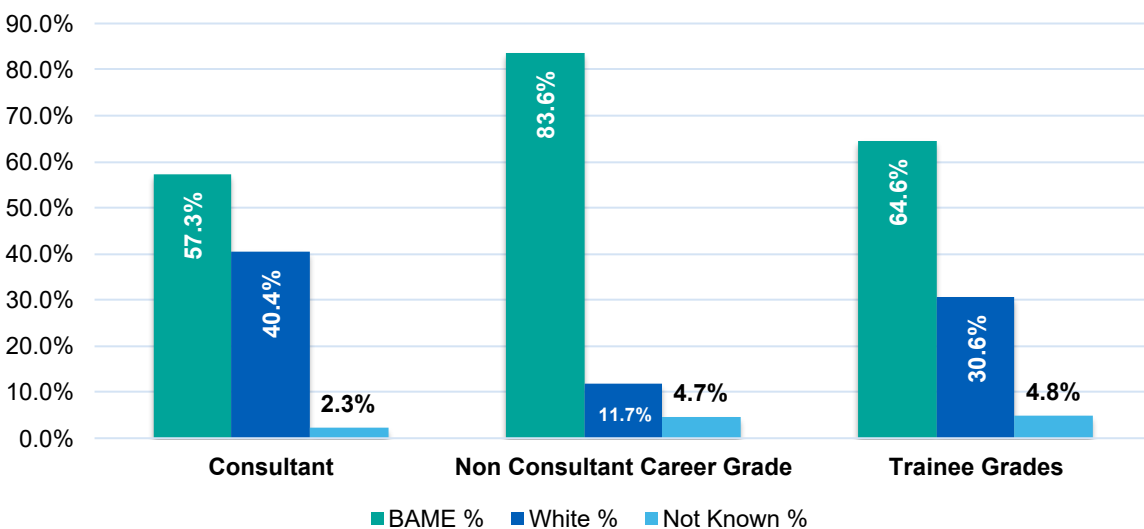
Percentage representation by Ethnicity in Medical & Dental Grades:



Representation of global majority colleagues continues to rise each year. Nationally, in March 2024 48.7% of NHS doctors/dentists were from Black, Asian and Minority Ethnic backgrounds.

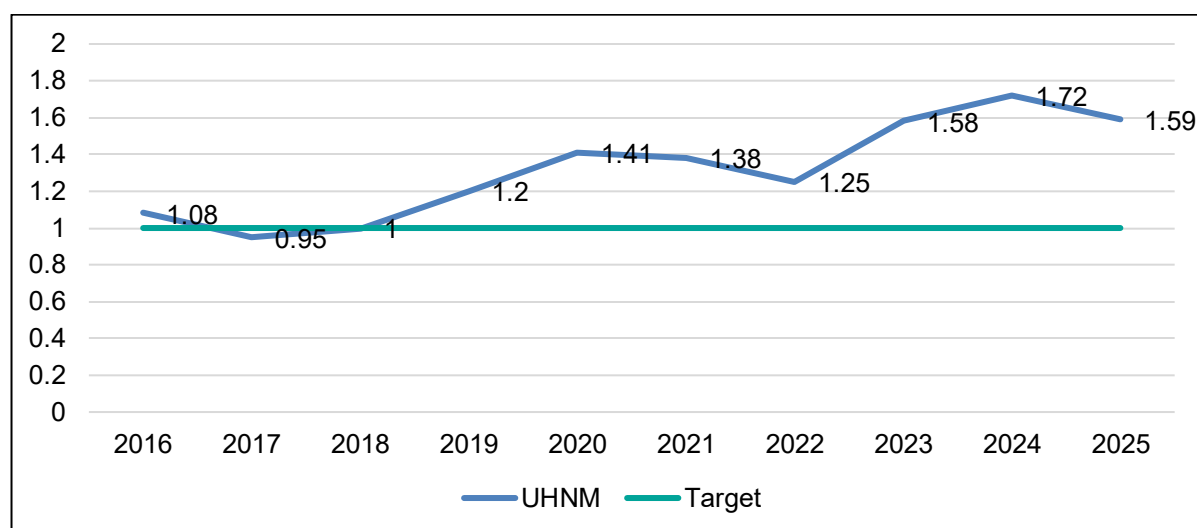
UHNH reflects the national situation, with the highest representation of global majority colleagues being in non-consultant specialist roles.

Medical & Dental Grades by Ethnicity



WRES Indicator 2

Relative likelihood of white applicants being appointed from shortlisting across all posts compared to Black, Asian & Minority Ethnic applicants



White applicants are almost 1.6 times more likely to be appointed from shortlisting compared to global majority applicants. The National WRES Data Analysis Report (2024) showed that at 80% of NHS trusts, white applicants were significantly more likely to be appointed from shortlisting, and this is a worsening position. The national likelihood metric in 2024 was 1.63 and the midlands likelihood metric 1.71.

Race Disparity Ratio

The race disparity ratio is a metric that compares the proportion of global majority employees at different pay levels (lower, middle and upper bands) to that of white employees. A ratio greater than 1.0 indicates inequality, suggesting that white colleagues have a higher likelihood of progression than ethnically diverse staff, while a ratio of 1.0 indicates parity. There has been improvement compared to last year in the middle to upper and lower to upper RDR, but there is a significantly better progression rates for white colleagues into senior roles.

Agenda for Change Bands	2025	2024
Disparity ratio - lower to middle	2.03	1.98
Disparity ratio - middle to upper	2.00	2.37
Disparity ratio - lower to upper	4.06	4.68

The chart below demonstrates ethnicity representation in Agenda for Change roles at UHNM and the shifting ethnicity representation over the years.

AfC Bandings	White %				Black, Asian & Minority Ethnic %				Unknown %			
	2025	2024	2023	2022	2025	2024	2023	2022	2025	2024	2023	2022
<1 to 4	79.4%	81.4%	84.1%	86.0%	18.7%	15.9%	13.2%	11.2%	1.9%	2.7%	2.7%	2.8%
5 to 7	67.8%	70.0%	73.7%	77.3%	30.1%	27.4%	23.7%	20.0%	2.1%	2.6%	2.6%	2.7%
8a and 8b	89.4%	91.7%	91.9%	92.2%	9.8%	7.0%	6.6%	6.2%	0.8%	1.3%	1.5%	1.6%
8c to VSM	96.8%	94.0%	93.8%	96.3%	3.2%	4.8%	3.8%	2.5%	0.0%	1.2%	2.5%	1.3%

Whilst global majority representation has increased, particularly in pay bands <1 to 7, there has been no improvement in senior pay bands 8C and above. Progress against our Model Employer Aspirational Targets for Black, Asian and Minority Ethnic representation in senior leadership roles reflects this, with a continued positive trajectory at Band 8a, but below the aspirational target allocated by NHS England for higher pay bands:

AfC Band	UHNM Headcount 2025	Model Employer Target 2025
8a	53	42
8b	6	11
8c	2	4
8d	0	2
9	0	1
VSM	1	1

Ethnicity Pay Gap

Ethnicity pay gap reporting was introduced as part of the EDI Improvement Plan, and our data shows that at 31st March 2025 there is a positive pay gap in favour of global majority employees:

Ethnicity Pay Gap – White : Black, Asian & Minority Ethnic:

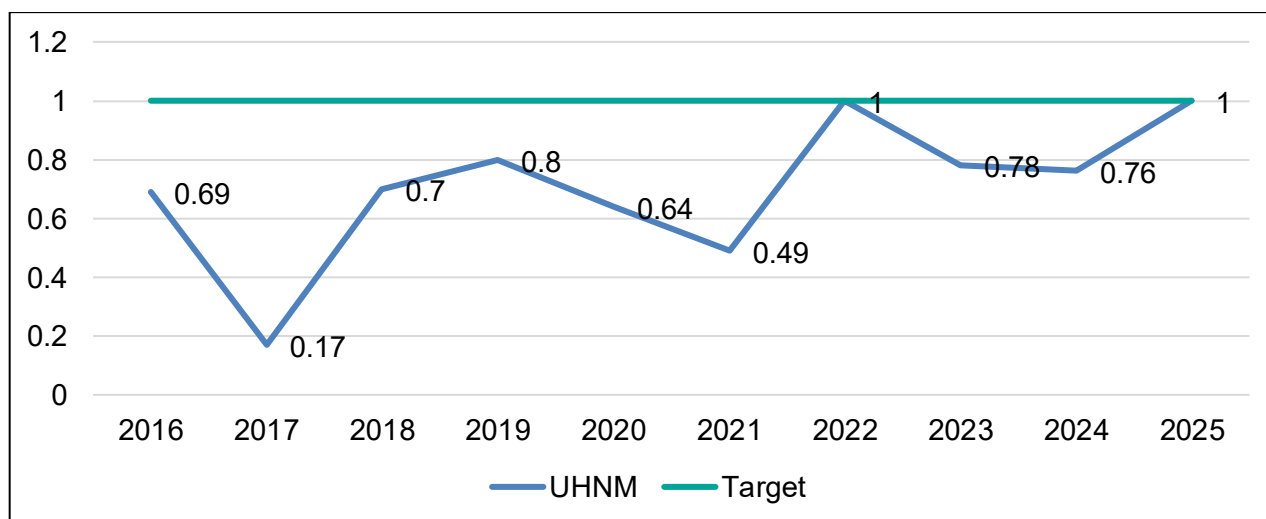
	2025	2024	2023
Mean pay gap	-22.9%	-25.3%	-29.0%
Median pay gap	-14.3%	-18.4%	-20.4%

This is because there is a greater proportion of global majority employees employed in the middle and upper pay quartiles, particularly Asian colleagues:

Quartile	Headcount							% Global Majority representation
	Asian	Black	Mixed	Not Stated	Other	White British	White Other	
1	371	101	47	53	24	2,628	116	16.3%
2	666	211	58	77	36	2,182	123	29.0%
3	831	213	57	118	69	1,922	166	33.2%
4	878	197	68	145	92	1,837	186	36.2%

WRES Indicator 3

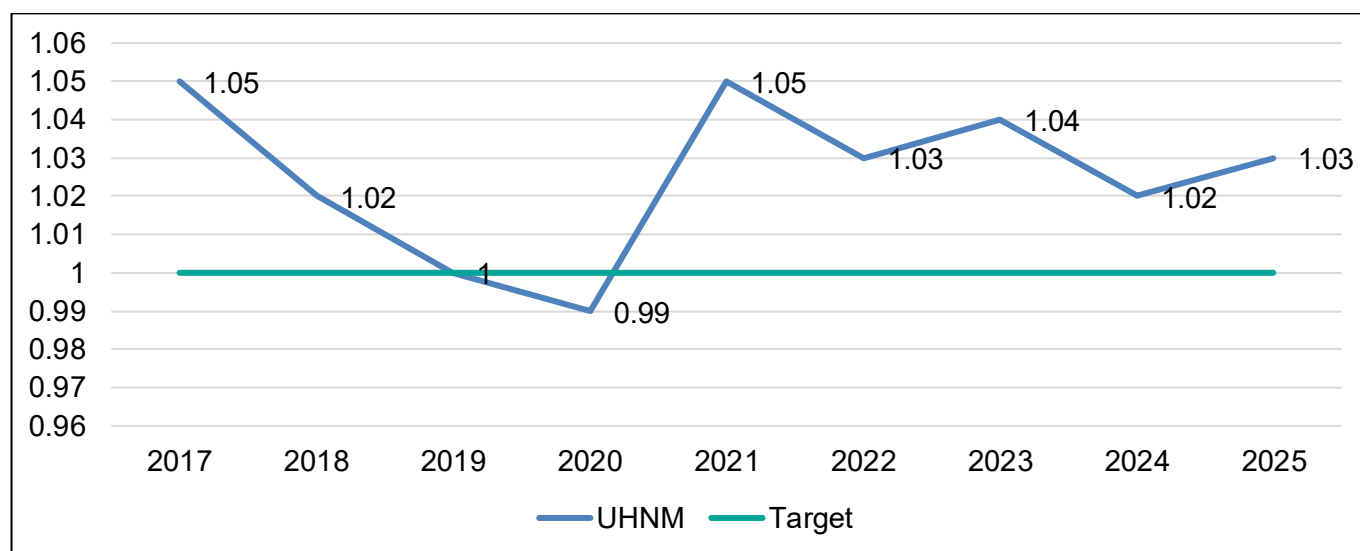
Relative likelihood of Black, Asian & Minority Ethnic staff entering the formal disciplinary process compared to white staff:



Global majority colleagues do not have an increased likelihood of entering formal disciplinary processes at UHNM. Nationally, the 2024 WRES Data Report showed that in 51% of NHS trusts, Black, Asian and Minority Ethnic staff were over 1.25 times more likely than white staff to enter the formal disciplinary process. The Midlands figure was 1.17.

WRES Indicator 4

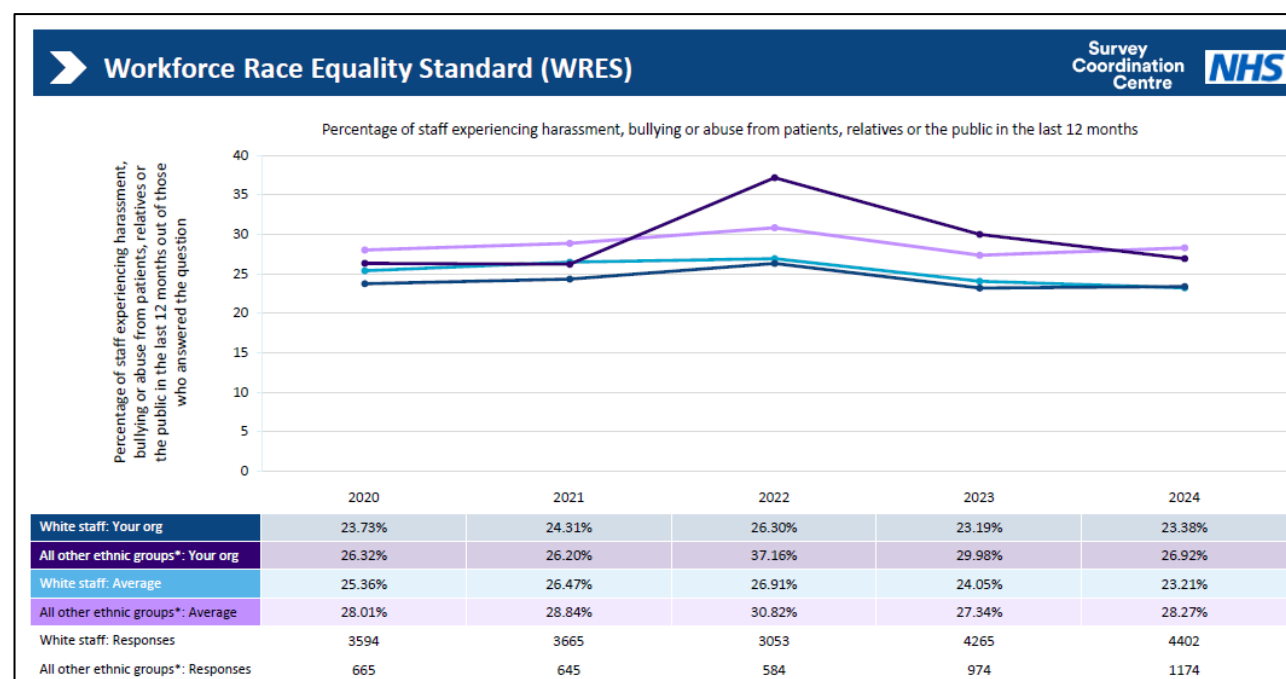
Relative likelihood of white staff compared to Black, Asian and Minority Ethnic staff accessing non-mandatory training and CPD



The acceptable range for this indicator is between 0.80 and 1.25. Our data has consistently been within this.

WRES Indicator 5

Percentage of staff experiencing harassment, bullying or abuse from patients / service users, their relatives, or the public in the last 12 months (national staff survey q14a):

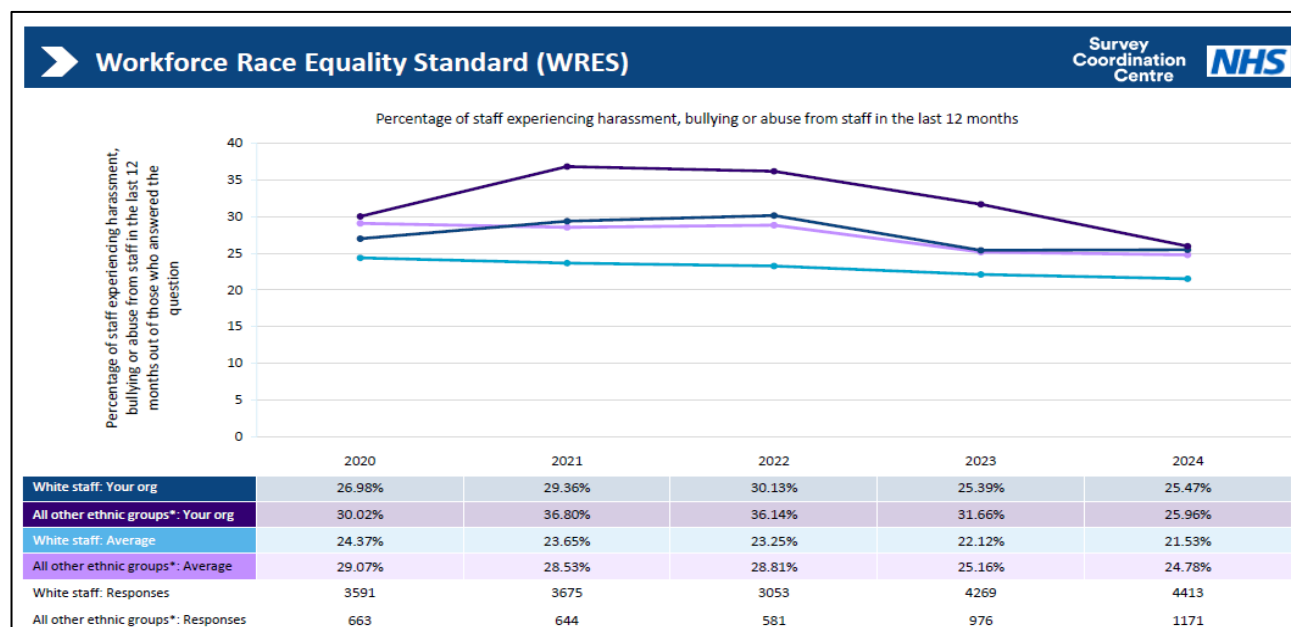


This indicator has improved by 3.06% for global majority colleagues and is better than the peer average, but it has slightly risen for white colleagues. During the year we launched a new anti-abuse public campaign “we’re people too” to tackle racist and discriminatory abuse from patients and visitors.

The most recent national data from the 2024 WRES Report showed that in 82% of trusts, a higher proportion of global majority staff compared to white staff experienced harassment, bullying or abuse from patients, relatives or the public in the last 12 months.

WRES Indicator 6

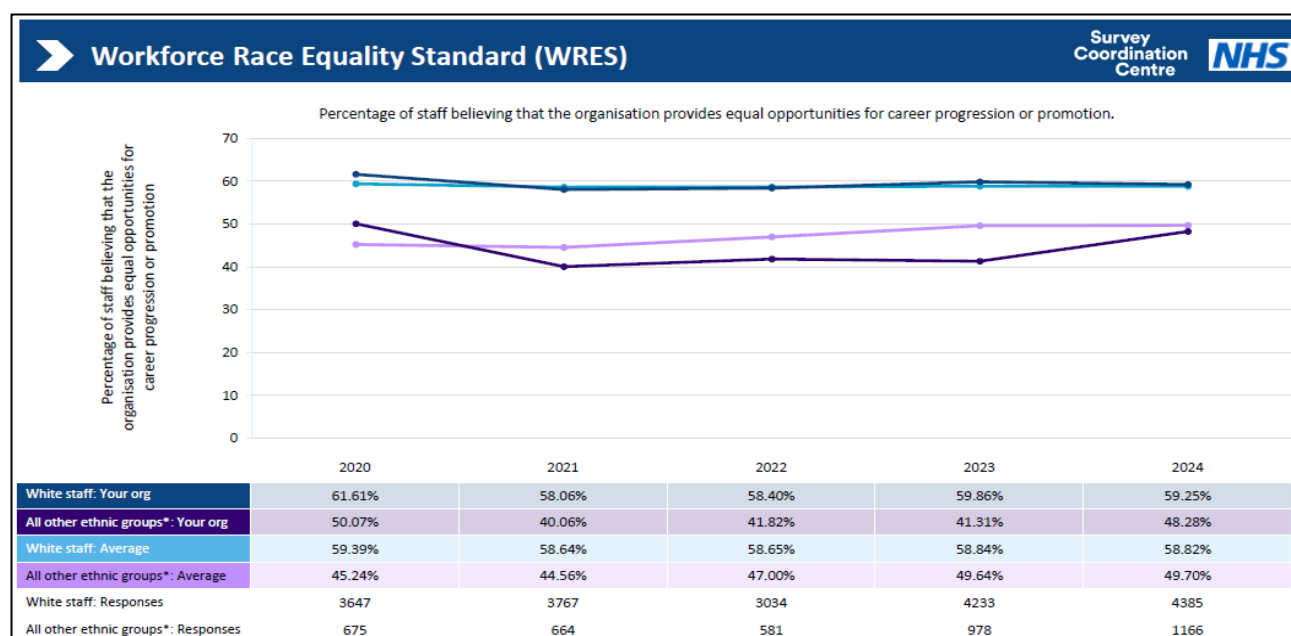
Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months (national staff survey q14c)



This indicator continues in a positive trajectory, and the latest figure of 25.96% is the best performance over the past five years and an improvement of 5.7%. It remains worse than the peer average for global majority staff but the gap has closed significantly. White colleague experience has slightly deteriorated, and is also worse than the peer average. Nationally, 89% of trusts reported a higher proportion of global majority employees compared to white employees experiencing harassment, bullying or abuse from other staff in last 12 months (WRES 2024 data report).

WRES Indicator 7

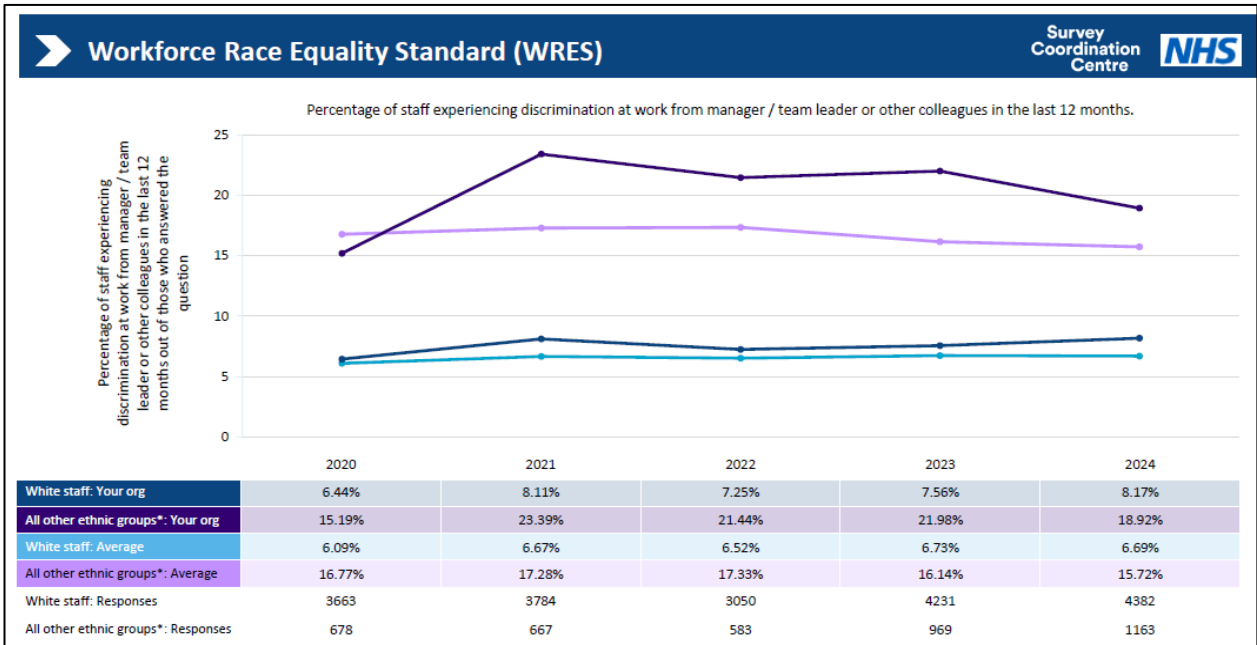
Percentage of staff believing that their trust provides equal opportunities for career progression or promotion (staff survey q15)



This indicator has improved by 6.97% for global majority colleagues and the gap has reduced significantly between global majority and white colleague experience (reducing from 18.6% in 2023 to 10% in the 2024 NSS). The gap in relation to the peer average has also significantly closed.

The most recent WRES Data report from 2024 showed that at 97.6% of NHS trusts, a lower percentage of global majority employees than white colleagues felt that their trust provides equal opportunities for career progression or promotion.

WRES Indicator 8
Percentage of staff experiencing discrimination at work from other staff in the last 12 months (staff survey q16b)



This indicator has improved by 3.06% for global majority colleagues and the gap has improved between global majority and white colleagues (reducing from 14.4% in 2023 to 10.75%). The gap in relation to the peer average has also significantly closed. In 99% of trusts in England, global majority colleagues report greater experience of discrimination than white staff.

WRES Indicator 9
Representation amongst board members by ethnicity compared to the workforce overall

This indicator measures the difference between the ethnicity composition of our Board membership compared to the overall organisation. Boards are expected to be broadly representative of their workforce. At UHNM, 11.8% of the board are from Black, Asian and Minority Ethnic backgrounds.

Board Representation	2025
Difference Total Board: Overall Organisation	-19%
Difference Voting Board Membership: overall organisation	-13%
Difference Executive Board Membership: overall organisation	-20%

Nationally, in March 2024, 16.5% of board members recorded their ethnicity as Black, Asian or Minority Ethnic, compared to 28.6% of staff in NHS trusts. In every region, there was a lower percentage of global majority board members compared to the overall percentage of global majority workforce.

Summary and Action Plan for 2025-26

This report highlights the progress we have made in advancing racial equality within our workforce, while also emphasising the areas where further work is still required. The reductions in the levels of harassment, bullying and abuse from the public and by other colleagues, coupled with the increasing confidence of global majority employees in their belief of fair opportunities for career progression, are positive improvements that should only get better with the focus brought by the implementation phase of the recommendations made by the UHNM Race Equality Task and Finish Group.

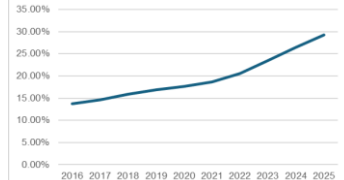
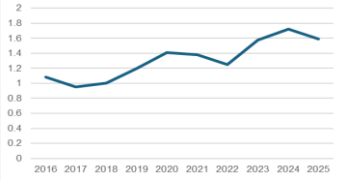
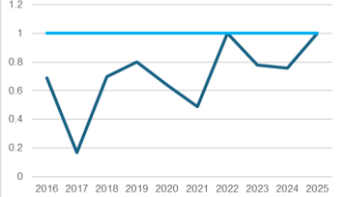
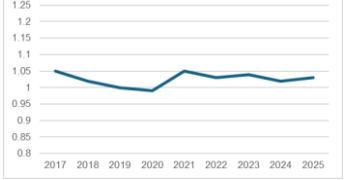
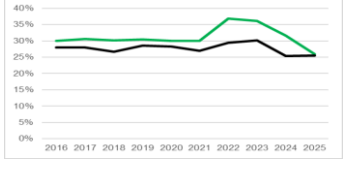
However, the findings continue to remind us that our journey towards becoming an anti-racist organisation and achieving racial equality remains some way off. Whilst there has been improvement in 6 indicators, 2 indicators within acceptable range and 1 indicator that has slightly deteriorated, our metrics, despite being on a positive trajectory remain worse than peer comparator averages in all but three.

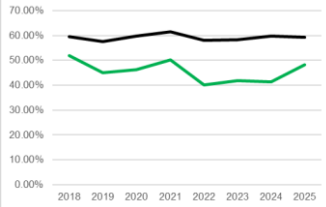
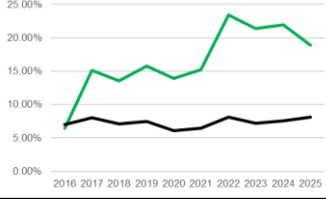
Our actions for 2025-26, which we will be working with our Ethnic Diversity Network to ensure they are effectively implemented, and in addition to implementing the recommendations of the Race Equality Task & Finish Group (summary of recommendations below) are:

	Culture of anti-racism	Inclusive leadership	Governance
Actions	• Hold an anti-racism conference during Black History Month 2025 to raise awareness and understanding of anti-racism and everyone's responsibilities to eliminate racism • Introduce refreshed values and behaviours framework with clear expectations about inclusive and non-discriminatory colleague behaviour • Enhance the remit of WRES Champions to include employee relations support with an anti-racism lens	• Introduce new masterclasses into our leadership brochure to include: - Managing inter-cultural teams - Intercultural communication - Active bystander training • Introduction of the NHS Leadership and Management Framework	• Launch of a new Equality, Diversity and Inclusion accountability framework, defining the expectations of Care Groups

Progress will be measured by improved metric results in the 2025 National Staff Survey, 2026 WRES submission, and the monitoring of other relevant metrics and the lived experiences of our Ethnic Diversity Staff Network membership.

Appendix 1: Summary of WRES Indicator Trends

WRES Indicator			2016	2017	2018	2019	2020	2021	2022	2023	2024	2025	
1	Percentage of Black, Asian & Minority Ethnic (BAME) colleagues within UHNH workforce		13.7%	14.6%	15.9%	16.9%	17.6%	18.6%	20.5%	23.5%	26.5%	29.2%	
2	Relative likelihood of white applicants being appointed from shortlisting compared to BAME applicants		1.08	0.95	1.0	1.20	1.41	1.38	1.25	1.58	1.72	1.59	
3	Relative likelihood of BAME staff entering formal disciplinary processes compared to white staff		0.69	0.17	0.70	0.80	0.64	0.49	1.0	0.78	0.76	1.0	
4	Relative likelihood of white staff accessing non - mandatory training/CPD compared to BAME staff		-	1.05	1.02	1.0	0.99	1.05	1.03	1.04	1.02	1.03	
5	% of staff experiencing harassment, bullying & abuse from patients, relatives and the public	BAME	35.5%	26.5%	26.7%	26.9%	29.15%	26.32%	26.20%	37.16%	29.98%	26.92%	
		White	24%	25%	25%	24.7%	27.25%	23.73%	24.31%	26.30%	23.19%	23.38%	
6	% of staff experiencing harassment, bullying & abuse from other staff	BAME	30%	30.6%	30.2%	30.5%	30.03%	30.02%	36.80%	36.14%	31.66%	25.96%	
		White	28%	28%	26.7%	28.5%	28.26%	26.98%	29.36%	30.13%	25.39%	25.47%	

7	% of staff believing the trust provides equal opportunity for career progression/promotion	BAME			51.8%	45.0%	46.30%	50.07%	40.06%	41.82%	41.31%	48.28%	
		White			59.4%	57.5%	59.8%	61.6%	58.1%	58.4%	59.86%	59.25%	
8	% of staff personally experiencing discrimination from a manager / team leader / colleague	BAME	6.5%	15.1%	13.6%	15.8%	13.97%	15.19%	23.39%	21.44%	21.98%	18.92%	
		White	7%	8%	7.1%	7.5%	6.08%	6.44%	8.11%	7.25%	7.56%	8.17%	
9	BAME Board representation compared to overall organisation		-13.7%	-14.6%	-15.9%	-16.9%	-17.6%	-18.6%	-15%	-12.4%	-10.7%	-19%	