



# Workforce Race Equality Standard (WRES) Data 2025

The NHS Workforce Race Equality Standard (WRES) was introduced in 2016 to address the inequalities experienced by our Global Majority staff.

The WRES requires NHS trusts to self-assess against nine indicators of workplace experience and opportunity for organisations to compare the workplace and career experiences of global majority and white staff. Four indicators relate specifically to workforce data, they are based on data from the national NHS staff survey questions, and one considers global majority representation on Boards.

As a Trust, we are using the term global majority rather than BME.







### **Workforce Race Equality Standard**

WRES focuses on enabling people to work comfortably with race equality. Through communications and engagement, we will work to change the deep-rooted cultures of race inequality in the system, learn more about the importance of equity, to build capacity and capability to work with race.

Continuous embedding of accountability to ensure key policies have race equality built into their core, so that eventually workforce race becomes everyday business.

The WRES will continue to work to evidence the outcomes of the work that is done, publishing data intelligence and supporting the system by sharing replicable good practice.

With over one million employees, the NHS is mandated to show progress against a number of indicators of workforce equality, including a specific indicator to address the low numbers of global majority board members across the organisation.

## **WRES Results**

Indicator 4 –Relative likelihood of white staff accessing non-mandatory training and CPD compared to global majority staff. A figure above 1:00 indicates that White staff are more likely than BME staff to access non-mandatory training and CPD.

**Indicator 6 -** The percentage of staff who experienced harassment, bullying or abuse from other staff in the last 12 months

**Indicator 7** - The percentage of staff who believed that their organisation provided equal opportunities for career progression or promotion

**Indicator 8** -The percentage of staff who personally experienced discrimination at work from a manager, team leader or other colleagues

**Indicator 9** – Overall Board Membership. At March 2025, the difference between global majority representation on the board and in the workforce was -1.0%.

	Reporting Year													
2019	2019 2020 2021 2022 2023 2024 2025													
0.4 0.26 0.14 0.24 0.22 0.87 1.67														

		Survey Year													
2019 2020 2021 2022 2023 2024															
White	24%	24%	23%	25%	20%	21.38%									
Global Marjority	37%	36%	43%	21%	30%	25.00%									

		5	Survey Yea	r								
2019 2020 2021 2022 2023 2024												
White	58%	62%	63%	57%	62%	60.00%						
Global Marjority	44%	38%	38%	54%	41%	52%						

	Survey Year												
2019 2020 2021 2022 2023 2024													
White	4%	4%	5%	7%	5%	4%							
Global Marjority	15%	22%	26%	17%	21%	19.00%							

	Reporting Year													
2019 2020 2021 2022 2023 2024 2025														
	-5%	-5.80%	-5.70%	3.20%	-0.40%	-2.00%	-1.00%							

# WRES

Ind	Details	2019	2020	2021	2022	2023	2024	2025	'		1	Trend C	hart		
ina	Detaits	2019	2020	2021	2022	2023	2024	2025	2019	2020	2021	2022	2023	2024	2025
1	W/F Ethnic Diverse Profile	5.51%	5.77%	5.72%	5.93%	7.08%	8.62%	10.30%	•	•	•	•			
2	Recruitment Measure (Relative Likelihood of white staff appointed compared to BME Staff)	0.01	0.02	0.02	1.85	3.49	1.63	1.88	•				<u> </u>		
3	Disciplinary measure (Relative Likelihood BME Staff entering disciplinary process)	0.00	0.00	0.00	2.13	0.00	0.00	0.00	-	•				•	•
4	Training Measure (Relative Likelihood BME Staff accessing non- mandatory training)	0.40	0.26	0.14	0.24	0.22	0.87	0.17	•						



## **Executive Summary**



The Trust continues to commit to being a more inclusive place to work, ensuring equal opportunities and celebrating our diversity. We support and encourage staff to share their experiences through a variety of feedback resources and in line with our Inclusion Strategy.

Through 2024 / 2025, we have achieved;

- Regularly reviewing of our Inclusion Strategy and Action Plan 2023-2026.
- Supporting the Ethnic Diverse Staff Network to thrive.
- Welcomed new members to the bi- monthly EDI meetings so that they are more inclusive for members to attend.
- Drafting and engaging key stakeholders on an Anti-racist Transformational Journey 2025 and Beyond.
- NHSE Midlands EDI Assurance toolkit- feedback.
- National Staff Survey RJAH results 2024.
- Received 47% response for our Staff Survey 2024.
- Continuing to review our progress and delivery against statutory requirements, such as the Public sector equality duty (PSED).
- Promoted the Visible Leaders Network https://midlands.leadershipacademy.nhs.uk/our- offers/visible-leaders-network/
- Celebrated Inclusion Week in September 2024.
- Celebration and staff stories through Black History Month.
- Links with other local NHS Trusts.
- Global Majority Listening event (18th September 2024)







- BAME Black, Asian and Minority Ethnic
- BME Black Minority Ethnic Global majority Term agreed to replace BME/BAME and reference to minority.
- EDI Equality Diversity and inclusion
- EDIG Equality Diversity and Inclusion Group
- FTSU Freedom to Speak Up (Guardian)
- HR Human Resources
- OD Organisational Development
- PCC People and Culture Committee
- WRES Workforce Race Equality Standards
- WDES Workforce Disability Equality Standards
- ICS Integrated Care System
- IEN Internationally Educated Nurse





#### Shropshire, Telford and Wrekin – 2025/26 Plan

#### Lead(s): Caroline Nokes-Lawrence, RJAH

Workstream	Planned Activities (2025/26)	Expected Outcomes			
Career Progression and Leadership	Reverse Mentoring Promotion of Developing Aspirant Ethnic Minority Nursing and Midwifery Leadership Programme	Greater understanding of workforce experience			
Representative Workforce	Representative FTSU champions  Published the Ethnicity Pay Gay report	Staff feel more confident to speak to FTSU champions with protected characteristics			
HR and Disciplinary Processes	Adding in Restorative practice	Fewer formal processes. Promoting fair and equitable practice			
Anti-Racist Practice	Launch anti racist journey with actions Promotion of Everyone Belongs Here campaign Reporting bullying incidents to Board	Improvement in Staff Survey scores for 2025 on bullying and harassment			

#### Is there any specific support required from NHSE Midlands regional team?

- The toolkit recommendations have been <u>helpful</u> and we are working through these
- · Need to understand if there are any regional or national resources we can access to support HIA

own Risks / Issues to Delivery Requiring Escalation Addi	Additional Comments					
Capacity	tem EDI leads work well together and share good practice					





#### Staff Survey Results by Organisation

Shropshire, Telford and Wrekin	We are compassionate and inclusive	recognised		We are safe and healthy	We are always learning	We work flexibly	We are a team	Staff engagement	Morale	Median to Best	Below Median to Worst
NHS Shropshire, Telford And Wrekin Integrated Care Board	7.37	6.66	6.79	6.31	4.90	7.11	6.94	6.61	5.95	4	5
The Robert Jones And Agnes Hunt Orthopaedic Hospital NHS Foundation	7.67	6.14	6.84	6.46	5.73	6.58	6.97	7.34	6.28	5	4
Shropshire Community Health NHS Trust	7.73	6.43	7.02	6.43	5.85	6.76	7.23	7.20	6.21	2	7
The Shrewsbury And Telford Hospital NHS Trust	7.08	5.81	6.47	6.02	5.48	6.26	6.61	6.59	5.84	1	8

- Robert Jones and Agnes Hunt has scored Median to Best for 5 out of the 8 elements/themes, and 4 Below Median to Worst, with no national best or worst.
- · Shropshire Community Health has scored Median to Best for 2 elements/themes and Below Median to Worst in 7 elements/themes.
- · Shrewsbury and Telford has scored Below Median to Worst in 1 elements and Below Median to Worst in 8 elements/themes.
- Shropshire, Telford and Wrekin ICB scored Median to Best in 4 elements/themes and Below Median to Worst for 5 element/themes.

Do not 'read across' element or theme scores as these are **not directly comparable**. Themes are made up of different questions that all have varying evaluative context.

Comparisons should not be made at organisation level as they include different benchmarking groups and the shadings relate to comparisons within the Trust benchmarking groups for each theme.

	BEST	MEDIAN UP TO BEST	MEDIAN	BELOW MEDIAN TO WORST	WORST
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# Further enquiries.

RJAH would welcome any enquiries about the details of our WRES and Action Plan.

Please contact:

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