# MHS Foundation Trust

# Workforce **Race Equality** Standard 2025 **Findings** and Action Plan

Improving care, transforming lives...for a **better** Bolton



## Introduction

Steering a culture of inclusion remains a critical priority for our organisation. An inclusive workplace ensures that all staff feel welcome, valued, and able to thrive, which in turn enables us to provide the best possible care for the people of Bolton.

Nationally, colleagues from Black, Asian and Minority Ethnic (BAME) backgrounds continue to report poorer experiences of working within the NHS. The COVID-19 pandemic further exposed health inequalities, while the murder of George Floyd in 2020 reminded us that systemic racism persists in today's society.

The importance of inclusion is embedded in the NHS People Plan, our Trust Strategy 2019–2024, and our EDI Plan 2025-2027, which sets out our vision and priorities for improving equality, diversity and inclusion. Each year, the Trust publishes its Workforce Race Equality Standard (WRES) report. This framework enables NHS organisations to measure, demonstrate and monitor progress against a number of indicators of workforce equality, and to ensure that staff from BAME backgrounds are treated fairly, supported to progress in their careers, and protected from bullying, harassment, abuse and discrimination.

Our latest WRES results show that progress is being made. In many areas we perform better than national averages, with improvements in representation, recruitment outcomes, staff experience, and confidence in equal opportunities. However, we know that being "better than average" is not enough. Our ambition is to go further — to be a pioneer in race equality, removing barriers, reducing inequalities, and ensuring every colleague has the same opportunity to succeed and thrive.

Priorities for the year ahead will therefore remain focused on embedding inclusive recruitment and building an inclusive culture to tackle bullying, harassment and discrimination.

This report should be read alongside our EDI Plan 2025-27 (found at <u>Our approach to equality, diversity and inclusion</u> - <u>Bolton NHS FT</u>), which sets out how we will continue to deliver on these commitments and work towards becoming a leader in race equality within the NHS.

# Key findings – Comparisons

#### Key to Symbols and Indicators

 $\checkmark$  = Improved X = Below target  $\rightarrow$  = No change ↑ = Increase ↓ = Decrease

Metric	2025 BME	2025 White	Compared to previous year (2024)	National Average
1. Workforce representation of BME staff (AfC)	23.2%	_	↑ ✓ (+2.6%)	X Target 28% → 4.8% below
Relative likelihood of White staff being appointed from shortlisting compared to BME staff	1.34	_	↓ ✔ (-0.27)	✓ National 1.62 → 0.28 better
Relative likelihood of BME staff entering formal disciplinary process	0.90	_	↑ <b>X</b> (+0.12)	✓ National 1.09 → 0.19 better
Relative likelihood of White staff accessing non- mandatory CPD compared to BME staff	1.01	_	↑ <b>X</b> (+0.02)	✓ National 1.06 → 0.05 better
5. Harassment, bullying or abuse from patients/public	23.6%	23.8%	↓ <b>√</b> (-2.1% BME) / ↑ <b>X</b> (+1.1% White)	✓ National (BME) 27.8% → 4.2% better
6. Harassment, bullying or abuse from staff	20.7%	16.5%	↓ <b>√</b> (-2.86% BME) / ↓ <b>√</b> (-1.62% White)	✓ National (BME) 24.9% → 4.2% better
7. Equal opportunities for career progression	49.7%	58.5%	↑ <b>√</b> (+9.7% BME) / ↑ <b>√</b> (+2.1% White)	✓ National (BME) 48.8% → 0.9% better
8. Discrimination from manager/colleague	14.9%	5.2%	↓ <b>√</b> (-4% BME) / ↑ <b>X</b> (+0.2% White)	✓ National (BME) 15.5% → 0.6% better
9. BME board membership	18.8%	-	↑ ✓ (+1.15%)	√ National 16.5% → 2.3% better

# WRES results a glance

\* Arrows indicate an improving or deteriorating position from the previous year. RAG rating shows comparisons: Metric 1 compares to the local population profile (28%); Metric 2-4 compare the white/BME likelihood; Metrics 5-9 compares to the national average.

WRES indicator			2020	2021	2022	2023	2024	2025	Difference between 2024 & 2025*
1	Percentage of BME staff	Overall	12.90%	14.10%	15.00%	17.97%	20.60%	23.20%	2.6% 个
	r crountage of bine swift	VSM	8.30%	0.00%	0.00%	0.00%	0.00%	0.00%	0% ↔
2	Relative likelihood of white applicants being appointed from shortlisting compared to BME	applicants	1.3	0.62	0.84	0.14	1.61	1.34	-0.27 个
3	Relative likelihood of BME staff entering the formal disciplinary process		1.64	0.93	1.00	1.14	0.78	0.90	0.12 ↓
4	Relative likelihood of white staff accessing non-mandatory training and CPD compared to BME staff		0.9	0.99	0.99	1.02	0.99	1.01	0.02 ↓
_	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or	BME	28.80%	23.90%	27.70%	23.20%	25.70%	23.60%	-2.1% ↑
5	the public in the last 12 months	White	21.90%	25.70%	26.50%	25.90%	22.70%	23.80%	1.1% ↓
6	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12	BME	25.00%	27.00%	26.70%	24.70%	23.56%	20.70%	-2.86% ↑
months	months	White	23.60%	19.80%	20.50%	20.10%	18.12%	16.50%	-1.62% ↑
7	Percentage of staff believing that the Trust provides equal opportunities for career	BME	67.50%	74.80%	47.40%	48.00%	40.00%	49.70%	9.7% 个
,	progression or promotion	White	86.50%	90.10%	62.30%	61.10%	56.40%	58.50%	2.1% 个
0	Percentage of staff personally experienced discrimination at work from manager/team	BME	21.20%	15.30%	16.30%	17.70%	18.90%	14.90%	-4% ↑
8	leader or other colleague		5.30%	5.30%	4.60%	5.20%	5.00%	5.20%	0.2% ↓
9	BME board membership		6.70%	8.30%	15.40%	13.33%	17.65%	18.80%	1.15% 个

## WRES indicator 1

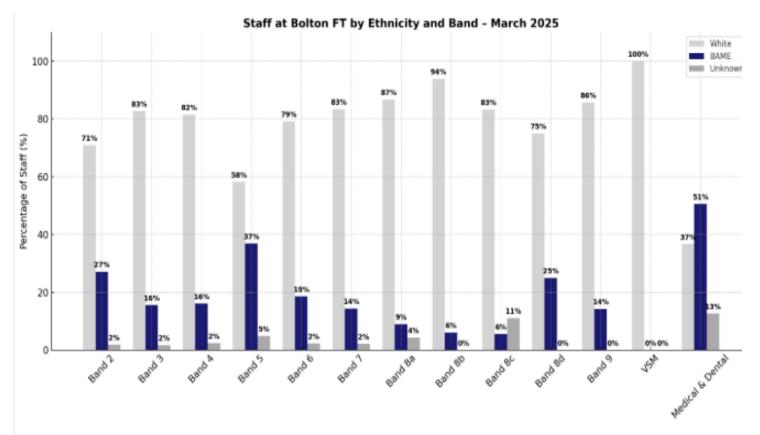
Staff at Bolton FT by ethnicity: 2017 - 2025

	Headcount				Percentage		
Year	White	BME	Unknown	White	BME	Unknown	
2017	4532	601	349	82.7%	11.0%	6.4%	5482
2018	4355	615	328	82.2%	11.6%	6.2%	5298
2019	4453	679	325	81.6%	12.4%	6.0%	5457
2020	4554	723	334	81.2%	12.9%	6.0%	5611
2021	4686	820	317	80.5%	14.1%	5.4%	5823
2022	4730	889	291	80.0%	15.0%	4.9%	5910
2023	4685	1097	322	76.8%	18.0%	5.3%	6104
2024	4661	1277	250	75.3%	20.6%	4.0%	6188
2025	4632	1476	253	72.8%	23.2%	4.0%	6361

- In 2025, the Trust employed 6,361 staff, of whom 23% (1,476) are from a Black, Asian and Minority Ethnic (BAME) background. This represents an increase of 3% (199 staff) compared with the previous year.
- Representation by staff group shows that 13% (165) of non-clinical staff, 23% (1,064) of clinical AfC staff, and 51% (247) of medical and dental staff are from BAME backgrounds.
- By comparison, 28% of the local population are from BAME backgrounds, although this figure reflects the whole population rather than only those of working age. The Trust continues to work towards ensuring that our workforce diversity reflects the changing demographics of our community.
- The proportion of staff with undeclared ethnicity has remained stable at around 4%

### **WRES** indicator 1

Staff at Bolton FT by ethnicity by Band: 2025

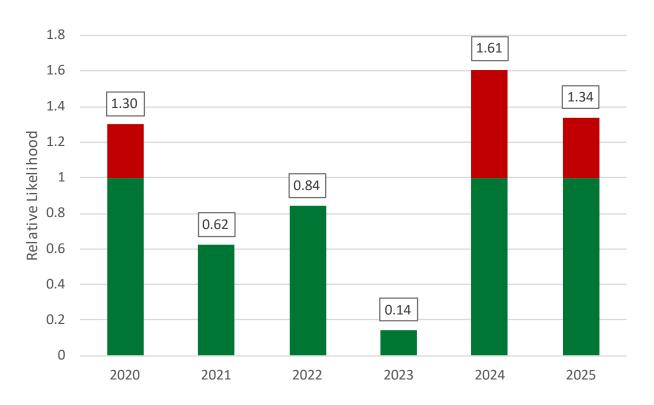


- Overall workforce: BAME staff make up 23.2% of the workforce (1,476 individuals).
- Clinical AfC staff: The highest proportion of BAME staff are at Band 5 (37%, 480 individuals), reflecting strong representation in frontline clinical roles.
- Non-Clinical AfC staff: Representation is highest at Band 6 (19%, 16 individuals).
- Senior AfC staff: At Band 8a and above, BAME representation is 8% (32 of 424), including 8 % of senior clinical staff and 6% of senior non-clinical staff.
- Medical & Dental staff: Representation is significantly higher than AfC staff groups, with 50 % (247 of 488) identifying as BAME across consultants, non-consultant career grades, and trainees.

#### WRES indicator 2

Relative likelihood of white applicants being appointed from shortlisting compared to BME applicants: 2020 – 2025

\* figure above "1" would indicate that white candidates are more likely than BME candidates to be appointed from shortlisting.

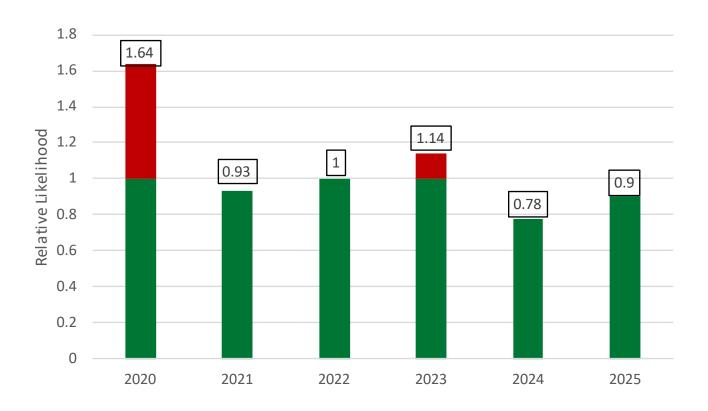


- In 2025, the relative likelihood of White applicants being appointed from shortlisting compared to BAME applicants reduced from 1.61 to 1.34. This means White applicants are now 1.34 times more likely to be appointed, showing an improvement on last year.
- The Trust's result is also better than the national average of 1.62, reflecting progress in fairer recruitment practices.
   Work will continue in 2025/26 to further reduce this gap and ensure equitable opportunities for all candidates.

### **WRES** indicator 3

#### Relative likelihood of BME staff entering the formal disciplinary process

\* A figure below 1 indicates that BAME staff members are less likely than white staff to enter the formal disciplinary process whilst a score greater than 1 for BAME staff indicate they are more likely to be subject to formal process.



- In 2025, the relative likelihood of BAME staff entering the formal disciplinary process was 0.9, a slight increase from 0.78 in 2024. BAME staff therefore continue to remain less likely than White staff to enter the process.
- This outcome is also better than the national average of 1.09.
- The Trust will continue to monitor this indicator closely to ensure fairness and consistency, and to address any emerging trends.

#### **WRES** indicator 4

Relative likelihood of white staff accessing non-mandatory training and CPD compared to BME staff: 2020 – 2025

A figure below "1" would indicate that white staff members are less likely to access non-mandatory training and CPD than BME staff

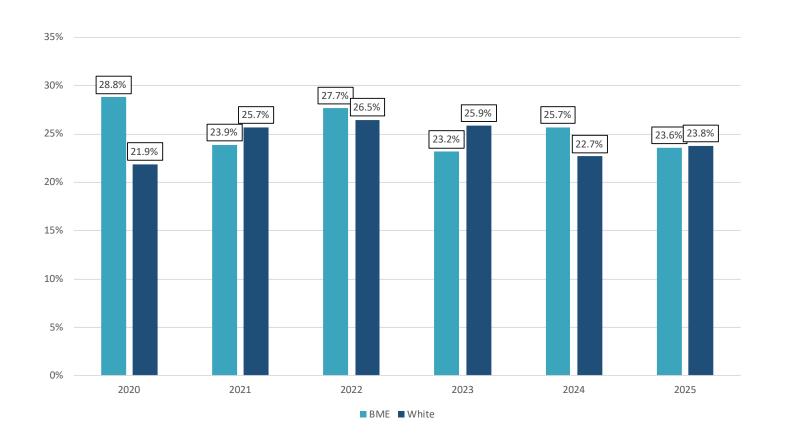
Year	Relative Likelihood
2020	0.90
2021	0.99
2022	0.99
2023	1.02
2024	0.99
2025	1.01



- In 2025, White staff were slightly more likely than BAME staff to access non-mandatory training and CPD (1.01 compared to 0.99 in 2024).
- This remains well within the non-adverse range (0.80–1.25) and is better than the national average of 1.06. The Trust will continue to monitor uptake to ensure equitable access for all staff.

#### WRES indicator 5

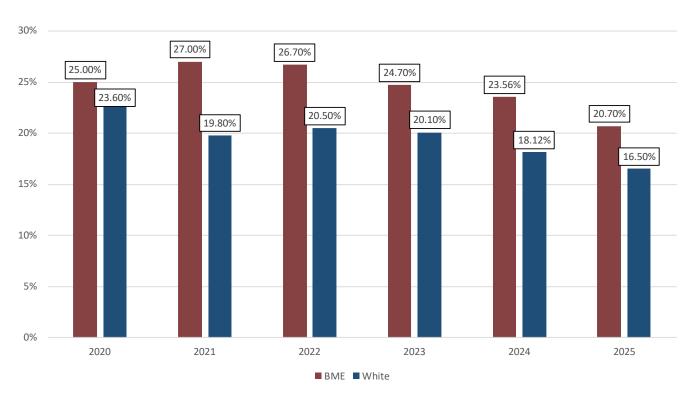
Percentage of BME staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months: 2020 - 2025



- The 2025 Staff Survey shows a 2.1% reduction in BAME staff experiencing bullying, harassment or abuse from patients, relatives or the public, decreasing from 25.7% in 2024 to 23.6% in 2025.At 23.6%.
- The Trust's result is 4.2% better than the national average of 27.8%.
- These improvements reflect the ongoing impact of civility campaigns, violence prevention training, and greater staff confidence in reporting concerns.

#### WRES indicator 6

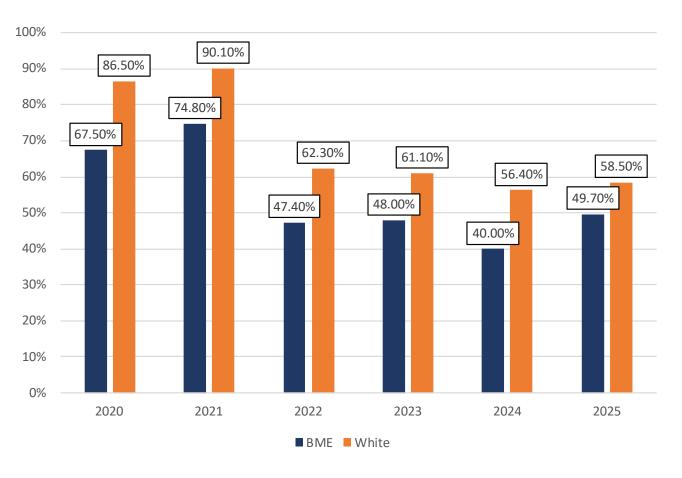
Percentage of staff experiencing harassment, bullying or abuse from manager or other colleague's in the last 12 months: 2020 - 2025



- The 2025 Staff Survey shows a 2.9% reduction in reports of bullying, harassment and abuse (BHA) from colleagues and managers among BAME staff, falling from 23.6% in 2024 to 20.7% in 2025.
- Results for White staff also improved, reducing from 18.1% to 16.5% over the same period. At 20.7%, the Trust's results remain better than the national average of 24.9%, reflecting continued progress in creating a respectful workplace culture.
- The gap between BAME and White staff has narrowed but remains, with 4.2% more BAME staff reporting BHA compared to their White colleagues.

#### WRES indicator 7

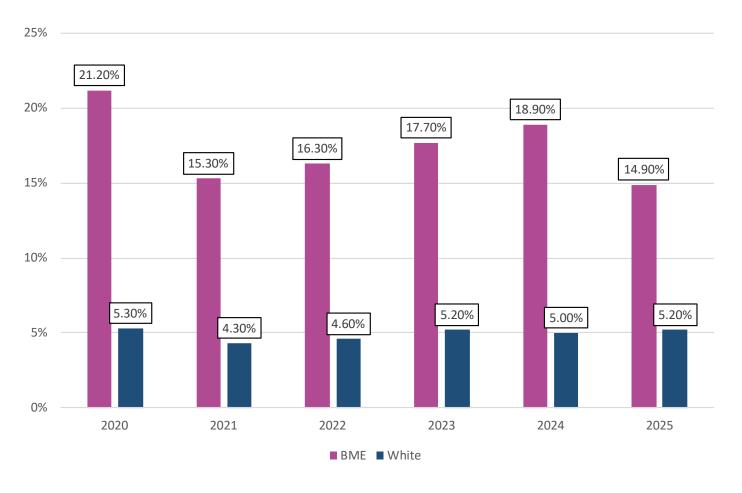
Percentage of staff believing that the Trust provides equal opportunities for career progression or promotion: 2020 - 2025



- The 2025 NHS Staff Survey shows that 49.7% of BAME staff believe there are equal opportunities for career progression, a 9.7% improvement from 2024 and slightly above the national average (48.8%).
- 58.5% of White staff share this view
- The 8.8% gap between BAME and White staff is consistent with national trends, highlighting the need for continued focus on fair and transparent career progression

#### **WRES** indicator 8

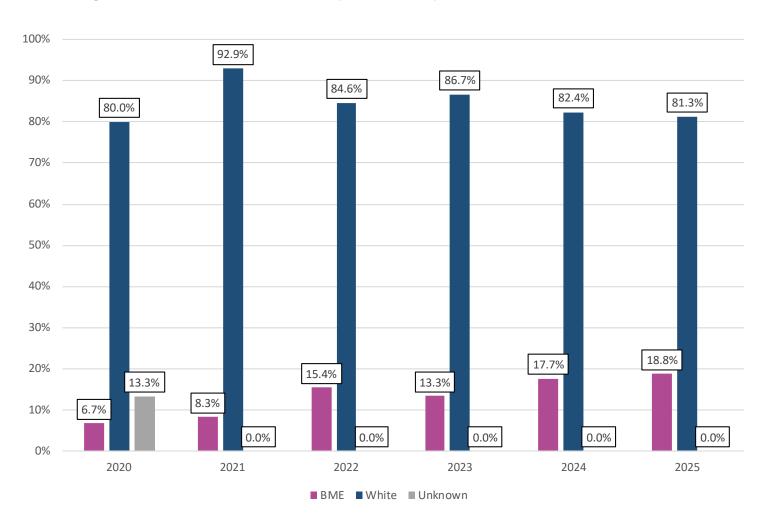
Percentage of staff personally experienced discrimination at work from manager/team leader or other colleague: 2020 - 2024



- This year saw a 4% reduction in BAME staff reporting discrimination from managers or colleagues, falling to 14.9%.
- While this remains higher than White staff at 5.2%, both groups compare positively to national averages (15.5% BAME and 6.7% White).
- The Trust will continue actions to reduce the disparity further.

### WRES indicator 9

#### Percentage of board members by ethnicity compared to BME workforce: 2020 - 2025



 The percentage of BAME board members has increased by 1.15% (18.8%) which is 2.4% higher than the national average at 16.5%.

#### WRES Actions taken 2024 - 25

- Active BAME Staff Network Regular Executive Sponsor attendance; advised on inclusive recruitment, anti-racism framework, education, and key
  events(e.g. Black History Month, IWD). Chair provides an alert, advise, assure report to the EDI Assurance Group every two months; alerts acted upon
  swiftly.
- Anti-Racist Organisation Board-issued zero-tolerance statement; anti-racist principles embedded across people and service practices. Staff listening sessions, safety measures, and wellbeing support provided during recent riots.
- 'Our Leaders' Programme Includes We All Belong module (WRES awareness, anti-racism, inclusive recruitment, bias, active bystander). Supports a culture of belonging and fair access to leadership development. Includes embed activities such as EDI Blended Learning Bundles on a range of topics, including race equality and health inequalities.
- Positive Action in Leadership Positive action has encouraged more BAME staff to sign up to the Our Leaders programme
- Strengthened Equality Impact Assessment Framework Clearer two-stage EIA process; EDI embedded in QEIA, business cases, and decision-making. Written guidance, drop-ins, and webinars to strengthen compliance and reduce disproportionate impacts.
- Improved Governance & Assurance A new EDI Our People Steering Group and EDI Assurance Group set up to oversee actions related to race equality.
- Freedom to Speak Up (FTSU) 90+ diverse champions promoting openness on bullying, harassment, and victimisation.
- Award-Winning International Recruitment Team RCN Award for holistic support to internationally educated nurses; model adopted regionally.
- Inclusive Recruitment Practices Adjustments at all stages, positive action statements and advertisement of BAME Network to candidates
- Fair Disciplinary Review Ongoing case reviews to ensure equity and identify any racial bias; quarterly monitoring via People Committee.
- Anti-Bullying Video Campaign Ongoing display of diverse staff messages across patient waiting areas.
- Cultural Inclusion Events Awareness and celebration of Ramadan, Diwali, Black History Month, and South Asian Heritage Month; updated annual EDI & Wellbeing events calendar.

## Actions planned to support improvements to WRES

The EDI Plan 2025–2027 sets out how we will address key equality, diversity, and inclusion priorities that impact both patient and staff experience within our Trust. These priorities are informed by historical and recent WRES data, so you can be assured that the actions in the EDI Plan are designed to improve WRES indicators.

Rather than creating a separate WRES Action Plan, we have integrated WRES requirements into the EDI Plan to ensure full alignment. On this and the following page, you will see how actions from the EDI Plan map directly to WRES indicators.

To read the full EDI Plan 2025–2027, please visit: <u>Our approach to equality, diversity and inclusion - Bolton NHS FT</u>

	WRES Indicator	Alignment with wording from the EDI Plan			
1	Workforce representation of BME staff	Inclusive Recruitment			
2	Relative likelihood of White staff being appointed from shortlisting compared to BME staff	<ul> <li>Inclusive recruitment training and guidance</li> <li>Structured feedback and support for global majority candidates who were unsuccessful.</li> <li>Equality Advocates on hiring panels.</li> <li>Accountability processes for decision making.</li> </ul>			
3	Relative likelihood of BME staff entering the formal disciplinary process	Inclusive Culture •Triangulating HR data to identify patterns. •HR and OD learning needs analysis in order to best su our diverse workforce.			
4	Relative likelihood of White staff accessing non-mandatory training and CPD compared to BME staff	Inclusive Culture Inclusive leadership training via the Our Leaders programme – tackles unconscious bias and the link to talent development.			
5	Harassment, bullying or abuse from patients/public	Inclusive Culture  Inclusive leadership training via the Our Leaders programme – tackles active bystander theory.  HR and OD learning needs analysis in order to best support our diverse workforce.  Inclusive communications to promote zero-tolerance stance of the Trust.			

# Actions planned to support improvements to WRES

	WRES Indicator	Alignment with wording from the EDI Plan				
6	Harassment, bullying or abuse from staff	<ul> <li>Inclusive Culture</li> <li>Triangulating culture data to identify 'hotspots';</li> <li>Inclusive leadership training via the Our Leaders programme – tackles unconscious bias and the link to talent development.</li> <li>HR and OD learning needs analysis in order to best support our diverse workforce.</li> <li>Inclusive communications to encourage cultural competence, anti-bullying etc.</li> </ul>				
7	Equal opportunities for career progression or promotion	Inclusive Culture •Inclusive leadership training via the Our Leaders programme – tackles unconscious bias and the link to talent development.				
8	Discrimination from manager, team leader, or colleague	<ul> <li>Inclusive Culture</li> <li>Triangulating culture data to identify 'hotspots';</li> <li>Inclusive leadership training via the Our Leaders programme – tackles unconscious bias and the link to talent development.</li> <li>HR and OD learning needs analysis in order to best support our diverse workforce.</li> <li>Inclusive communications to encourage cultural competence, anti-bullying etc.</li> </ul>				
9	BME representation at Board level	Inclusive Recruitment Inclusive recruitment training and guidance Structured feedback and support for global majority candidates who were unsuccessful. Equality Advocates on hiring panels. Accountability processes for decision making.				