

# Alder Hey Children's NHS Foundation Trust Workforce Race Equality Standard (WRES) 2024/25

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### Workforce Race Equality Standard (WRES) Introduction

The Workforce Race Equality Standard (WRES) is an annual data collection process designed to highlight the experiences of Black, Asian, and minority ethnic staff compared to their White colleagues. All NHS organisations are required to publish data, progress updates, and action plans against the nine WRES indicators. The aim is to promote an inclusive, supportive, and fair culture, ensuring that every member of the NHS's diverse workforce feels a sense of belonging and has a positive working experience. The data and statistics in this report reflect workforce indicators, NHS Staff Survey results, and a Board representation indicator. Covering the period from April 2024 to March 2025, the report summaries where improvements have been made and where progress has stalled or declined. It draws on data from the Electronic Staff Records (ESR) system and relevant findings from the National Staff Survey.

The WRES data is crucial, as research shows that a motivated, valued, and included workforce delivers higher-quality patient care, improves patient satisfaction, and enhances patient safety. It also helps us better understand the experiences of our Black minority ethnic staff so we can target support, implement positive change, and create a more inclusive environment. Alder Hey is making progress and remains committed to addressing workplace inequalities between Black minority ethnic and White staff. Of the nine WRES indicators, four focus on workforce composition and people management, four are based on National Staff Survey questions, and one relates to Board-level representation. The 2024/25 report shows progress in five of the nine indicators. However, further effort is needed to achieve improvements across all areas. Overall, Black minority ethnic staff continue to report poorer workplace experiences compared to White staff, a trend that has persisted since the WRES was introduced in 2015.

A note on language: When referring to ethnicity, we will use the term Black and minority ethnic (BME) to be consistent with National NHS Workforce Race Equality Standard terminology.

# Message from the Race Ethnicity and Cultural Heritage (REACH) Staff Network

The Race Ethnicity and Cultural Heritage (REACH) staff network continues to grow and make a positive impact in supporting our colleagues and fostering a safe, welcoming and inclusive environment at Alder Hey. Over the past 12 months our Chair, Audrey Chindiya and Deputy Chair, Raji Thomas, have worked tirelessly to ensure that colleagues are heard, have access to peer support, and feel empowered to influence change within the organisation.

We believe that staff networks are central to driving progress, and we remain committed to creating opportunities for both personally and professionally growth. REACH staff has become a trusted space where staff can raise concerns safely and know they are listened to. This will remain at the heart of the network as we continue to champion staff voices and turn them in to action. We welcome the insights from this year's Workforce Race Equality Standard (WRES) which gives us a better understanding with a snapshot of what our staff from different race, ethnicity, and cultural heritage experience here at Alder Hey. Using this data, we will work to improve these experiences, challenge discrimination and address inequality. Over the next 12 months, REACH will continue to provide lived experience insight to shape organisational change.



Audrey Chindiya, Chair of the REACH Staff



Raji Thomas,
Deputy Chair of the REACH
Staff Network

### **Workforce Race Equality Standard Progress made in 2024/25**

We are pleased to note that we have made improvements in six out of the nine indicators of race equality:

- Increase in the percentage of BME staff employed at Alder Hey
- Improved in the number of BME staff being appointed from shortlisting
- Reduction in the number of BME staff entering the formal disciplinary process
- The number of BME staff who have experienced harassment, bullying or abuse from patients, relatives or the public has significantly decreased
- The number of BME staff believing the Trust provides equal opportunities for career progression and promotion has increased
- The percentage difference between BME staff on the Board and in the overall workforce decreased

Several actions have been taken over the last twelve months that are likely to have contributed to the above improvements, include:

- Created and launch Alder Hey Anti-Racism Statement
- Over the year, we organised a series of cultural and celebratory events, including Iftar during Ramadan, Diwali
  celebrations, and a recognition event for the REACH staff network. These activities were supported by an enhanced
  programme of communications to increase visibility and engagement.
- Launch of Thriving Leaders Programme which includes Anthony Walker Foundation Anti-Racism training and EDI
- Continue to work with HR team to review the processes and practices to reduce inequality in the recruitment processes
- Launch of the Mutual Mentoring Programme

Improvement from Previous year	No significant improv	vement or de	ecline	Declinir	ig from previo	ous year
Indicator		2022	2023	3	2024	2025
Indicator 1: Percentage of BME staff working at A	der Hey	8.9%	11.5	%	12.6%	13.7%
Indicator 2: Relative likelihood of White applicant shortlisting across all posts compared to BME applicant	• 11	0.91	1.45		2.43	1.81
Indicator 3: Relative likelihood of BME staff enter disciplinary process compared to White staff	ing the formal	0.91	1.36		1.14	1.04
Indicator 4: Relative likelihood of White staff accelerationing and continuous professional development BME staff	0.32	1.77		1.0	1.09	
Indicator 5: Percentage of staff experiencing hara abuse from patients, relatives, or the public in the		16.9%	24.6	3%	21.82%	14.59%
<b>Indicator 6:</b> Percentage of staff experiencing hara abuse from staff in the last 12 months	issment, bullying or	20.1%	19.8	%	17.95%	18.84%
Indicator 7: Percentage of staff believing that the equal opportunities for career progression and/or		51.0%	49.2	6%	49.64%	53.85%
Indicator 8: Percentage of staff experienced discr manager/team leader or other colleagues in the la	10.5%	12.5	%	12.64%	16.36%	
Indicator 9: Percentage difference between the or voting membership and its overall workforce	rganisation's Board	13.3%	10.7	%	16%	9%

# **Indicator 1** — Percentage of staff in each AfC Bands 1 to 9 and VSM compared with the percentage of Black minority ethnic staff in overall workforce

Total Workforce	BME	White	Missing or Unknown
4,647	636 (13.7%)	3983 (85.7%)	28 (0.6%)

	вме				White			Missing or Unknown		
	2023	2024	2025	2023	2024	2025	2023	2024	2025	
Cluster 1 (Bands 1 - 4)	3.4% (25)	4.6% (35)	4.3% (43)	96% (691)	95% (720)	94% (756)	0.83% (6)	0.4% (3)	0.6% (5)	
Cluster 2 (Band 5 - 7)	5.2% (14)	6.9% (19)	8.8% (26)	94% (252)	92% (256)	91% (268)	0.74% (2)	0.74% (2)	0% (0)	
Cluster 3 (Bands 8a - 8b)	4% (4)	4% (4)	4.6% (5)	94% (95)	95% (96)	95% (103)	2% (2)	1% (1)	1% (1)	
Cluster 4 (Bands 8c – 9 & VSM)	9% (4)	13.5% (7)	6.4% (3)	91% (41)	85% (44)	91.5% (43)	0% (0)	1% (1)	2% (1)	

Table 1: Non-Clinical Workforce Cohort (data source ESR)

### **Workforce composition and BME Representation**

As of March 2025, the Trusts total headcount was 4,647, an increase from 4,451 in 2024. Of the workforce, 13.7% (636 staff) have declared a BME background, compared to 561 staff in 2024. Ethnicity declaration rates on the Electronic Staff Record (ESR) have improved, with only 28 staff (0.6%) recorded as 'unknown', this is an increase of 76 declarations since 2023. In non-clinical roles, BME staff make up 6.1% of the workforce. This group has seen an increase in staff across Clusters 1, 2, and 3, while Cluster 4 (Band 8c–9 and VSM) has decreased.

In clinical roles, BME representation stands at 11.8% overall, with medical and dental staff showing a significantly higher representation of 48.6%. Growth has been seen in Clusters 1, 2, and 3, alongside a small increase in number of BME staff in Cluster 5 (Medical and Dental Consultants) and Cluster 7 (Medical and Dental trainees). Notably, BME representation in Clusters 6 and 7 is higher than that of White staff.

The Trust continues to work in partnership with the Learning and Development team, Human Resources, and the Race Ethnicity and Cultural Heritage (REACH) staff network to develop strategies that support BME staff in accessing leadership development opportunities and progressing their careers at Alder Hey. While these improvements are encouraging, further action is needed to achieve racial equity within the workforce. Some staff have yet to record their demographic data on ESR, and increasing participation will ensure a more accurate understanding of workforce composition, enabling the Trust to better meet staff needs.

	вме				White			Missing or Unknown		
	2023	2024	2025	2023	2024	2025	2023	2024	2025	
Cluster 1 (Bands 1 - 4)	10.2% (61)	6.9% (40)	9.5% (52)	88.6% (526)	92.5% (533)	90.1% (493)	1.2% (7)	0.5% (3)	0.4% (2)	
Cluster 2 (Band 5 - 7)	10.6% (193)	13.5% (264)	13.6% (279)	88.7% (1617)	85.9% (1677)	85.8% (1755)	0.6% (12)	0.6% (11)	0.6% (12)	
Cluster 3 (Bands 8a - 8b)	3.7% (10)	3.8% (12)	5.1% (17)	95.6% (257)	95.5% (298)	94.6% (317)	0.7% (2)	0.6% (2)	0.3% (1)	
Cluster 4 (Bands 8c - 9 & VSM)	8% (2)	6.9% (2)	3.% (1)	92% (23)	93.1% (27)	97% (32)	0.0% (0)	0.0% (0)	0.0% (0)	
Cluster 5 (Medical and Dental staff, Consultants)	38.7% (108)	39.5% (116)	41.8% (130)	59.9% (167)	59.2% (174)	57.2% (178)	1.4% (4)	1.4% (4)	0.9% (3)	
Cluster 6 (Medical and Dental staff, non-consultant career grade)	72.5% (29)	57.1% (24)	69.6% (16)	22.5% (9)	40.5% (17)	30.4% (7)	5% (2)	2.4% (1)	0% (0)	
Cluster 7 (Medical and Dental staff, Medical and Dental trainee grades)	57.9% (33)	65.5% (38)	65.3% (64)	36.8% (21)	32.8% (19)	31.6% (31)	5.3% (3)	1.7% (1)	3% (3)	

Table 2: Clinical Workforce (data source ESR)

### **Indicator 2** — Relative likelihood of staff being appointed from shortlisting

This metric compares the data regarding the relative likelihood of White applicants being appointed from shortlisting compared to BME applicants. The metric includes both internal and external recruitment

(Data source: Trust's Recruitment data)

WRES Indicator	DESCRIPTOR	2023/24	2024/25
2	Relative likelihood of White applicants being appointed from shortlisting across all posts compared to BME applicants	2.43	1.81

Table 3: Relative likelihood of appointment from shortlisting

As of March 2025, the likelihood ratio of White applicants being appointed from shortlisting was 1.81 compared to 2.43 in 2024. While this reduction indicates some progress, the data still shows a persistent disparity, White applicants remain almost twice as likely to be appointed as their BME counterparts. More specifically, 25.7% (552 out of 2,212) of shortlisted White candidates were appointed, compared to 10.5% (113 out of 824) of BME candidates. A likelihood ratio above 1.00 highlights that inequality remains in appointment outcomes. Although the gap has narrowed, the current figures reinforce the need for targeted interventions to ensure fair and equitable recruitment processes. The difference in candidate numbers between groups should be considered, but the pattern remains clear. Additionally, 44 shortlisted candidates did not declare their ethnicity; 11 were appointed. Continued focus on inclusive recruitment practices and removing barriers at appointment stage will be critical in helping to reduce this gap further. We intend to strengthen our recruitment practices by providing targeted training for recruitment managers and exploring interventions to address barriers faced by BME applicants at the final selection stage.

### **Indicator 3** — Relative likelihood of staff entering the formal disciplinary process

Relative likelihood of BME staff compared to White staff entering the formal disciplinary process, as measured by entry into the formal disciplinary procedure.

(Data source: Trust's HR data)

WRES Indicator	DESCRIPTOR	2023/24	2024/25
3	Relative likelihood of BME staff entering the formal disciplinary process compared to White staff	1.14	1.04

Table 4: Relative likelihood of entering formal capability process

The data shows that the disparity in the likelihood of BME staff entering the formal disciplinary process compared to White staff has reduced over the past 12 months. In 2024/25, the relative likelihood ratio was 1.04, down from 1.14 in 2023/24, indicating a near parity between the two groups. In real terms, 2 BME staff members (0.35% of 636) entered formal disciplinary proceedings, compared to 12 White staff members (0.31% of 3,983). While the difference is now minimal, continued monitoring is essential to ensure this improvement is sustained and that fair and equitable practices are consistently applied. We will continue to regular monitor disciplinary outcomes by ethnicity, provide refresher training for managers on fair and consistent application of policies, and ensure early intervention and resolution processes are used to prevent escalation into formal procedure

### **Indicator 4** — Relative likelihood of staff accessing non-mandatory training and CPD

Relative likelihood of White staff accessing non-mandatory and CPD training compared to BME staff.

(Data source: Trust's HR data)

WRES Indicator	DESCRIPTOR	2023/24	2024/25
4	Relative likelihood of White staff accessing non-mandatory training and continuous professional development (CPD) compared to BME staff	1.0	1.09

Table 5: Relative likelihood of staff accessing non-mandatory training and CPD

In 2024/25, White staff are 1.09 times more likely than BME staff to access non-mandatory training and continuous professional development (CPD). While the disparity is relatively small, equitable access to professional development is essential for career progression, retention, and ensuring all staff feel supported in their growth. Non-mandatory training includes any learning, education, training, or development activity not required or mandated by the organisation. A more robust system for recording and monitoring participation is being developed, enabling deeper analysis of access by ethnicity, profession, and department. This will help identify and address potential barriers to participation.

# **Indicator 5** — Percentage of staff experiencing harassment, bullying or abuse from patients, relatives, or the public

WRES Indicator	DESCRIPTOR	BME	White	BME	White
		2023	2023	2024	2024
5 NHS Staff Survey	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives, or the public in the last 12 months	21.82%	16.64%	14.59%	13.76%

Table 6: Harassment, bullying or abuse in the last 12 months (patients, relatives & public)

The data shows that in 2024, 14.59% of BME staff reported experiencing harassment, bullying or abuse from patients, relatives, or the public in the last 12 months. This is slightly higher than the 13.76% reported by white staff. Both figures represent an improvement from 2023, when 21.82% of BME staff and 16.64% of White staff reported such experiences. While the reduction is positive, any level of harassment, bullying, or abuse towards staff is unacceptable. The Trust is committed to addressing this issue and is actively working with the North West BAME Assembly to implement its Anti-Racist Framework, in collaboration with the REACH staff network. This will focus on creating a safe, respectful, and inclusive environment for all staff.

### **Indicator** 6 — Percentage of staff experiencing harassment, bullying or abuse from staff

WRES Indicator	DESCRIPTOR	BME	White	BME	White
		2023	2023	2024	2024
6 NHS Staff Survey	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months	17.95%	15.26%	18.84%	13.69%

Table 7: Harassment, bullying or abuse in the last 12 months (staff)

In 2024, 18.84% of BME staff reported experiencing harassment, bullying, or abuse from colleagues in the past 12 months, compared to 13.69% of White staff. This represents an increase from 2023 for BME staff, when the figure was 17.95%. Any form of harassment, bullying, or abuse is unacceptable, and the Trust remains committed to preventing such behaviours. We continue to work to foster a culture where all staff feel safe, respected, and a valued part of Alder Hey. While the figure for BME staff remains below the national average of 24.78%, further action is required to reverse the upward trend. We will implement targeted anti-bullying interventions, providing additional training for managers which address inappropriate behaviour. With the launch of our new Trust values, we are promoting a culture of respect.

# **Indicator 7** — Percentage of staff believing the Trust provides equal opportunities for career progression or promotion

WRES Indicator	DESCRIPTOR	BME	White	BME	White
		2023	2023	2024	2024
7 NHS Staff Survey	Percentage of staff believing that the organisation provides equal opportunities for career progression and/or promotion	49.64%	63.60%	53.85%	65.39%

Table 8: Opportunities for career progression or promotion

In 2024, 53.85% of BME staff believed the Trust offers equal opportunities for career progression or promotion, compared to 65.39% of White staff. While this is an improvement from 49.64% for BME staff in 2023, the data shows that a notable gap in experience remains. Perceptions of unequal access to progression can impact staff morale, retention, and trust in the organisation. Addressing disparity is essential to creating a workplace where staff feel they have fair opportunities to progress their careers. We are currently developing targeted opportunities, increasing visibility of career pathways, and actively supporting underrepresented groups, with the support of the staff networks.

# **Indicator 8** — Percentage of staff personally experiencing discrimination at work from their manager/team leader or colleagues

WRES Indicator	DESCRIPTOR	BME	White	BME	White
		2023	2023	2024	2024
8 NHS Staff Survey	Percentage of staff experienced discrimination at work from manager/team leader or other colleagues in the last 12 months	12.64%	4.57%	16.36%	3.60%

Table 9: Experience of discrimination at work from manager/team leader or colleagues

In 2024, 16.36% of Black minority ethnic staff reported experiencing discrimination at work from a manager, team leader or colleagues compared to 3.60% of White staff. Experiencing discrimination directly impacts staff wellbeing, retention, and trust in the organisation. Tackling this issue is essential to creating a workplace where all staff feel safe, respected, and able to thrive, aligning to the new Trust Values. We are working with the REACH staff network to understand the root causes behind the disparity and implement targeted actions. We want to strengthen accountability for addressing discrimination, provide managers with practical anti-discrimination training, and ensure robust reporting and support processes are in place.

### **Indicator 9** — Percentage difference between Board voting membership and its overall workforce

Percentage difference between the organisations' Board voting membership (Data source: NHS ESR and/or trust's local data)

WRES Indicator	DESCRIPTOR	ВМЕ	White	BME	White
		2023/24	2023/24	2024/25	2024/25
9 Board Representation	Percentage difference between the organisation's Board voting membership and its overall workforce	16.0%	-22.0%	9.0%	-16.0%

**Table: 10 Board representation** 

This year, the proportion of BME voting Board members remains higher than in the overall workforce (+9%), while White representation is lower (-16%). Compared to last year (BME +16%, White -22%), the gap has narrowed for both groups, indicating movement towards greater proportional alignment between Board membership and the wider workforce.

'The board representation indicator is calculated by deducting the percentage of BME staff in the workforce from the percentage of BME members on the board of directors. A positive value indicates greater representation of BME members at board level than in the workforce, while a negative value reflects underrepresentation.

### **Conclusions and next steps**

The report provides an assessment of the Trusts current position regarding the experiences of Black minority ethnic staff working at Alder Hey. Based on the 2024/25 data presented in this report, the following have been identified as areas that the trust must focus on for improvement:

- We will continue our efforts to increasing the representation across our workforce, ensuring it reflects the diversity of the communities we serve
- We will implement a more robust system for recording and monitoring participation in non-mandatory training, with a focus on equitable access and uptake of opportunities for BME staff
- We will work to foster a compassionate and courageous organisational culture that values individual contributions, actively challenging unacceptable behaviour, and encourages the reporting of harassment or discrimination in all form

With the support and involvement of the REACH staff network, the WRES action plan (Appendix 1) has been updated in response to the 2023/24 WRES data and we will work together to make improvements against the themes identified as concerns. We will, where possible, link our actions to the NHS Equality, Diversity, and Inclusion Improvement Framework to ensure we our activities are robust, align, and work towards improving the experience of our staff.

### **Appendix 1: WRES Improvement Plan 2024/25**

Action	Progress	Next Steps	Update
Ensure all our recruitment practices and processes are Inclusive and staff have appropriate training and support Indicator 1 Indicator 2	<ul> <li>Reviewed and revised Job adverts</li> <li>Develop and delivered Inclusive recruitment training for line managers working with HR and L&amp;D which will include unconscious bias</li> <li>Launched Inclusive recruitment training for line managers working with HR and L&amp;D which will include unconscious bias</li> <li>Working collaboratively with Liverpool City Region (LCR) Race Equality Hub to provide employment opportunities tour BME communities</li> <li>Launched EDI Plus online training programme</li> <li>Anthony Walker Anti-Racism Training delivered as part of the 'Thriving Leaders Programme</li> <li>Career conversations are embedded into staff annual appraisal process</li> </ul>	<ul> <li>Introduce Inclusive Panel Champions Programme to support recruitment panels</li> <li>Continue to work with the recruitment team to ensure our practices and processes are robust and focused on reducing bias and promoting equitable practices which are standardised across the organisation</li> </ul>	We have revised and redeveloped the job description format ensuring the language and statements are inclusive and it showcases the opportunities and offers at Alder Hey including all staff networks.  We will work with our HR colleagues, staff network and learning and development team to develop inclusive recruitment training aimed at supporting recruiting managers. This is introduced in the 'Management Essentials' Introduction to EDI programme, and we have also launch Inclusive Recruitment and Selection training for managers  We have participated in several recruitment events in partnership with the Liverpool City Region Race Equality Hub. These events have been highly encouraging, enabling us to engage directly with BME communities and actively promote career opportunities at Alder Hey  The new PDPR process includes career conversation L&D provide training form managers to support this aspect.

Provide inclusive career progression opportunities for development Indicator 1,4,7,9

- Work with the REACH staff network to proactively address areas of concern, improving our understanding about the experiences of our BME staff
- Continue to work closely with our Freedom to Speak Up Guardian to identify any themes that are related to career progression and development
- Launch of our new Trust Vales
- Continue to promote and support inclusive access to training, learning and development opportunities
- Launched 'Thriving Leaders' programme incorporating Anthony Walker Anti-Racism Training & EDI
- We have developed a leadership programme specific for internationally recruited staff which will be launched later this year

- Develop inclusive leadership training programme
- Use the intelligence from staff network members to identify any specific gaps requiring the development of bespoke training
- Make sure that our Internationally educated staff are encouraged and have access to development opportunities

We have launched 'Management Essentials' EDI training which introduces Inclusive leadership. We will explore a specific Inclusive leadership programme following on from feedback from EDI training.

We work closely with our REACH staff network to identify any themes or staff development needs and are currently working with OD to develop an aspiring leader's programme.

The practice Education team have a wide range of support offers for our Internationally educated nursing staff and have developed a career progression plan. They have also worked with our REACH staff network deputy chair to survey the nursing staff to find out their training and development needs. We will be encouraging our internationally educated staff to enroll onto our new 'Grow to Lead' Programme

	<ul> <li>Develop a talent management plan looking to improve the diversity of executive and senior leadership teams</li> <li>Review starter, leaver data triangulating this with exit interviews to identify any themes related to career progression</li> <li>The head of EDI will work with HR to review the data linking this to initiatives that support career progression.</li> </ul>
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Foster a culture of inclusion and belonging where staff are free safe, respected, and valued, and are free from any form of harassment, bullying, abuse, or discrimination Indicator 1,5,6,8

- Launch of new Trust Values
- Implement NW BAME Anti-Racism Framework
- Launch Anti-Racism Statement
- Launched 'Thriving Leaders' training incorporating Anthony Walker Anti-Racism Training
- Launched Mutual Mentoring programme
- EDI category introduced to staff awards
- Launch of the new Safe and Respectful Behaviour Policy
- Development of Staff Survey Action Group/Plan
- We are part of the LCR Public Sector Equality Leads Anti-Racism Development Group

- Work with FTSUG introducing 'Reflective Session; to areas across the Trust
- Communications campaign to demonstrate our commitment to becoming an antiracist organisation
- Monitor the number of incidents related to harassment, bullying, abuse or discrimination that are reported
- Introduce EDI Champions across the Trust
- Share the WRES data with all staff across the organisation

The Head of Equality, Diversity and Inclusion is collaborating with the Freedom to Speak Up Guardian to introduce 'Reflective Sessions' in targeted areas. These sessions will provide a safe and supportive space for staff to share concerns, challenges, and ideas in response to staff survey findings, while aligning with the Trust's new values. The aim is to facilitate informal, open dialogue that helps identify themes related to discrimination and promotes a culture of kindness, civility, and mutual respect among colleagues.

We are developing an info graphic highlighting the recent WRES results that will be shared with the wider workforce