

Alder Hey Children's NHS Foundation Trust Workforce Race Equality Standard (WRES) 2023/24

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Workforce Race Equality Standard (WRES) Introduction

The Workforce Race Equality Standard (WRES) is an annual data collection exercise which aims at highlighting the experiences of our Black, Asian and minority ethnic staff in comparison to their white colleagues. It is a requirement for all NHS organisations to publish data, progress, and action plans against the 9 indicators of Workforce Race Equality Standard. It aims to facilitate an inclusive supportive, and fair culture in organisations to ensure that every member of the NHS diverse workforce has a sense of belonging and a positive working experience. The data and statistics used in this report reflect Workforce indicators, NHS staff survey Indicators and a Board representation indicator.

This report provides a summary of the workforce race equality data taken from April 2023 to March 2024, identifying where improvements have been made and where data has remained static and/or declined. The report contains the Trust's performance against these indicators using data from the Electronic Staff Records (ESR) system and relevant results from the National Staff Survey. The data from the WRES report is important, as research demonstrates that a motivated, included, and valued workforce helps to deliver high-quality patient care, increase patient satisfaction, and improve patient safety. The data will also enable us to better understand the experiences of our Black minority ethnic staff so that we can target support and implement positive change thereby creating a more inclusive environment. Alder Hey is making progress and is committed to tackling workplace inequalities between Black minority ethnic and White staff. Four of the nine indicators focus on workforce composition and people management, four are based on data from the national NHS Staff Survey (NSS) questions, and one indicator focuses on Board level representation. The report shows that Alder Hey has made progress in six of the nine WRES indicators, however we still need to focus our efforts to ensure that we are progressing in all areas. In general, Black minority ethnic staff have poorer work experience than White staff – this has been the trend since the WRES was mandated 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 Trust's Race, Ethnicity and Cultural Heritage (REACH) staff network has just celebrated its 1st anniversary, and what a great year it has been! We welcomed our new Staff Network Chair, Audrey Chindiya, supported by Raji Thomas, Deputy Chair. The REACH network plays an important role in creating a safe and welcoming environment for all staff at Alder Hey. We believe that our staff networks play a key part in driving meaningful change and making a difference, as well as empowering people with the opportunity to grow personally and professionally. We want the REACH staff network to be a place where staff can feel safe to raise concerns, offering peer support, as well as working with the organisation to support the development of initiatives that will enhance the experiences of our staff. We are action focused and will support staff to have their voices heard so that we can make positive changes.

We welcome the Workforce Race Equality Standard (WRES) as this data provides us with a snapshot of what our staff from different race, ethnicity, and cultural heritage experience here at Alder Hey and we will work to support the improvement of these experiences. We are looking forward to the next 12 months as a network we will raise awareness of workforce diversity, challenge discrimination and promote positive change whilst providing support and networking opportunities to our members.



**Audrey Chindiya,
Chair of the REACH Staff**



**Raji Thomas,
Deputy Chair of the REACH
Staff Network**

Workforce Race Equality Standard Progress in 2023/24

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

- Increase in the percentage of BME staff employed at Alder Hey
- Improved in the number of BME staff entering the formal disciplinary process
- Improved in the number of BME staff accessing non-mandatory training
- The number of BME staff who have experienced harassment, bullying or abuse from patients, relatives or the public has decreased
- The number of BME staff experiencing harassment, bullying or abuse from staff has decreased
- The percentage difference between the organisation's Board voting membership and its overall workforce has increased
- The number of BME staff believing the Trust provides equal opportunities for career progression and promotion remains the same as 2022/23 data
- The number of BME staff who have experienced discrimination at work from a manager/team leaders/colleague remains the same as 2022/23 data

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

- Continuing to develop and grow the REACH staff network, welcoming a new Chair to the network
- Communications regarding celebration days and cultural events that have taken place in the Trusts e.g., Iftar during Ramadan, Wellbeing and Culture Week.
- Introduction of new EDI education programme, introduction of Lunch & Learn sessions which include cultural topics
- Working with the HR team to review the processes and practices to reduce inequality in the recruitment processes

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
4451	561 (12.6%)	3861 (86.74%)	29 (0.65%)

	BME			White			Missing or Unknown		
	2022	2023	2024	2022	2023	2024	2022	2023	2024
Cluster 1 (Bands 1 - 4)	3.3% (25)	3.4% (25)	4.6% (35)	95% (720)	96% (691)	95% (720)	0.93% (7)	0.83% (6)	0.4% (3)
Cluster 2 (Band 5 - 7)	4.2% (11)	5.2% (14)	6.9% (19)	95% (248)	94% (252)	92.4% (256)	0.76% (2)	0.74% (2)	0.7% (2)
Cluster 3 (Bands 8a - 8b)	6% (7)	4% (4)	4% (4)	90% (94)	94% (95)	95% (96)	4% (4)	2% (2)	1% (1)
Cluster 4 (Bands 8c – 9 & VSM)	2% (1)	9% (4)	13.5% (7)	96% (42)	91% (41)	84.6% (44)	2% (1)	0.00% (0)	1% (1)

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

In March 2024 the overall headcount for the Trust was 4451, this has increased from 2023 when the workforce was 4224. 12.6% of our workforce have declared that they are from a BME background (561 people), this compares to 485 in 2023. In the same reporting period, the number of white staff increased by 162. The number of people to have declared their ethnicity on the electronic staff record (ESR) has increased, with only 29 staff members unknown (0.65%). This is an increase of 76 staff members since 2023. The BME representation in non-clinical roles makes up 5.5% of the workforce. The non-clinical workforce group shows an increase across all clusters except Cluster 3 (Band 8a-8b) which is the same as 2023. This is encouraging, although the numbers remain small.

Table 2 presents the clinical cohort data. In clinical roles including medicine, BME representation was 15.2% overall. The data shows an increase in Cluster 2 (Band 5-7). This could be related to international recruitment programme and the employment of internationally educated staff. We have also seen a small increase in Cluster 5 (Medical and Dental staff, Consultants) and Cluster 7 (Medical and Dental staff, medical and Dental trainee grades). The BME representation amongst Clusters 6-7 is higher than that of White staff. We are working with the Organisational Development team, HR and the Race Ethnicity and Cultural Heritage (REACH) staff network to identify strategies that will provide our BME staff with opportunities to develop their leadership skills and progress their career at Alder Hey.

Whilst we have seen improvements which are encouraging, we acknowledge the need to do more if we are to achieve race equity within the workforce. There remain individuals who do not access ESR to record their demographic data and so there is a need to encourage more staff to do this so that we have a true composition of our workforce, and we can better support the needs of our staff.

	BME			White			Missing or Unknown		
	2022	2023	2024	2022	2023	2024	2022	2023	2024
Cluster 1 (Bands 1 - 4)	4.2% (22)	10.2% (61)	6.9% (40)	94.1% (491)	88.6% (526)	92.5% (533)	1.7% (9)	1.2% (7)	0.5% (3)
Cluster 2 (Band 5 - 7)	8.4% (146)	10.6% (193)	13.5% (264)	92.6% (1611)	88.7% (1617)	85.9% (1677)	1.0% (18)	0.67% (12)	0.6% (11)
Cluster 3 (Bands 8a - 8b)	3.1% (8)	3.7% (10)	3.8% (12)	95.7% (246)	95.6% (257)	95.5% (298)	1.2% (3)	0.7% (2)	0.6% (2)
Cluster 4 (Bands 8c – 9 & VSM)	8.3% (2)	8.0% (2)	6.9% (2)	91.6% (22)	92.0% (23)	93.1% (27)	0.0% (0)	0.0% (0)	0.0% (0)
Cluster 5 (Medical and Dental staff, Consultants)	37.2% (98)	38.7% (108)	39.5% (116)	61.5% (162)	59.9% (167)	59.2% (174)	1.1% (3)	1.4% (4)	1.4% (4)
Cluster 6 (Medical and Dental staff, non-consultant career grade)	5.3% (16)	72.5% (29)	57.1% (24)	40.0% (12)	22.5% (9)	40.5% (17)	6.7% (2)	5.0% (2)	2.4% (1)
Cluster 7 (Medical and Dental staff, Medical and Dental trainee grades)	4.7% (30)	57.9% (33)	65.5% (38)	38.1% (24)	36.8% (21)	32.8% (19)	14.3% (9)	5.3% (3)	1.7% (1)

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	2022/23	2023/24
2	Relative likelihood of White applicants being appointed from shortlisting across all posts compared to BME applicants	1.45	2.43

Table 3: Relative likelihood of appointment from shortlisting

As of March 2024, the likelihood ratio was 2.43 which is an increase from 2023 when the figure was 1.45. 517 (25.7%) out of 2011 white candidates were appointed from shortlisting compared to 62 (10.5%) out of 588 BME candidates. A ratio above 1.00 indicates that White candidates are more likely than Black and Minority ethnic candidates to be appointed from shortlisting. There were also 62 candidates shortlisted who did not declare their ethnicity and 28 of these individuals were appointed.

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	2022/23	2023/24
3	Relative likelihood of BME staff entering the formal disciplinary process compared to White staff	1.36	1.14

Table 4: Relative likelihood of entering formal capability process

The data from Table 4 indicates that the disparity in the likelihood of BME staff and White staff entering the formal disciplinary process has decreased over the past 12 months. More specifically, 2 (0.35%) out of 561 BME staff entered formal disciplinary proceedings compared to 12 (0.31%) out of 3861 White staff.

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	2022/23	2023/24
4	Relative likelihood of White staff accessing non-mandatory training and continuous professional development (CPD) compared to BME staff	1.77	1.0

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

White staff are no more likely to access non-mandatory training and continuous professional development than Black, minority ethnic staff.

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

WRES Indicator	DESCRIPTOR	BME 2022	White 2022	BME 2023	White 2023
5 NHS Staff Survey	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives, or the public in the last 12 months	24.63%	21.06%	21.82%	16.64%

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

The data in Table 6 illustrates that 21.82% of Black minority ethnic staff have experienced harassment, bullying or abuse from patients, relatives, or the public in the last 12 months, which is higher than white staff, of whom 16.64% have experienced this. This is a positive improvement from the previous year, although we still must work hard to ensure that no staff members experience harassment, bullying or abuse whilst at work. The trust acknowledges the urgency in tackling harassment, bullying and/or abuse of staff and we are working in collaboration with the Northwest BAME Assembly to implement their Anti-Racist Framework, working with our REACH staff network.

Indicator 6 – Percentage of staff experiencing harassment, bullying or abuse from staff

WRES Indicator	DESCRIPTOR	BME 2022	White 2022	BME 2023	White 2023
6 NHS Staff Survey	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months	19.80%	18.55%	17.95%	15.26%

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

There is a very slight decrease in the percentage of BME staff who have experienced harassment, bullying or abuse from their colleagues and although this behaviour remains unacceptable it is a move in the right direction. We will continue to work hard to prevent our staff from experiencing any form of harassment, bullying or abuse. We are working hard to foster a culture where staff feel safe and have a sense that they belong at Alder Hey.

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

WRES Indicator	DESCRIPTOR	BME 2022	White 2022	BME 2023	White 2023
7 NHS Staff Survey	Percentage of staff believing that the organisation provides equal opportunities for career progression and/or promotion	49.26%	61.14%	49.64%	63.60%

Table 8: Opportunities for career progression or promotion

The data in Table 8 indicates that 49.64% of Black minority ethnic staff believe that Alder Hey provides them with equal opportunities for career progression or promotion compared to 63.60% of White staff. We intend to explore new opportunities for staff progression and or internal promotion processes to equalise experiences.

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

WRES Indicator	DESCRIPTOR	BME 2022	White 2022	BME 2023	White 2022
8 NHS Staff Survey	Percentage of staff experienced discrimination at work from manager/team leader or other colleagues in the last 12 months	12.5%	6.1%	12.64%	4.5%

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

The data in Table 9 reveals that 12.64% of Black minority ethnic staff at Alder Hey have directly experienced discrimination at work from either their manager, team leader or colleagues in comparison to 4.5% of White staff. The trust is committed to eliminating harassment, bullying and/or abuse and over the next 12 months and we will continue to work with the REACH staff network to better understand the data. By implementing the Northwest BAME Assembly Anti-Racist Framework, we will develop strategies to address unacceptable behaviour and share best practice.

Indicator 9 – Percentage difference between Board voting membership and its overall workforce

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

WRES Indicator	DESCRIPTOR	BME 2022/23	White 2022/23	BME 2023/24	White 2023/24
9 Board Representation	Percentage difference between the organisation’s Board voting membership and its overall workforce	10.7%	-15.3%	16.0%	-22.0%

Table: 10 Board representation

The percentage difference between the organisation’s Board voting membership and its overall workforce has increased for Black minority ethnic staff. The current percentage of BME Board members is 22.2% (4) in comparison to 72.2% (13) White Board members. There are 28.6% (4) BME voting Board members compared to 64.3% (9) White voting Board members and 7.1% (1) voting Board member who has not declared their ethnicity.

‘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 means that the percentage of BME members on the board of directors is higher than in the workforce, and a negative value means that the percentage of BME members on the board of directors is lower than in the workforce’

Conclusions and next steps

The report provides an assessment of the Trust's current position regarding the experiences of Black minority ethnic staff working at Alder Hey. Based on the 2023/24 data presented in this report, the following have been identified as areas that the trust must focus on for improvement:

- Increasing overall workforce representation
- Increasing the number of candidates appointed from shortlisting
- Career progression in all non-clinical roles
- Career progression in clinical roles (cluster 3-4)
- Board representation (overall and voting members)

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 2023/24

Action	Progress	Next Steps	Update	Progress
<p>Ensure all our recruitment practices and processes are Inclusive and staff have appropriate training and support Indicator 2</p>	<ul style="list-style-type: none"> We have reviewed our EDI statement We have developed and introduced Inclusive interview questions Reviewed and revised Job adverts 	<ul style="list-style-type: none"> Develop Inclusive recruitment training for line managers working with HR and L&D which will include unconscious bias Introduce Inclusive Panel Champions Programme to support recruitment panels (linked to HI action 2) 	<p>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.</p> <p>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 new 'Management Essentials' Introduction to EDI programme, although we want to develop a more specific training package which concentrates specifically on recruitment.</p>	<p>Ongoing</p>
<p>Provide inclusive career progression opportunities for development Indicator 1,9</p>	<ul style="list-style-type: none"> Work with the REACH staff network to proactively address areas of concern, improving our understanding about 	<ul style="list-style-type: none"> Career conversations are embedded into staff annual appraisal process 	<p>The PDPR process includes career conversation L&D provide training form managers to support this aspect.</p> <p>We have launched our 'Management Essentials' EDI</p>	

	<p>the experiences of our BME staff</p> <ul style="list-style-type: none"> • Continue to work closely with our Freedom to Speak Up Guardian • Continue to promote and support inclusive access to training, learning and development opportunities • Work with OD to develop a bespoke training opportunity for global majority staff 	<ul style="list-style-type: none"> • Develop inclusive leadership training programme (link to HI action 1) • 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 (link to HI action 5) 	<p>training which introduces Inclusive leadership. We will explore a specific Inclusive leadership programme following on from feedback from EDI training.</p> <p>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.</p> <p>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 and the data is currently being analysed.</p> <p>The head of EDI and OD are working together to develop</p>	<p>On Going</p>
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		<ul style="list-style-type: none"> • Develop a talent management plan looking to improve the diversity of executive and senior leadership teams (link to HI action 2) • Review starter, leaver data triangulating this with exit interviews to identify any themes related to career progression (link to HI action 2) 	<p>leadership opportunities for staff from the global majority. This is ongoing and will support the development of a talent management plan.</p> <p>A new exit questionnaire has been developed by HR and will look to identify any themes that are related Inclusion. The head of EDI will work with HR to review the data linking this to initiatives that support career progression.</p>	<p>Ongoing</p>
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