

Countess of Chester Hospital NHS Foundation Trust

Workforce Race Equality Standard Report 2025

The table below shows the Trusts 2024/25 performance against each of the nine WRES indicators, compared to 2023/24 data at national, and Trust level. The RAG rating in the columns illustrates progress or deterioration in the Trust position as appropriate.

Indicator	National average 2023 /2024	COCH 2023 /2024	COCH 2024 /2025	Difference between Trust 24/25 compared with 23/24	Difference between Trust 24/25 compared with national average 23/24.
1. Percentage of staff from racially minoritised groups.	28.6%	16.6%	18%	1.4%	-10.6%
2. Relative likelihood of white applicants being appointed from shortlisting compared to applicants from ethnic minority groups	1.27	1.47	1.61	- 0.14	- 0.34
3. Relative likelihood of staff from ethnic minority groups entering the formal disciplinary process compared to white staff	1.25	0.29	0.54	0.25	0.71
4. Relative likelihood of white staff accessing non-mandatory training and CPD compared to staff from ethnic minority groups.	1.25	0.80	0.94	0.14	0.31
5. Percentage of staff from ethnic minority groups experiencing harassment, bullying or abuse from patients, relatives, or the public in the last 12 months	23%	34%	34.5%	-0.5%	-11.5%
6. Percentage of staff from ethnic minority groups experiencing harassment bullying or abuse from staff in the last 12 months.	21.5%	32.4%	27.8%	4.6%	-6.3%
7. Percentage of staff from ethnic minority groups believing the Trust provides equal opportunities for career progression or promotion	49.7%	35.1%	37.7%	2.6%	-12%

8. Percentage of staff from ethnic minority groups experiencing discrimination at work from manager/team leader/other colleagues in the last 12 months	15.7%	27.5%	22.6%	4.9%	6.9%
9. Percentage difference between the Trust's Board membership, its overall workforce	16.5%	-17%	-18%	- 1%	28.5%

The Trusts 24/25 WRES report above shows an in year improvement against 5 out of the 9 indicators, indicating that work undertaken is continuing to have a positive impact. This is demonstrated by the green cells in the column titled 'Difference between Trust 24/25 compared with 23/24'

Previous years actions contributing to these improved indicators include the introduction of the Race Ethnicity And Cultural Heritage (REACH) Network (formerly BAME network), delivery of EDI Awareness/Training to groups across the Trust, delivery of the Elevate programme, and continued Trust investment in continuing professional development, particularly in relation to international nurse colleagues. The latter being a significant factor in the Trust position of above national average in relation to relative likelihood of white staff accessing non-mandatory training and CPD compared to staff from ethnic minority groups (indicator 4 in above table)

In relation to Relative likelihood of staff from ethnic minority groups entering the formal disciplinary process compared to white staff (indicator 3 in the above table), the Trusts position is significantly different from the national average in that white staff are more likely to enter the formal disciplinary process compared to staff from ethnic minority groups. It is suggested that this is further monitored in 25/26 to determine contributing factors.

When compared to the national average of other Trusts (previous year results), the Trust continues to be below average across 7 out of 9 indicators, illustrating that there is still significant work to do. This is demonstrated by the red cells in the last column titled 'Difference between Trust 24/25 compared with national average 23/24'.

From analysis of the above, it is recommended that the following high level actions continue to be taken forward in 25/26.

- Strengthen Inclusive Recruitment approaches, undertaking targeted recruitment for professions/bandings that currently have significant underrepresentation of ethnic minority groups.
- Work with the Executive Leadership Team to further develop plans to increase board representation
- Continue work in relation to reducing ethnic minority staff experience of harassment, bullying or abuse from patients

This report has been approved for publication via the People Committee in October 25.