North Tees and Hartlepool
NHS Foundation Trust

NHS Workforce Race Equality Standard 2026

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Better
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1. Introduction

The Workforce Race Equality Standard (WRES) programme, established in 2015, requires NHS organisations to report annually against nine indicators of race equality and to demonstrate continuous improvement through targeted action planning to address the root causes of discrimination.

Inequality in any form is inconsistent with our organisational values. Evidence demonstrates that the fair and equitable treatment of staff is closely linked to improved clinical outcomes and enhanced patient experience.

This report represents the trust's eleventh WRES submission. It highlights a number of positive developments, while also identifying areas where further detailed analysis is required to fully understand the findings, particularly in relation to staff survey feedback.

The trust remains committed to addressing racial discrimination and reducing disparities in experience, opportunity and progression across our diverse workforce. A key enabler of this work is the robust analysis and presentation of workforce data to key workstreams, supporting the identification of priorities and the development of targeted actions to drive improvement.

2. Trust requirements

In order to meet the requirements for 2026, the trust is required to publish our WRES data no later than 31 May 2026 to NHS England via the Data Collection Framework (DCF) portal.

Work will then commence to produce the trust's annual WRES report which will be published on the trust's internet site no later than 31 October 2026.

3. WDES indicators 2026

A summary of the results for North Tees and Hartlepool NHS Foundation Trust is shown in the table below. This includes comparison of the trust's results covering a five-year period (2022 to 2026).

The baseline data has been extracted from ESR, workforce databases and the Trac recruitment system to calculate a response to each of the nine WRES indicators.

North Tees and Hartlepool - WRES Indicators 2026			2022	2023	2024	2025	2026
1	Percentage of BME staff	Overall	11.4%	12.8%	14.33%	16.06%	**16.50%**
		VSM	0.0%	0.0%	0.00%	0.00%	**0.00%**
2	Relative likelihood of white applicants being appointed from shortlisting across all posts compared to BME applicants		1.43	2.12	2.4	2.96	**2.54**
3	Relative likelihood of BME staff entering the formal disciplinary process compared to white staff		0.88	0.78	0.99*	0.64	**0.67**
4	Relative likelihood of white staff accessing non-mandatory training and continuous professional development (CPD) compared to BME staff		0.96	1.1	0.91	0.84	**0.78**
			2021	**2022**	**2023**	**2024**	**2025**
5	Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months	BME	34.9%	30.7%	28.3%	33.9%	**32.7%**
		White	26.2%	24.8%	21.8%	21.2%	**22.6%**
6	Percentage of staff experiencing harassment, bullying or abuse from staff in the last 12 months	BME	30.1%	26.9%	22.8%	22.4%	**23.0%**
		White	18.7%	18.6%	16.1%	16.9%	**17.7%**
7	Percentage of staff believing that the Trust provides equal opportunities for career progression or promotion	BME	48.2%	48.1%	50.6%	47.6%	**47.6%**
		White	64.8%	64.9%	63.7%	58.4%	**56.6%**
8	Percentage of staff personally experiencing discrimination at work from a manager/team leader or other colleagues	BME	16.8%	12.6%	13.7%	15.4%	**16.3%**
		White	5.2%	4.7%	5.2%	4.7%	**4.7%**
			2022	**2023**	**2024**	**2025**	**2026**
9	BME Board membership	BME	7.1%	6.3%	0.0%	0.0%	**0.0%**

*Remains positive as 1.00 would indicate equal experience of both White and BME Staff

4. Key findings for 2026

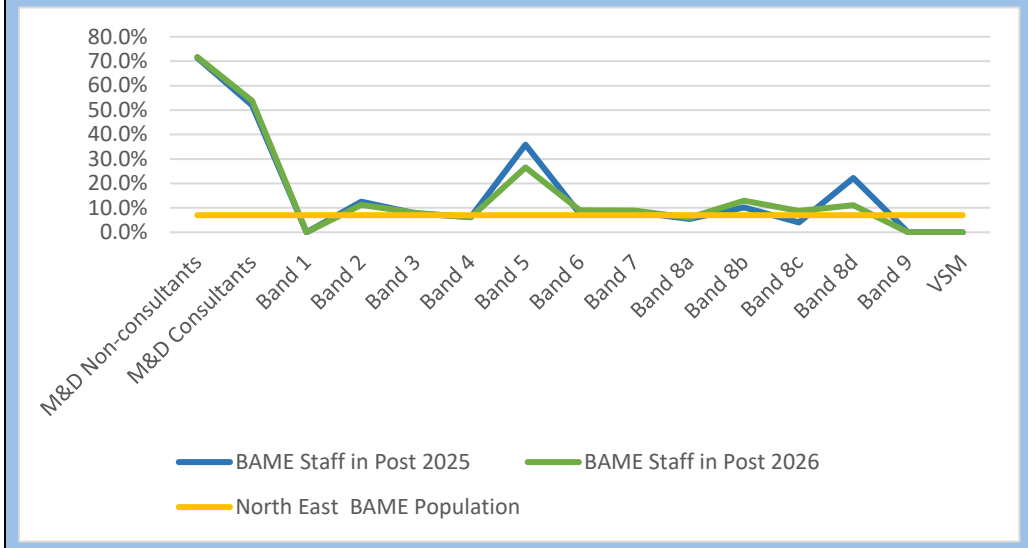
The key findings in respect of the nine WRES indicators for 2026 are summarised below.

We are currently only able to undertake benchmarking for those areas which relate to the staff survey (indicators 5-8). Full benchmarking information is published by the national WRES team and this is expected for March 2027.

The data for the UK Census which took place in 2021 is now available for analysis and reporting and this provides us with a more accurate picture of the UK's ethnicity profile, which can also be broken down by region and local authority area.

- UK Population: 81.7% white and 18.3% BAME
- North East Population: 93% white and 7% BAME
- Stockton Population: 92% white and 8% BAME
- Hartlepool Population: 96.5% white and 3.5% BAME

Indicators 1 and 9 – Representation across the organisation



Representative workforce across all protected characteristics at all levels.

This information is obtained from the trust's ESR system as at 31 March 2026.

There has been an increase in the number of global majority staff employed by the trust for 2025 - an increase of 0.44% to 16.50%. When compared to the North East's ethnicity data (2021 census) the trust has higher representation within the overall workforce, however this is not reflected across all grades.

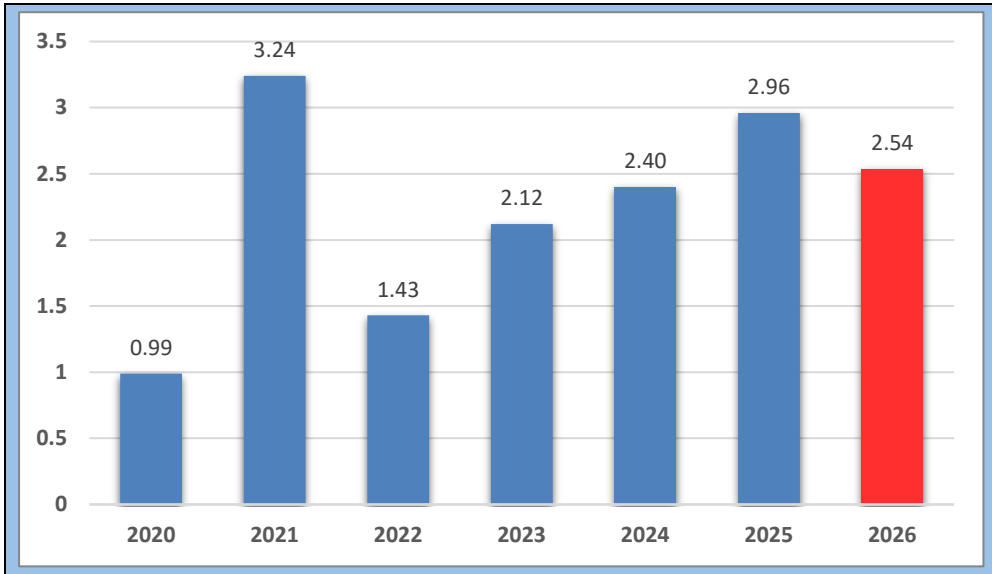
Consistent with previous years, there is higher representation within the medical staffing group and at Band 2 and Band 5.

Representation of BME at Board and senior management levels.

For reporting purposes, we are only able to report on Board members who are directly employed by North Tees and Hartlepool Foundation Trust (NTH)

Representation at Board level is under represented at 0%, as compared to the trust's overall global majority workforce of 16.50%. Bands 8a, 8b and 8c have all seen an increase in representation compared to the previous year. Band 8d has seen a decrease in representation and there continues to be no representation at VSM level.

Indicator 2 – Likelihood of staff being appointed from shortlisting



Equity of experience.

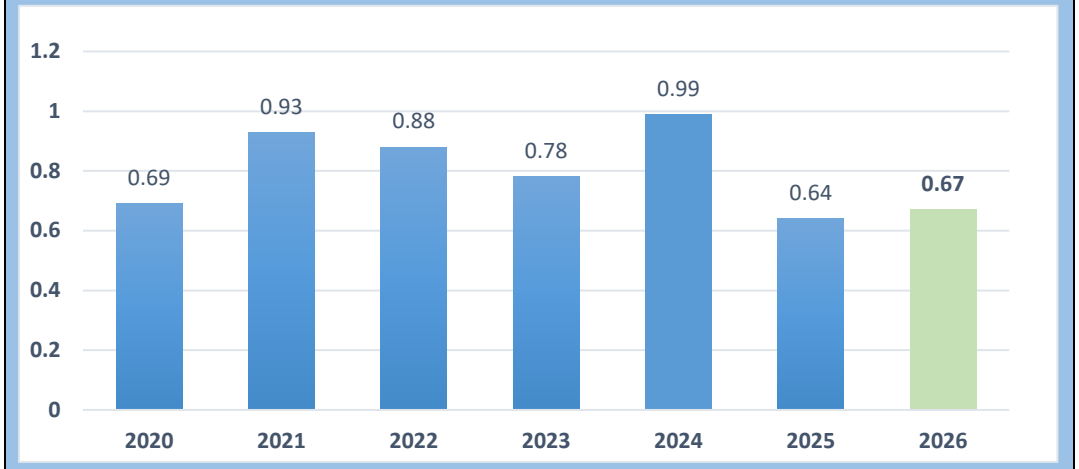
This information is obtained from the trust's Trac Recruitment System for the period 1 April 2025 to 31 March 2026 and considers a ratio showing the likelihood of being appointed following shortlisting. A figure of 1 indicates equal experience between white and global majority applicants.

Global majority applicants are less likely to be appointed following shortlisting than white applicants, however there has been a positive decrease from the figure reported in 2025.

Work will continue to focus on inclusive interview panels and support for internal applicants.

(A figure above 1:00 indicates that white candidates are more likely than BME candidates to be appointed from shortlisting)

Indicator 3 – Likelihood of staff entering formal disciplinary process



Equality of experience.

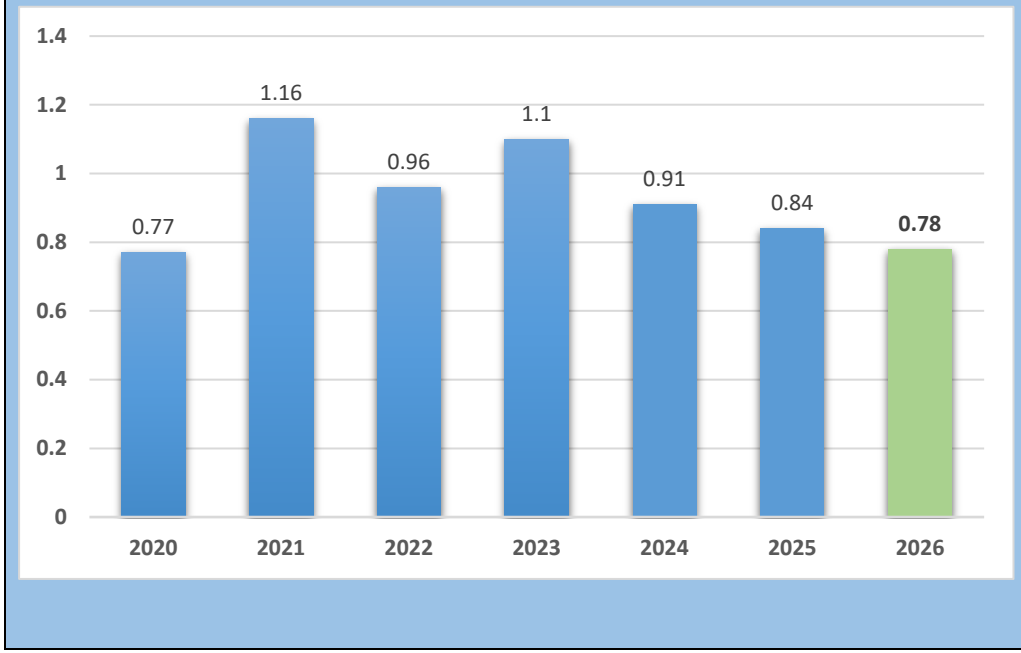
This information is obtained from the trust's workforce databases and considers a ratio showing the likelihood of entering formal disciplinary processes. A figure of 1 indicates equal experience between white and global majority staff.

The information for this metric is calculated over a 12-month period, with a total of 2 cases recorded, as compared to 15 cases involving staff from a white ethnicity.

The trust has consistently reported that global majority colleagues are less likely to enter formal disciplinary processes and this figure is reported at 0.67 for 2026.

(A figure above 1:00 indicates that BME staff are more likely than ehite staff to enter the formal disciplinary process).

Indicator 4 – Likelihood of staff accessing non-mandatory training and continuous personal development



Belief in equal opportunities.

This information is obtained from the trust's ESR system for the period 1 April 2025 to 31 March 2026.

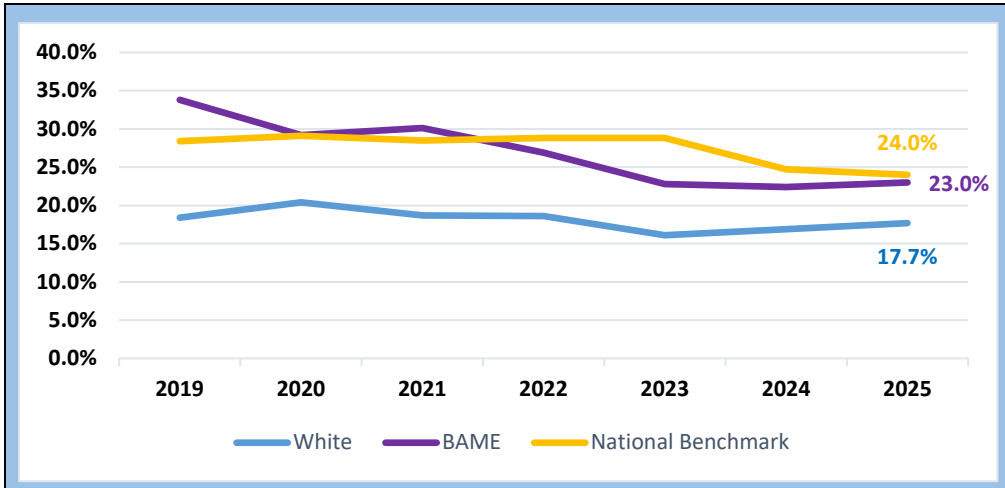
For this reporting cycle, global majority staff are more likely to access non-mandatory training and continuous personal development as compared to white staff.

The ratio continues to remain below 1.0, and the overall differential remains low and does not indicate any real concern in this area.

The % of global majority staff accessing training has decreased from 81.5% in 2025, to 77.9% in 2026. The number of white staff accessing training has also decreased from to 68.6% in 2025, to 61.3% in 2026.

(A figure above 1:00 indicates that white staff are more likely than BME staff to access non-mandatory training and CPD)

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



Staff survey key findings - B&H Public

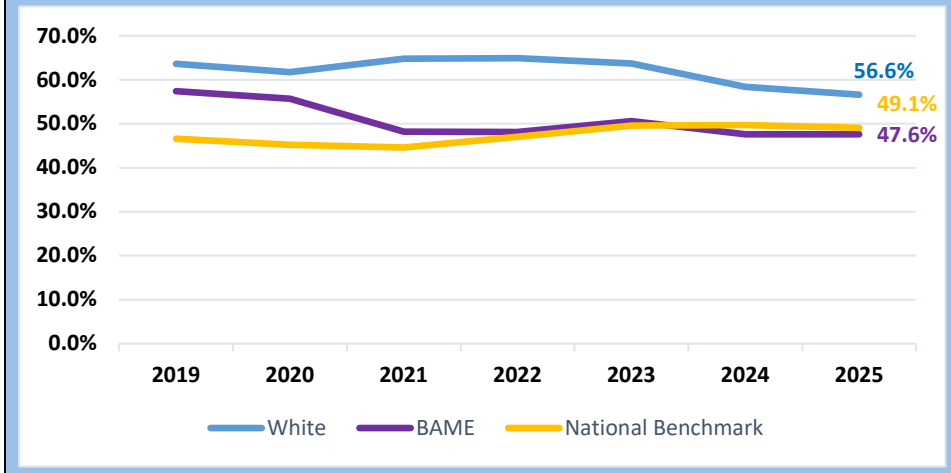
This information is derived from the 2025 staff survey.

Staff survey results show a positive decrease in the number of global majority staff experiencing harassment, bullying and abuse from patients, relatives/public (32.7% as compared to 33.9% for 2024).

Global majority staff continue to be more likely to experience harassment, bullying/abuse from patients than white staff and the gap is reported as 10.6%.

Staff are required to log all incidents of service user violence and harassment via Inphase. The trust's Keeping People Safe group reviews this information to identify trends and this includes analysis of related themes including race.

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



Staff survey key findings - B&H Staff

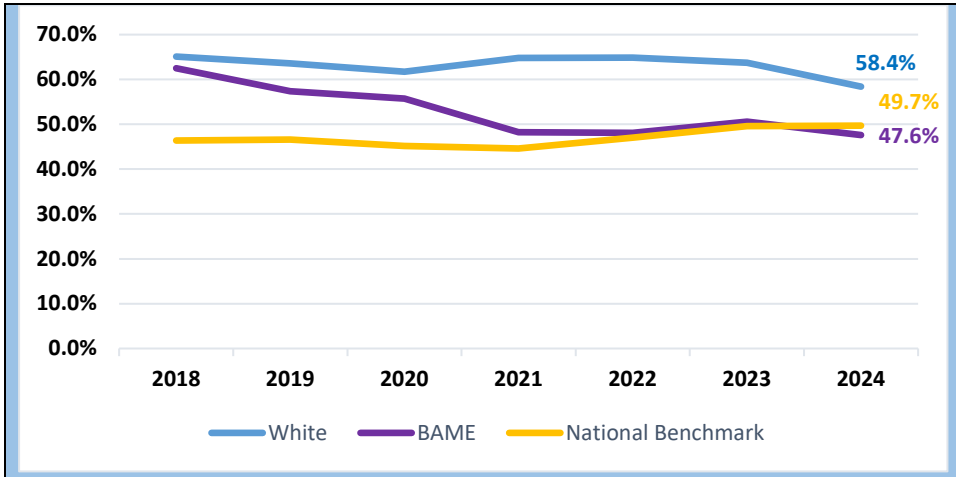
This information is derived from the 2025 staff survey.

Staff survey results show a slight increase in the number of global majority staff experiencing harassment, bullying and abuse from staff (23.0% compared to 22.4% for 2024).

Global majority staff continue to be more likely to experience harassment, bullying/abuse from colleagues than white staff and the gap is reported as 5.3%.

It is important that our staff feel supported to report concerns regarding bullying and harassment and all cases are logged and monitored by the workforce team.

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



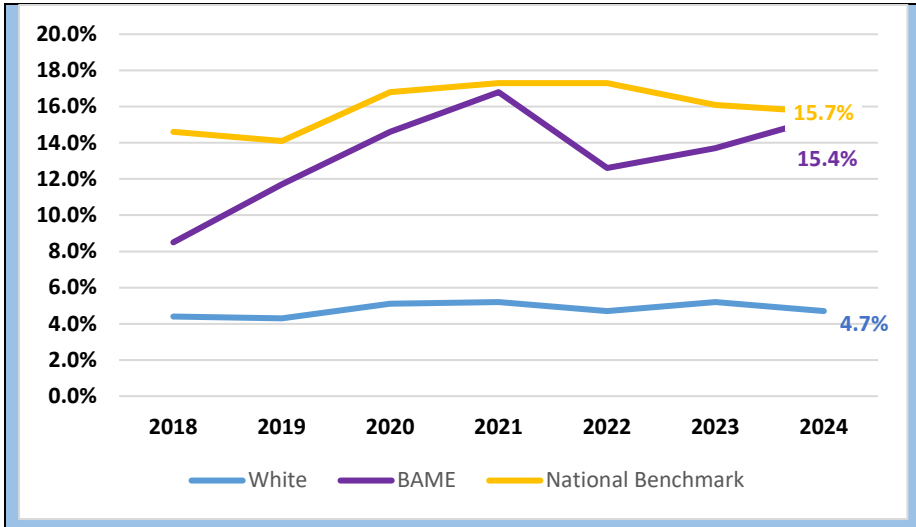
Staff Survey key findings - equal opportunities

This information is derived from the 2025 staff survey.

The results have remained static in terms of the % of global majority staff who believe the trust provides equal opportunities for career progression/promotion (47.6% as compared to 47.6% in 2024).

As in previous years, white staff continue to report a higher belief in equal opportunities than global majority staff. The gap in experience has narrowed and is currently reported as 9.0% when compared to 10.8% in 2024.

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



Staff Survey key findings - discrimination

This information is derived from the 2025 staff survey.

There has been an increase in the % of global majority staff who have reported experience of discrimination at work (16.3% as compared to 15.4% in 2024). There is a continued gap in experience, with global majority staff reporting a poorer experience when compared to white staff

It is important that our staff feel supported to report concerns regarding bullying and harassment and all cases are logged and monitored by the workforce Team.

5. Conclusion and next steps

Our actions to improve the trust's Workforce Race Equality Standard (WRES) metrics are closely aligned with the Group People values, particularly *Respect*, and underpin our ongoing commitments as set out in the NHS People Plan.

We are pleased to report an improvement in our WRES metrics for 2026. This progress reflects the sustained delivery of our Equality, Diversity and Inclusion (EDI) programme, alongside targeted investment in data analysis and the implementation of focused interventions designed to enhance the experience of staff across all protected characteristics.

We will continue to strengthen and embed existing good practice across the trust. This includes maintaining fair and transparent recruitment processes, delivering training in civility and unconscious bias, and proactively promoting leadership and development opportunities to ensure equitable access for all members of our workforce. We continue to raise awareness of the 'See me First Campaign'. The campaign aims to promote race equality, inclusion and anti-discriminatory practice by encouraging staff to make a visible pledge to support colleagues from Global Majority backgrounds and to challenge discrimination when it occurs.

The trust remains fully committed to advancing racial equality. While a number of initiatives have been implemented that are expected to positively impact this agenda, we recognise that achieving meaningful and lasting change requires a significant and sustained cultural shift across the organisation. Although changes in workforce ethnicity profiles will take time to materialise, we are encouraged by the year-on-year increase in the representation of global majority staff within the trust.

It is equally important that we continue to support and develop our staff networks, ensuring that the voices of global majority colleagues are actively heard and play a central role in shaping improvements to the overall staff experience.

This report provides a high-level overview based on current workforce metrics. The next phase will focus on engagement with staff to share these findings and collaboratively develop a targeted action plan, which will inform the WRES Annual Report to be submitted in October 2026.