Oxford Health NHS FT

Equality, Diversity & Inclusion

Workforce Race Equality Standard (WRES) 2026

To find out more about what Oxford Health NHS FT is doing to be a fair and equal employer and care provider, please contact:
EqualityandInclusion@oxfordhealth.nhs.uk

Implementing the Workforce Race Equality Standard (WRES) is a requirement for NHS commissioners and NHS healthcare providers including independent organisations, through the NHS standard contract.

The NHS Equality and Diversity Council announced on 31 July 2014 that it had agreed action to ensure employees from black and minority ethnic (BME) backgrounds have equal access to career opportunities and receive fair treatment in the workplace.

This is important because studies show that a motivated, included and valued workforce helps deliver high quality patient care, increased patient satisfaction and better patient safety.

In April 2015, after engaging and consulting with key stakeholders including other NHS organisations across England, the WRES was mandated through the NHS standard contract, starting in 2015/16. From 2017, independent healthcare providers are required to publish their WRES data.

The first WRES report, was published in June 2016, followed by the 2016 WRES report on 19 April 2017.

NHS providers are expected to show progress against a number of indicators of workforce equality, including a specific indicator to address the low numbers of BME board members across the organisation.

NHS England » NHS Workforce Race Equality Standard

Black, Asian and minority ethnic (BME);

Throughout this report, we use the term Black, Asian and minority ethnic (BME), to refer to those members of the NHS workforce who are not white. As set out in the workforce race equality standard (WRES) technical guidance, the definitions of "Black, Asian and minority ethnic" and "white" used in the WRES have followed the national reporting requirements of ethnic category in the NHS data model and dictionary and NHS digital data. **We are aware that terminology is being reviewed and we will follow NHS guidance as it is produced.

Data Source;

Indicators 1,2,3,4 & 9 Anonymous data is derived from our secure and confidential electronic staff record system (known as ESR).

Indicators 5,6,7, & 8 are derived from the annual NHS National Staff Survey.

Distance from equity;

For likelihood questions (indicators 2,3 & 4), this refers to how far the number is from 1.

For other indicators (indicators 1,5,6,7,8 & 9), it refers to the percentage difference between BME and White experiences.

For example, if 45% of White staff believe the organisation provides equal opportunity for career progression, then it would be equitable if 45% of BME staff felt the same way. here, the greater the percentage difference, the greater the inequity.

Oxford Health NHS Foundation Trust

1 = Indicator 1

2 = Indicator 2

3 = Indicator 3

4 = Indicator 4

5 = Indicator 5

6 = Indicator 6

7 = Indicator 7

8 = Indicator 8

9 = Indicator 9

Indicator 1

Percentage of staff in each of the AfC bands 1 to 9 or medical and dental subgroups and VSM (including executive Board members) compared with the percentage of staff in the overall workforce disaggregated by: non-clinical staff & clinical staff (non-medical staff, medical and dental staff).

Indicator 2

Relative likelihood of staff being appointed from shortlisting across all posts.

Indicator 3

Relative likelihood of staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation.

Indicator 4

Relative likelihood of staff accessing non-mandatory training and CPD.

Indicator 5

Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months.

Indicator 6

Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.

Indicator 7

Percentage of staff believing that the organisation provides equal opportunities for career progression or promotion.

Indicator 8

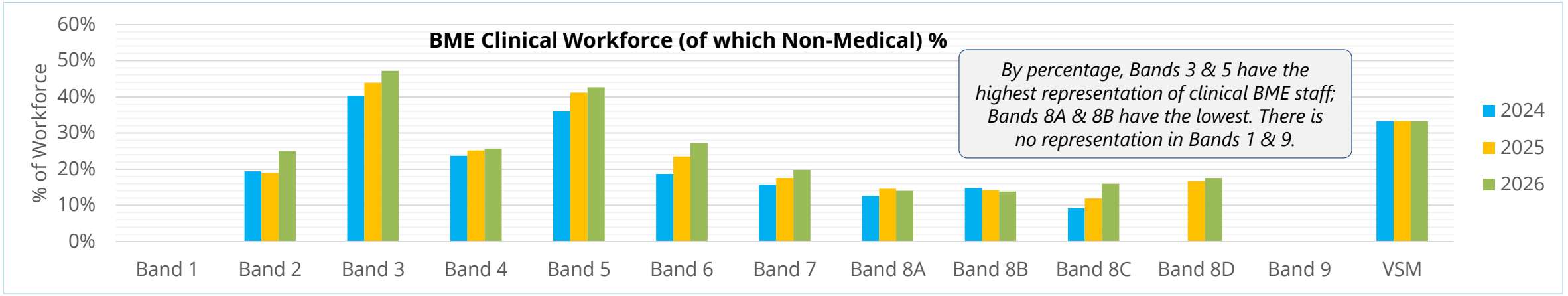
Percentage of staff experiencing discrimination at work from manager / team leader or other colleagues in last 12 months

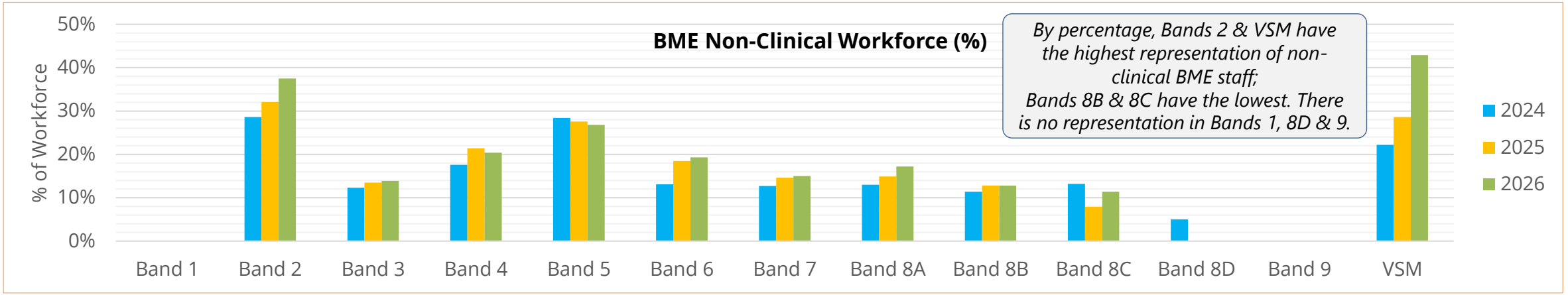
Indicator 9

Percentage difference between the organisations' Board membership and its overall workforce disaggregated:

- By voting membership of the Board
- By executive membership of the Board

As of 31st March 2026, the proportion of BME staff increased by 2.20%, from 25.77% to 27.97%.

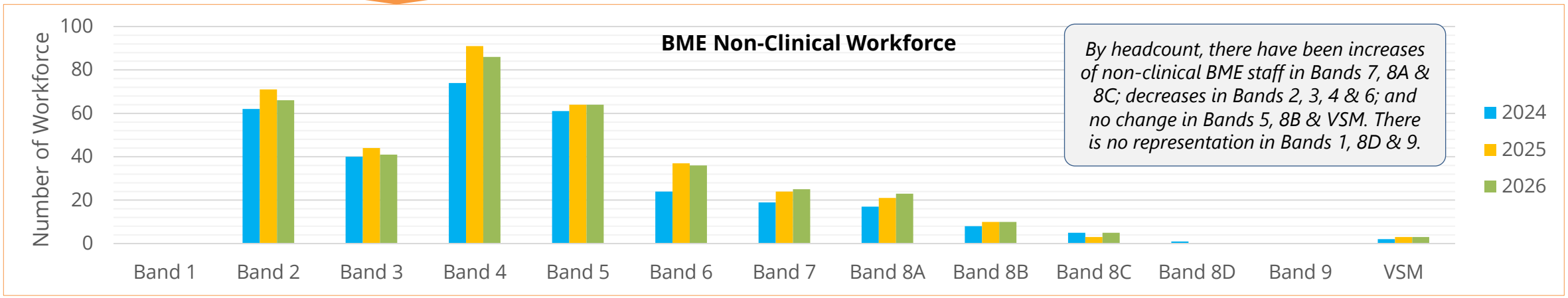




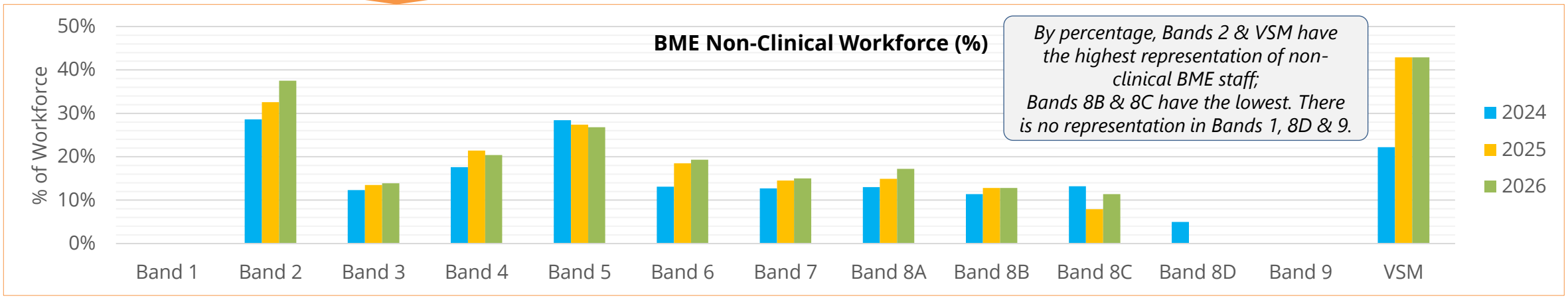
Indicator number and description	Results 2025/26	Results 2024/25	Change	Distance from equity
Indicator 1: BME representation in the workforce by pay band				
Non-clinical	20.19%	19.80%	+0.39%	–
Clinical	30.58%	28.04%	+2.54%	–
Medical & Dental	26.63%	24.06%	+2.57%	–
Indicator 2: Likelihood of appointment from shortlisting				
Likelihood ratio (White : BME)	1.60	*Due to historical data quality issues, comparable data for previous years is unavailable.*		0.60
Indicator 3: Likelihood of BME entering formal disciplinary proceedings				
Likelihood ratio (BME : White)	3.31	4.59	-1.28	2.31
Indicator 4: Likelihood of BME taking non-mandatory training				
Likelihood ratio (White : BME)	0.86	0.99	-0.13	0.14
Indicator 9: Difference between BME representation on the Board and the overall workforce				
Overall workforce	27.97%	25.77%	+2.20%	–
Board	23.53%	25.00%	-1.47%	–

Indicator number and description	Results 2025/26	Results 2024/25	Change	Distance from equity	National Average
Indicator 5: Harassment, bullying or abuse from patients, relatives or the public in last 12 months					
BME	31.4%	31.8%	-0.4%	12.2%	29.2%
White	19.2%	19.8%	-0.6%		23.5%
Indicator 6: Harassment, bullying or abuse from staff in last 12 months					
BME	17.9%	20.1%	-2.2%	3.3%	23.4%
White	14.6%	15.2%	-0.6%		19.6%
Indicator 7: Career progression					
BME	57.2%	*Note: Due to changes in the question wording, previous years' results for WRES indicator 7 (Q15) are not reported.*		3.6%	49.7%
White	60.8%				55.8%
Indicator 8: Discrimination from manager / team leader or other colleagues in last 12 months					
BME	11.8%	12.5%	-0.7%	5.7%	13.9%
White	6.1%	6.0%	-0.1%		6.5%

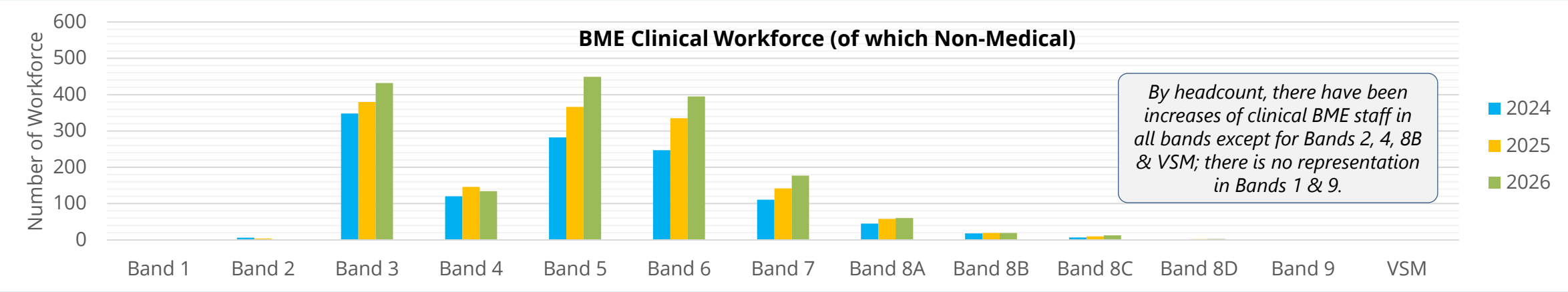
Non-Clinical Workforce	BME 2024	BME 2025	BME 2026	White 2024	White 2025	White 2026	Unknown 2024	Unknown 2025	Unknown 2026
Band 1	0	0	0	1	1	1	0	0	0
Band 2	62	71	66	138	131	97	17	16	13
Band 3	40	44	41	279	275	250	7	6	5
Band 4	74	91	86	337	327	328	9	8	8
Band 5	61	64	64	151	165	171	3	5	4
Band 6	24	37	36	144	153	143	15	10	8
Band 7	19	24	25	122	130	132	9	11	10
Band 8A	17	21	23	110	120	111	4	0	0
Band 8B	8	10	10	61	67	67	1	1	1
Band 8C	5	3	5	33	35	39	0	0	0
Band 8D	1	0	0	19	17	18	0	0	0
Band 9	0	0	0	7	8	7	1	1	2
VSM	2	3	3	7	4	4	0	0	0



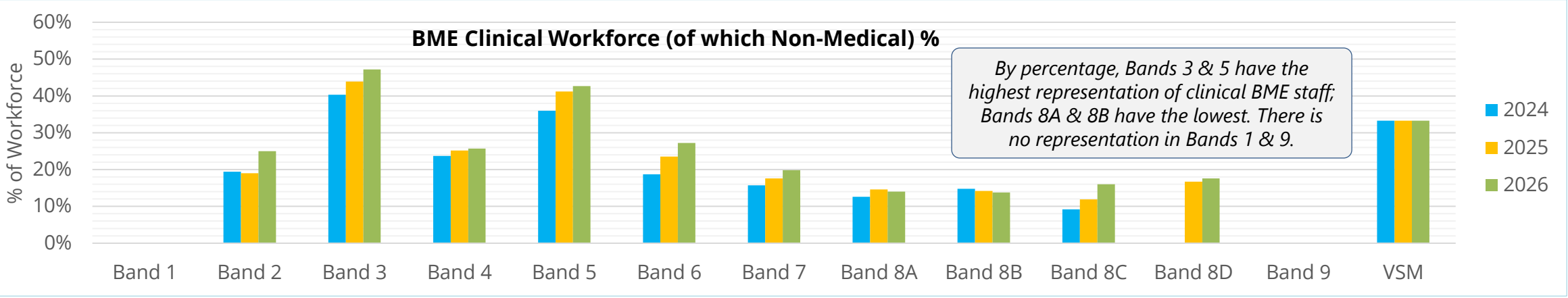
Non-Clinical Workforce	BME 2024	BME 2025	BME 2026	White 2024	White 2025	White 2026	Unknown 2024	Unknown 2025	Unknown 2026
Band 1	0.0%	0.0%	0.0%	100.0%	100.0%	100.0%	0.0%	0.0%	0.0%
Band 2	28.6%	32.6%	37.5%	63.6%	60.1%	55.1%	7.8%	7.3%	7.4%
Band 3	12.3%	13.5%	13.9%	85.6%	84.6%	84.5%	2.1%	1.8%	1.7%
Band 4	17.6%	21.4%	20.4%	80.2%	76.8%	77.7%	2.1%	1.9%	1.9%
Band 5	28.4%	27.4%	26.8%	70.2%	70.5%	71.5%	1.4%	2.1%	1.7%
Band 6	13.1%	18.5%	19.3%	78.7%	76.5%	76.5%	8.2%	5.0%	4.3%
Band 7	12.7%	14.5%	15.0%	81.3%	78.8%	79.0%	6.0%	6.7%	6.0%
Band 8A	13.0%	14.9%	17.2%	84.0%	85.1%	82.8%	3.1%	0.0%	0.0%
Band 8B	11.4%	12.8%	12.8%	87.1%	85.9%	85.9%	1.4%	1.3%	1.3%
Band 8C	13.2%	7.9%	11.4%	86.8%	92.1%	88.6%	0.0%	0.0%	0.0%
Band 8D	5.0%	0.0%	0.0%	95.0%	100.0%	100.0%	0.0%	0.0%	0.0%
Band 9	0.0%	0.0%	0.0%	87.5%	88.9%	77.8%	12.5%	11.1%	22.2%
VSM	22.2%	42.9%	42.9%	77.8%	57.1%	57.1%	0.0%	0.0%	0.0%



Clinical Workforce	BME 2024	BME 2025	BME 2026	White 2024	White 2025	White 2026	Unknown 2024	Unknown 2025	Unknown 2026
Band 1	0	0	0	0	0	0	0	0	0
Band 2	6	4	1	24	16	3	1	1	0
Band 3	348	380	432	484	461	453	32	25	30
Band 4	120	146	134	370	417	373	17	17	14
Band 5	282	366	449	449	486	555	52	36	47
Band 6	247	335	395	995	1031	1017	79	57	40
Band 7	111	142	177	582	646	696	16	20	21
Band 8A	45	58	60	297	321	350	16	18	18
Band 8B	18	19	19	98	111	115	6	4	4
Band 8C	7	10	13	69	74	68	0	0	0
Band 8D	0	2	3	10	8	12	2	2	2
Band 9	0	0	0	2	2	2	0	0	0
VSM	1	1	1	2	2	2	0	0	0

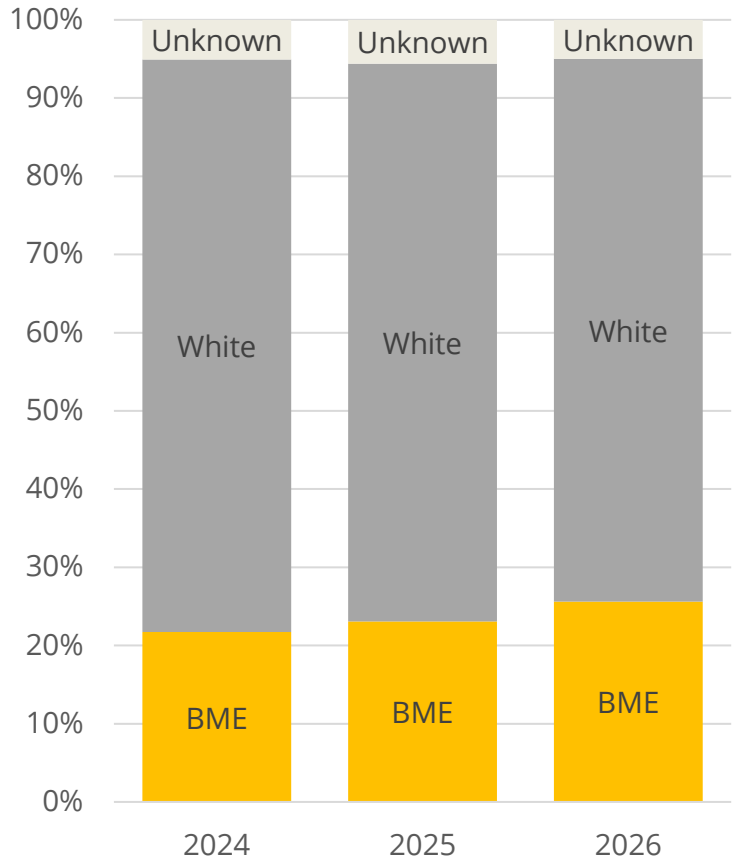


Clinical Workforce	BME 2024	BME 2025	BME 2026	White 2024	White 2025	White 2026	Unknown 2024	Unknown 2025	Unknown 2026
Band 1	-	-	-	-	-	-	-	-	-
Band 2	19.4%	19.0%	25.0%	77.4%	76.2%	75.0%	3.2%	4.8%	0.0%
Band 3	40.3%	43.9%	47.2%	56.0%	53.2%	49.5%	3.7%	2.9%	3.3%
Band 4	23.7%	25.2%	25.7%	73.0%	71.9%	71.6%	3.4%	2.9%	2.7%
Band 5	36.0%	41.2%	42.7%	57.3%	54.7%	52.8%	6.6%	4.1%	4.5%
Band 6	18.7%	23.5%	27.2%	75.3%	72.5%	70.0%	6.0%	4.0%	2.8%
Band 7	15.7%	17.6%	19.8%	82.1%	80.0%	77.9%	2.3%	2.5%	2.3%
Band 8A	12.6%	14.6%	14.0%	83.0%	80.9%	81.8%	4.5%	4.5%	4.2%
Band 8B	14.8%	14.2%	13.8%	80.3%	82.8%	83.3%	4.9%	3.0%	2.9%
Band 8C	9.2%	11.9%	16.0%	90.8%	88.1%	84.0%	0.0%	0.0%	0.0%
Band 8D	0.0%	16.7%	17.6%	83.3%	66.7%	70.6%	16.7%	16.7%	11.8%
Band 9	0.0%	0.0%	0.0%	100.0%	100.0%	100.0%	0.0%	0.0%	0.0%
VSM	33.3%	33.3%	33.3%	66.7%	66.7%	66.7%	0.0%	0.0%	0.0%

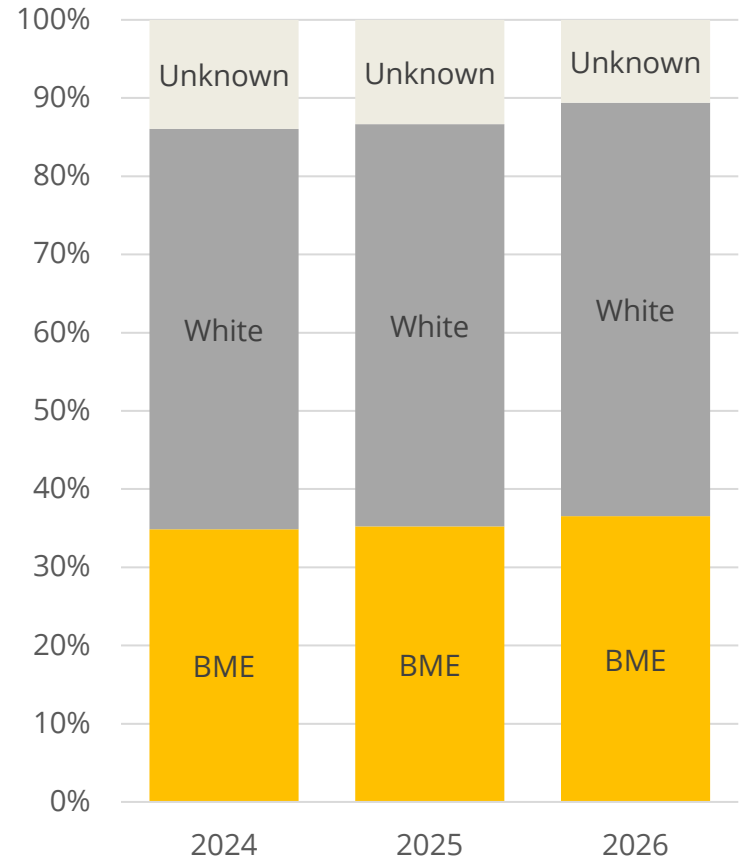


Medical & Dental	BME 2024	BME 2025	BME 2026	White 2024	White 2025	White 2026	Unknown 2024	Unknown 2025	Unknown 2026
Consultant	30	33	41	101	102	111	7	8	8
Non-consultant	30	37	38	44	54	55	12	14	11
Trainee	24	32	31	41	51	45	47	93	73
Other	0	0	0	0	0	0	0	0	0

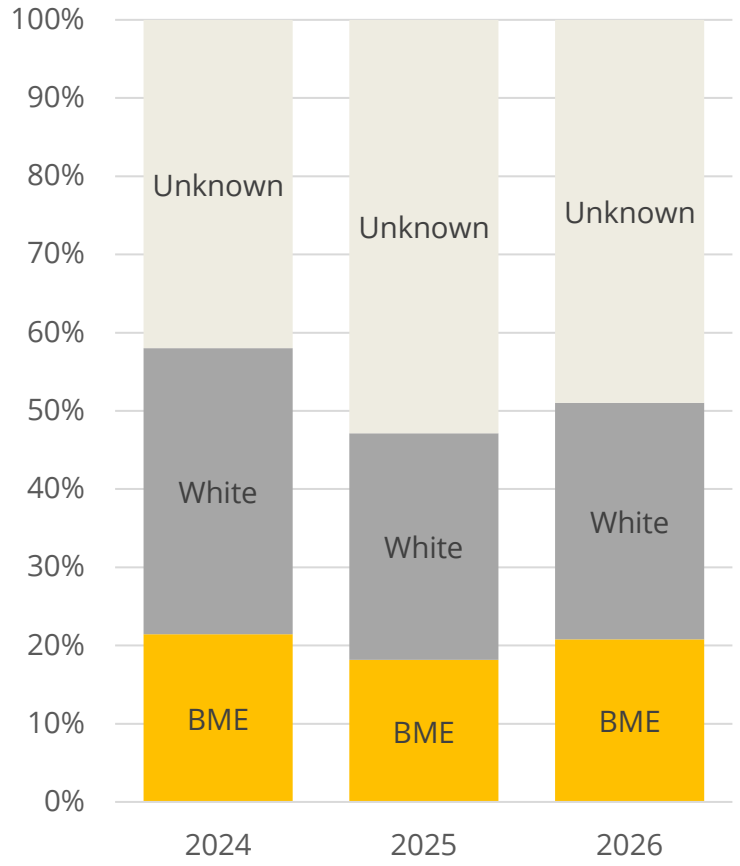
Consultants



Non-Consultants



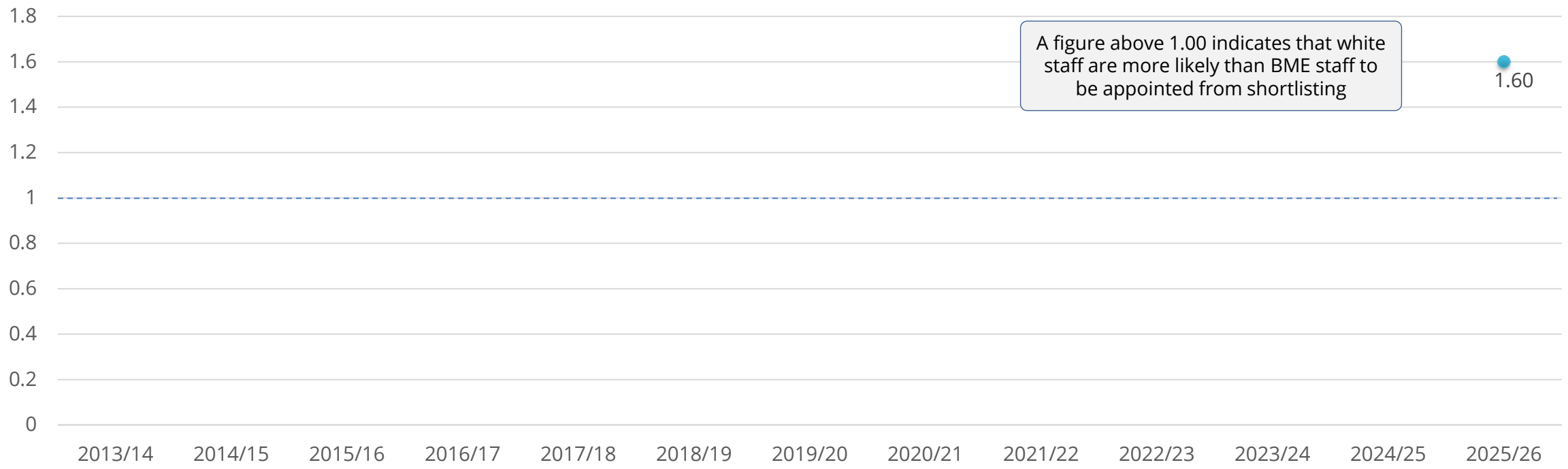
Trainee



1 2 3 4 5 6 7 8 9

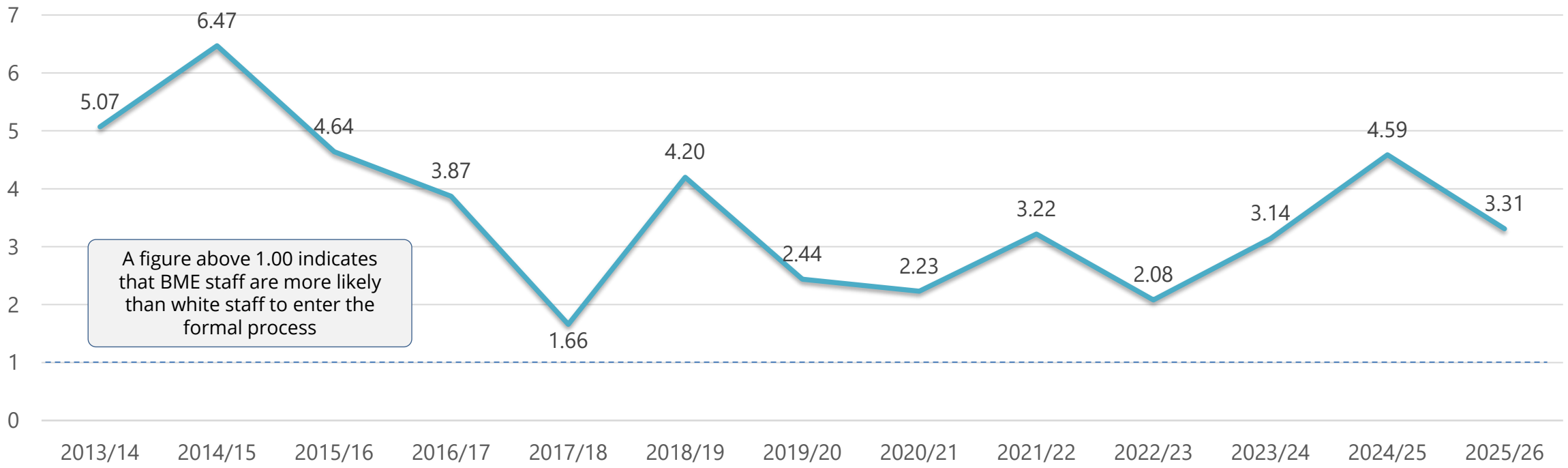
Relative likelihood of white staff being **appointed from shortlisting** compared to BME staff

2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26
Due to historical data quality issues, comparable data for previous years is unavailable.												**1.60** times more likely
												-



Relative likelihood of BME staff entering into **formal disciplinary process** compared to white staff

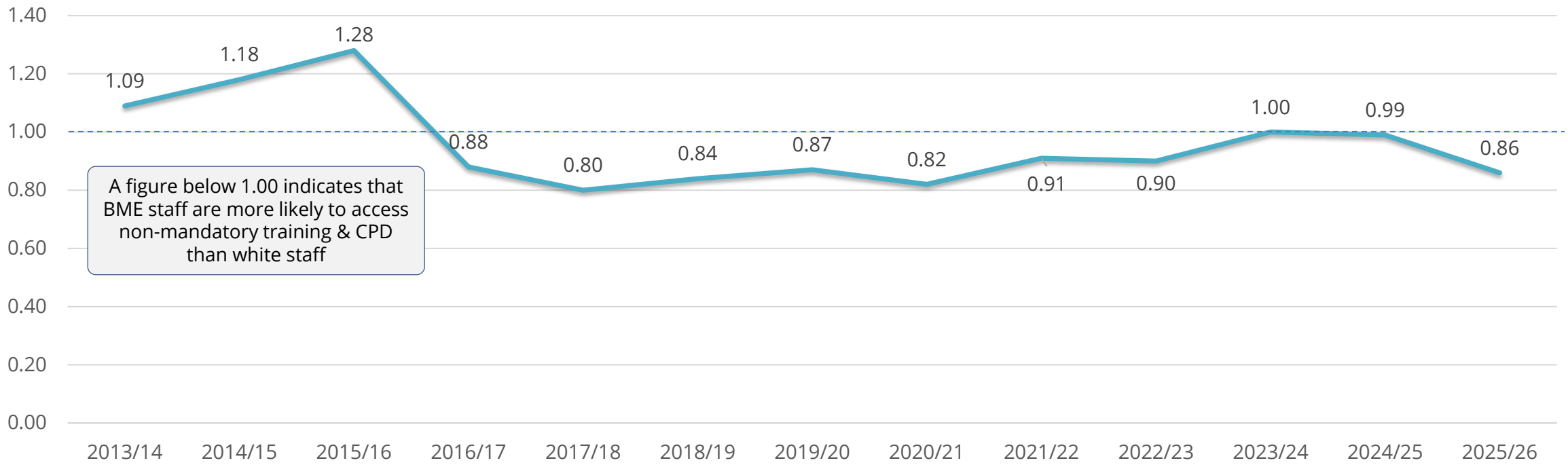
2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26
5.07 times more likely	**6.47** times more likely	**4.64** times more likely	**3.87** times more likely	**1.66** times more likely	**4.20** times more likely	**2.44** times more likely	**2.23** times more likely	**3.22** times more likely	**2.08** times more likely	**3.14** times more likely	**4.59** times more likely	**3.31** times more likely
-	+1.4	-1.83	-0.77	-2.21	+2.54	-1.76	-0.21	+0.99	-1.14	+1.06	+1.45	-1.28



1 2 3 4 5 6 7 8 9

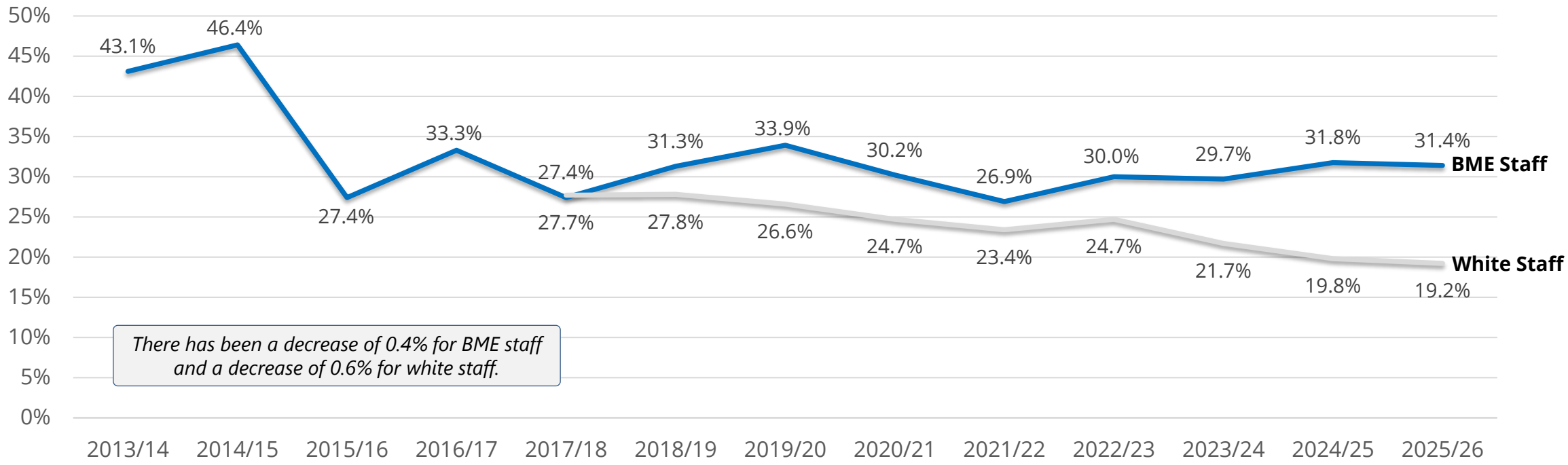
Relative likelihood of white staff accessing **non-mandatory training & CPD** compared to BME staff

2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26
1.09 times more likely	**1.18** times more likely	**1.28** times more likely	**0.88** times more likely	**0.80** times more likely	**0.84** times more likely	**0.87** times more likely	**0.82** times more likely	**0.91** times more likely	**0.90** times more likely	**1.00** times more likely	**0.99** times more likely	**0.86** times more likely
-	+0.09	+0.10	-0.40	-0.08	+0.04	+0.03	-0.05	+0.09	-0.01	+0.10	-0.01	-0.13



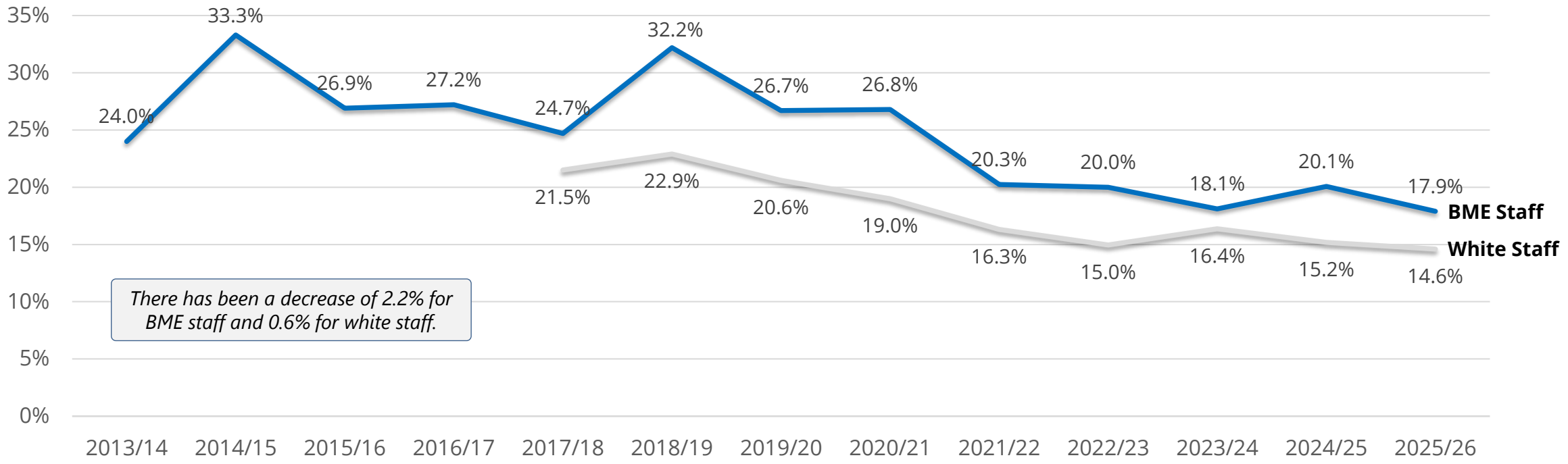
Percentage of staff experiencing harassment, bullying or abuse **from patients, relatives or the public** in last 12 months

	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26
BME Staff	**43.1%** -	**46.4%** +3.3%	**27.4%** -19.0%	**33.3%** +5.9%	**27.4%** -5.9%	**31.3%** +3.9	**33.9%** +2.6%	**30.2%** -3.7%	**26.9%** -3.3%	**30.0%** +3.1%	**29.7%** -0.3%	**31.8%** +2.1%	**31.4%** -0.4%
White Staff					**27.7%** -	**27.8%** +0.1%	**26.6%** -1.2%	**24.7%** -1.9%	**23.4%** -1.3%	**24.7%** +1.3%	**21.7%** -3.0%	**19.8%** -1.9%	**19.2%** -0.6%



Percentage of staff experiencing harassment, bullying or abuse **from staff** in last 12 months

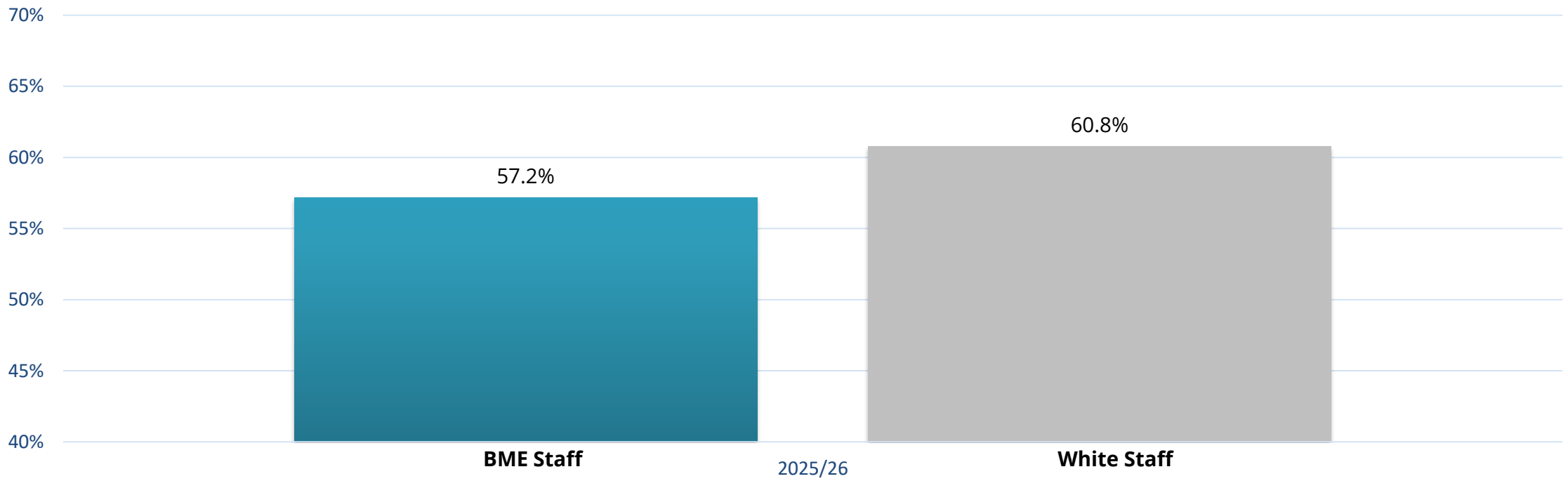
	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26
BME Staff	**24.0%**	**33.3%** +9.3%	**26.9%** -6.4%	**27.2%** +0.3%	**24.7%** -2.5%	**32.2%** +7.5%	**26.7%** -5.5%	**26.8%** +0.1%	**20.3%** -6.5%	**20.0%** -0.3%	**18.1%** -1.9%	**20.1%** +2.0%	**17.9%** -2.2%
White Staff	-	-	-	-	**21.5%** -	**22.9%** +1.4%	**20.6%** -2.3%	**19.0%** -1.6%	**16.3%** -2.7%	**15.0%** -1.3%	**16.4%** +1.4%	**15.2%** -1.2%	**14.6%** -0.6%



Percentage of staff believing the organisation provides **equal opportunities** for career progression or promotion

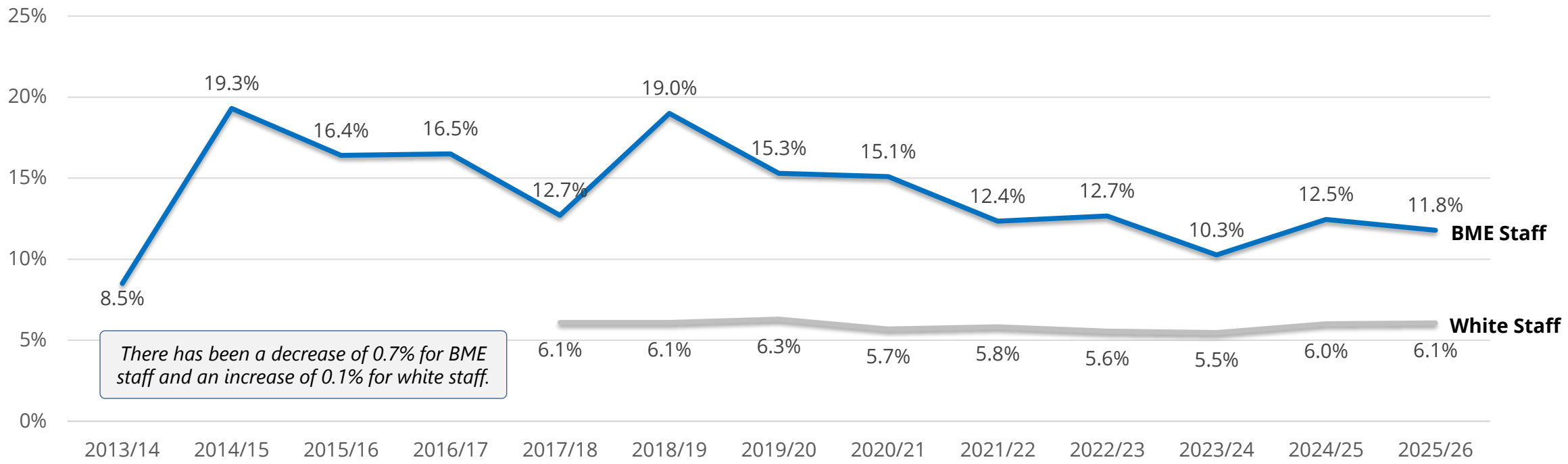
	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26
BME Staff													**57.2%**
White Staff													**60.8%**

Note: Due to changes in the question wording in 2025, previous years' results for WRES indicator 7 (Q15) are not reported.



Percentage of staff experiencing discrimination
at work from **manager/team leader** or **other colleagues** in last 12 months

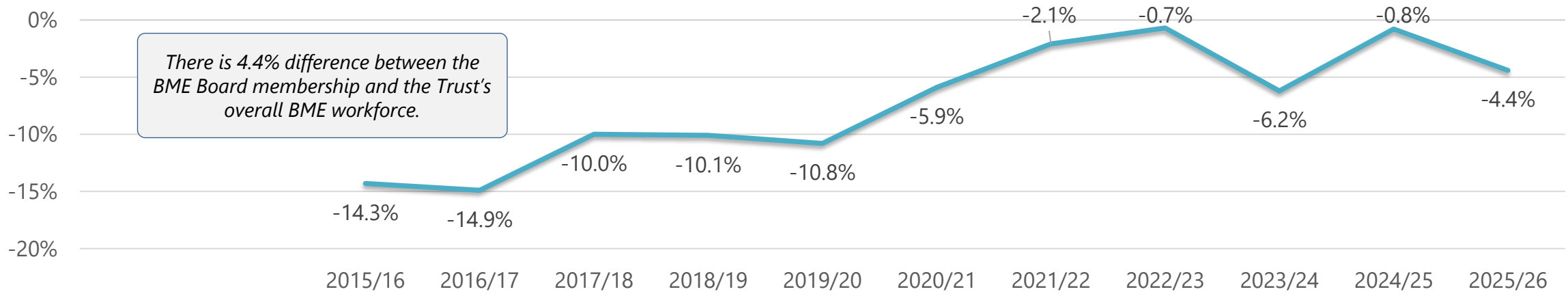
	2013/14	2014/15	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26
BME Staff	**8.5%** -	**19.3%** +10.8%	**16.4%** -2.9%	**16.5%** +0.1%	**12.7%** -3.8%	**19.0%** +6.3%	**15.3%** -3.7%	**15.1%** -0.2%	**12.4%** -2.7%	**12.7%** +0.3%	**10.3%** -2.4%	**12.5%** +2.2%	**11.8%** -0.7%
White Staff					**6.1%** -	**6.1%** 0%	**6.3%** +0.2%	**5.7%** -0.6%	**5.8%** +0.1%	**5.6%** -0.2%	**5.5%** -0.1%	**6.0%** +0.5%	**6.1%** +0.1%



There has been a decrease of 0.7% for BME staff and an increase of 0.1% for white staff.

Percentage difference between the organisations' Board membership and its overall workforce disaggregated by voting membership of the Board & by executive membership of the Board

	2015/16	2016/17	2017/18	2018/19	2019/20	2020/21	2021/22	2022/23	2023/24	2024/25	2025/26
Percentage of **BME** members on the Board	**0%**	**0%**	**5.9%**	**6.3%**	**6.3%**	**12.5%**	**17.6%**	**20.0%**	**16.7%**	**25.0%**	**23.5%**
Percentage of **BME** Staff in Overall Workforce	**14.3%**	**14.9%**	**15.9%**	**16.4%**	**17.1%**	**18.4%**	**19.7%**	**20.7%**	**22.9%**	**25.8%**	**28.0%**
Percentage difference between the organisations' Board membership and its overall workforce (BME representation)	**-14.3%**	**-14.9%**	**-10.0%**	**-10.1%**	**-10.8%**	**-5.9%**	**-2.1%**	**-0.7%**	**-6.2%**	**-0.8%**	**-4.4%**



Workforce Race Equality Standard (WRES) Improvement Plan 2026/27

Oxford Health NHS Foundation Trust

WRES Theme	WRES Indicator(s)	Improvement Objective	Key Actions
Workforce Representation	Indicator 1	Increase BME representation across underrepresented bands and senior leadership roles.	• Complete workforce representation analysis • Identify barriers to progression • Develop targeted interventions for Bands 8D, 9 and VSM roles
Senior Leadership Diversity	Indicator 1 Indicator 9	Improve representation of BME staff in senior leadership and Board-level positions.	• Implement targeted succession planning, talent management and leadership development programmes
Inclusive Recruitment	Indicator 2	Improve equitable and inclusive recruitment outcomes.	• Continue use of diverse recruitment panels • Review recruitment data quarterly • Deliver inclusive recruitment training
Disciplinary Processes	Indicator 3	Reduce disproportionality in formal disciplinary processes.	• Comprehensive review of disciplinary processes • Strengthen oversight of cases • Monitor outcomes by ethnicity

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WRES Theme	WRES Indicator(s)	Improvement Objective	Key Actions
Access to Training & Development	Indicator 4	Improve and maintain equitable access to non-mandatory training and CPD opportunities.	• Monitor participation rates by ethnicity • Promote development opportunities • Review access barriers
Psychological and Physical Safety	Indicator 5 Indicator 6 Indicator 8	Reduce harassment, bullying, abuse and discrimination from patients, relatives, public and staff, experienced by BME staff.	• Develop and deliver the 'Anti-Racism Toolkit' and training • Introduce the 'Micro-aggression and Allyship' training into leadership development • Strengthen incident reporting and support mechanisms
Career Progression	Indicator 7	Improve perceptions of fair career progression opportunities.	• Increase access to mentoring, sponsorship, coaching and leadership development programmes for BME staff
Leadership Accountability	Indicator 1 Indicator 9	Strengthen accountability for race equality outcomes across the Trust.	• Require Directorates to review WRES data and develop local action plans