



Derbyshire Healthcare
NHS Foundation Trust

Public Sector Equality Duty Annual Report 2025-2026

www.derbyshirehealthcareft.nhs.uk

 DHCFT  DERBYSHCFT  NHS_DERBYSHIREHEALTHCARE



Introduction: Understanding the Public Sector Equality Duty

The Public Sector Equality Duty (PSED) was introduced in April 2011, under section 149 of the Equality Act 2010. It requires public authorities to have due regard to the need to:

- Eliminate discrimination, harassment, victimisation, and other conduct prohibited under the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

To promote transparency and accountability, the Equality Act 2010 (Specific Duties) Regulations 2011 require public authorities to:

- Publish equality objectives at least every four years.
- Provide information to demonstrate compliance with the duty.

Our Trust Commitment to Equality, Diversity, and Inclusion

We are committed to embedding equality, diversity, and inclusion (EDI) in every aspect of our operations. We strive to create a compassionate and inclusive environment for both care delivery and employment.

Our vision:

"We make a positive difference in everything we do"

This Strategy outlines our new, bold vision for the future, and the ways we will work in order to achieve our ambitions. We are committed to making positive changes that, in turn, have a positive impact on the people we support.

Our Values:



Caring

We provide safe care and support people to achieve their goals



Inclusive

We respect everyone in all we do



Ambitious

We offer high quality services, and we commit to ongoing improvement



Belonging

We come together to create a culture that is welcoming, open and trusting



Collaborative

We work together to achieve the best outcomes for our people and communities

Strategic Objectives:



Our EDI efforts align with the Trust's four strategic priorities:

We are patient focussed:

- Our care and clinical decisions will be respectful of and responsive to the needs and values of our service users, patients, children, families and carers.

We value our people:

- We will attract, involve and retain staff creating a positive culture and sense of belonging.

We are productive:

- We will improve our productivity and design and deliver services that are financially sustainable.

We work in partnerships:

- We will work together with our system partners, explore new opportunities to support our communities and work with local people to shape our services and priorities.

How We Are Meeting the PSED Duties:

Stopping Discrimination and Harassment

- The Trust has a clear Anti-Racism Board Statement.
- A Senior Anti-Racism Lead is in place.
- A new Racist Incident Response Process will be used across the Trust.
- Anonymous reporting for discrimination is being introduced.
- EDI checks are now part of HR panels to improve fairness.
- Reasonable Adjustments for disabled staff are being improved.
- Recruitment Inclusion Guardians are being reviewed to improve fair recruitment.
- Learning from racism cases is being strengthened through PCREF.

Improving Equality of Opportunity

- The BME Network has been relaunched and the LGBTQ+ Network re-established.
- A new Trust EDI Policy will be written in early 2026.
- New EDI and Race Equality Working Groups will track progress.
- Action is being taken to improve career progression for ethnic minority and disabled staff.
- The Trust is working to improve equality data and staff declaration rates.
- Recruitment processes are being improved to make them fairer.
- Inclusive Intercultural Communication training continues.
- The EDI Drop-In Clinic will offer staff advice and support.

Building Good Relationships

- The Anti-Racist Journey Model will support learning and open discussion.
- Safe Spaces and staff listening sessions continue.
- A Staff Network Conference will take place in 2026.
- Lived experience reports will be shared twice a year with senior leaders.
- PCREF is being led by the Medical Director to improve culturally safe mental health care.

What This Means for Our Staff

- Safer and fairer workplaces.
- Better support when discrimination or racism happens.
- Fairer access to jobs, training and promotion.
- Better support for disabled staff.

- Stronger staff voice through Networks and Safe Spaces.
- More confidence to speak up.

What This Means for Our Patients and Communities

- More culturally safe care, especially in mental health.
- Better understanding of different needs and backgrounds.
- Fairer access to services.
- Stronger trust in the Trust.
- More respectful and person-centred care.

Governance and Accountability

The Trust will publish:

- WRES
- WDES
- EDS2
- PSED Report
- Gender Pay Gap Report
- Modern Slavery Statement

Progress is monitored through:

- Trust Delivery Group (TDG)
- People & Culture Committee
- Executive leadership
- Staff Network feedback

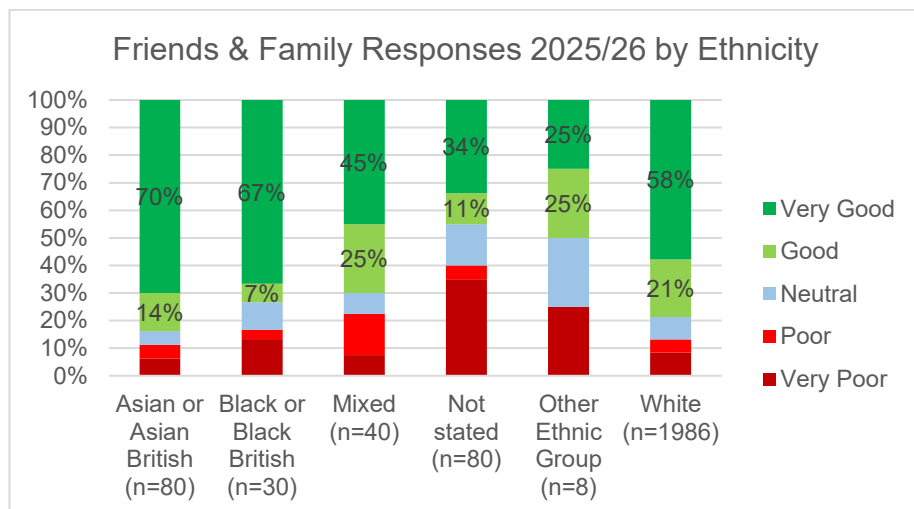
A new Trust EDI Plan for 2027–2029 will also be published.

Promoting equality in service delivery

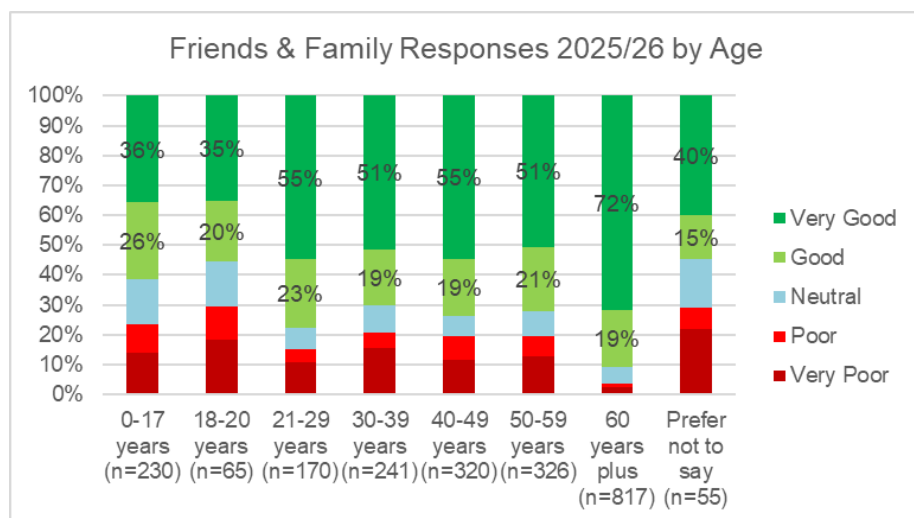
NHS providers are mandated to capture data from patient's Friends and Family Test (FFT) results to ascertain patient experience. To measure customer satisfaction the Trust promotes the Friends and Family Test survey, and respondents are asked to provide their ethnicity, age, and gender in answering whether they would be happy for friends and family to receive treatment at the Trust.

Friends and Family satisfaction ratings 25/26

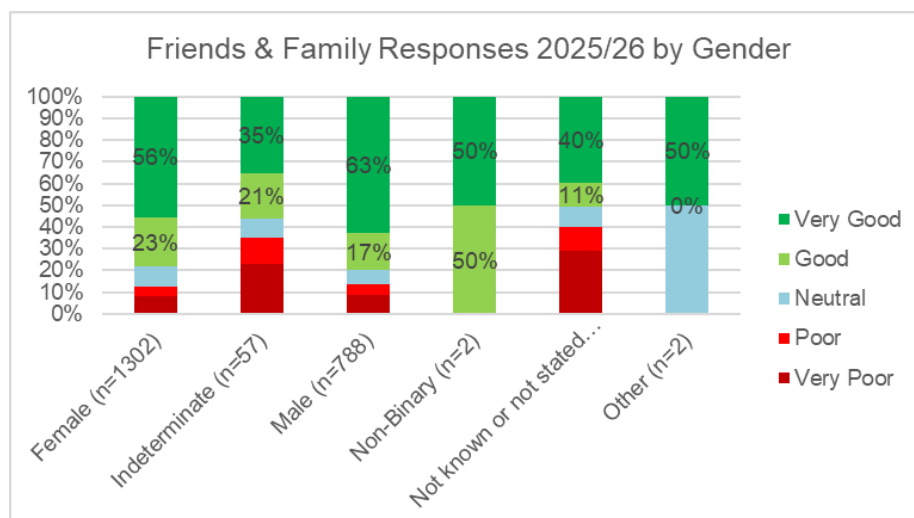
By Ethnicity:



By Age:



By Gender:



Person-centred care planning to promote equality in service delivery:

The Trust operates on a person-centred care planning basis. Each person is treated as an individual and their care plan considers all their individual needs, which by default encapsulates equality of service delivery.

Through the use of person-centred care planning, the Trust ensures that all patients are informed and supported to be as involved as they wish to be in decisions about their care. A care plan is devised jointly with the patient unless they are unwilling or unable to be involved. The principle of devising the care plan in conjunction with the patient, where possible, is consistently applied. In addition, for patients with a learning disability an accessible care plan has been devised which uses symbols to aid understanding and to enable participation in the production of the care plan.

Staff Networks Overview

Our staff networks play a crucial role in advancing inclusion, offering support, and driving change across the Trust.

Christian Network

- Weekly informal meetings (Wednesday mornings 8.30-9).
- Some lunch time sessions.
- Celebratory events such as Easter and Christmas.
- Cross-Trust collaboration and city-wide event.

Armed Forces Community Network

- Safe environment for veterans, reservists, families, and allies.
- Major events: Month of the Military Child, Armed Forces Day, VE Day, Army Insight & Leadership Day.
- Active commitment to the Armed Forces Covenant and recognition schemes.
- Charity events raising money for military charities.
- Attending Breakfast Clubs jointly with Burton Network.
- Contact: dhcft.armedforcesinfo@nhs.net

BME (Black and Minority Ethnic) Network

- Aims to ensure parity in career outcomes and progression.
- Virtual meetings with built-in peer support (closed Group).
- Face to face drop in on inpatient wards to be rolled out first session April 2026.

- Chairs are part of wider work in the organisation PCREF and Violence and Aggression workshop.
- BME network now have an open space where allies are invited.
- We celebrated race equality week with an extraordinary BME meeting which was attended by our exec sponsors.
- We are getting more new members attending the meeting and members are being encouraged to cascade the Network email to promote the network.
- Contact: dhcft.bmeinfo@nhs.net

DAWN (Disability and Wellbeing Network)

- Safe space for discussion, peer support, and advocacy.
- Achievements: Adjustment Passport, MindView rollout, centralised budget, Disability Leave Policy, two recorded Podcasts.
- Goals-Disability Confident Leader status, reviewing access to our estate and working with Accessible to produce a virtual map of the facilities we have.
- Attending team meetings to talk about the network and the work it does.
- Contacts: dhcft.dwinfo@nhs.net april.saunders@nhs.net barbara.chilvers@nhs.net

Women's Network

- Inclusive space for individuals identifying as female.
- Topics: Gender pay gap, career pathways, hormone health, flexible work.
- Advocating for systemic policy change and equity.
- Plans for Reciprocal Mentoring Scheme.
- Contact: dhcft.womensnetwork@nhs.net

Multifaith Network:

- Delivery of interfaith group sessions discussing relevant themes to the healthcare setting.
- Enabling participants to express Faith values that inform their day to day care as well as what inspires them to care.
- Enabling participants to appreciate other people's values, broadening outlooks on life and practice.
- Highlighting key Faith-based festivals/events.
- Regularly meeting with other forums to improve engagement in the community, especially in terms of bringing a greater awareness of mental health issues in local Faith communities.

LGBT+ Network:

- Reinstated in 2025 with renewed energy.
- Virtual meetings with built-in peer support (closed Group).
- Increased visibility, looking to relaunch officially in 2026.
- Linking with DCHS to consider joint support and joint working.
- Consultation on policy development.
- **Contact:** dhcft.lgbtinfo@nhs.net

The Trust is also currently exploring the development of a Carer's Network to support staff with carer responsibilities following a scoping exercise.

Please scan the QR codes below to visit further information on Focus.

						
Armed Forces Community Network	Black and Minority Ethnic (BME) Staff Network	Christian Network	Disability and Wellness Network (DAWN)	LGBT+ (Lesbian, Gay, Bisexual, Transgender +) Network	Multi-Faith Forum	Women's Network
						

Sexual Safety Charter

A new charter on sexual safety at work has been published and a policy has been developed in collaboration with key stakeholders and Staff Networks. The work of the Sexual Safety Working Group is ongoing.

EDI Training

Inclusive Intercultural Communication (IIC) Training

Objectives

- Recognize communication barriers in diverse teams.
- Promote empathetic and inclusive language.
- Address linguistic and cultural identity challenges.
- Facilitate clearer digital and face-to-face communication.

Participant Feedback

- “This course should be mandatory for all NHS staff.”
- “As an international member of staff, I feel heard and understood.”
- “It helped me adapt my communication style immediately.”
- “Important session for onboarding and future training frameworks.”

Active Bystander Training

DHCFT has commissioned A Kind Life to develop an Active Bystander “Train the Trainer” programme, which will be rolled out organisation-wide beginning in January 2026. A Kind Life which aims to embed the principles of a just and restorative culture in line with the operational priority to improve staff experience.

Bespoke Training

While we cannot guarantee the elimination of all discrimination that our staff may face, we can improve the way that our staff are supported as a result of such experiences. The EDI Team are working with patient-facing areas to develop a training package to improve collaboration and support within teams.

Race Equality Strategy and Action Plan (Draft for Co-Production with BME Staff Network & Key Stakeholders)

In 2025 the Trust signed up to an over-arching anti-racism statement to include the following:

“Racism - whether overt or subtle, individual or systemic - has no place in our organisation. It breaks trust, harms lives, and deepens health inequalities. We recognise the damage it causes, and we refuse to be bystanders. At Derbyshire Healthcare, we believe in the power of compassion, inclusion, and dignity for all. Every person deserves to feel safe, valued, and respected - in our services, our teams, and our communities.”

A new Race equality Strategy and Action Plan has been developed.

Vision: To create an equitable, inclusive, and safe workplace where all those from minoritised communities feel valued, respected, and empowered.

Mission: To combat racism and intersectional discrimination within DHCFT through leadership, accountability, inclusive engagement, and a sustained commitment to education, culture and structural change.

The Strategy and Action Plan has been developed in collaboration with the BME Staff Network and Key Stakeholders.

RACE EQUALITY PLAN ON A PAGE

Our Race Equality Strategic Priority
We will attract, involve and retain ethnically diverse staff, creating a positive, anti-racist culture and a strong sense of belonging.

How We Will Know We Are Making a Difference

What we aim to do
Create a Trust where race equality is embedded, measurable and actively led, reducing and eliminating disparities in experience, opportunity and outcomes for colleagues from ethnic minority backgrounds.

In this plan we will

Derbyshire Healthcare NHS Foundation Trust

- 1. Strengthen inclusive recruitment, progression and leadership capability, addressing ethnic disparities in recruitment outcomes, career progression and senior representation.**
- 2. Embed anti-racism, EDI accountability and psychological safety, actively tackling bullying, discrimination, harassment and microaggressions.**
- 3. Use workforce intelligence effectively (including WRES, NHS Staff Survey and ESR data) to inform targeted action, monitoring and transparent reporting.**
- 4. Enhance staff voice, co-production and engagement, working in partnership with the BME Staff Network and colleagues with lived experience.**
- 5. Support wellbeing, flexible working and inclusive management practice, ensuring managers are confident, capable and supported to lead diverse teams.**

How We Will Know We Are Making a Difference

- Reduced ethnic disparities in recruitment, disciplinary processes and senior leadership representation.
- Year-on-year improvement in Workforce Race Equality Standard (WRES) indicators.
- Improved NHS Staff Survey results relating to inclusion, belonging, bullying and confidence to speak up.
- Clear Board-level oversight, leadership accountability and governance.
- Positive impact evidenced through BME Staff Network engagement, co-production and feedback.

WE MAKE A POSITIVE DIFFERENCE IN EVERYTHING WE DO

BLACK & ETHNICITY ETHNIC MEDICINE

Freedom to speak up Guardian

Derbyshire Healthcare NHS Foundation Trust is committed to creating an inclusive culture where all colleagues feel safe, respected, and confident to speak up about any aspect of their working life. The Freedom to Speak Up Guardian provides an independent and confidential route for staff to raise concerns or share experiences relating to patient safety, quality of care, behaviours, culture, or workplace practices when they feel unable to do so through other channels.

The role supports the Trust's commitment to equality, diversity, and inclusion by helping to ensure that every colleague's voice is heard and valued. Particular attention is given to understanding and reducing barriers that may prevent staff from different backgrounds or those with protected characteristics from speaking up. Promoting psychological safety and inclusive working environments is central to this work. The Freedom to Speak Up Guardian works in partnership with the Equality, Diversity and Inclusion (EDI) team to ensure that concerns relating to equality, inclusion, and protected characteristics are understood and responded to appropriately.

Themes and learning from Freedom to Speak Up cases are reviewed to identify opportunities for organisational learning and improvement. This helps the Trust to address cultural or systemic issues, strengthen inclusive practices, and ensure that concerns raised by colleagues lead to meaningful change.

Through this work, DHCFT continues to promote a culture of openness, fairness, and continuous improvement where speaking up is encouraged and supported for everyone.

Recruitment Inclusion Guardians

The Recruitment Inclusion Guardians were introduced across the Trust in February 2020 to support panels for Band 7 and above roles, which was subsequently extended to cover recruitment panels for all Band 6 and above roles.

The Recruitment Inclusion Guardians is one of other measures DHCFT is taking to ensure our recruitment processes are inclusive.

The main objectives of the Recruitment Inclusion Guardians are to:

- ensure that the Trust places a high value on diversity and fairness, treating all applicants with dignity and respect
- support all hiring managers to achieve good equalities practice at all stages of the recruitment process
- advocate for equality and promote the interests of all protected groups

The process has recently been undergoing a review that aims to assess the existing resources and the demand which will enable us to standardise the process, increase its impact and introduce measures to regularly assess impact effectively.

Future Plans/Considerations

To include:

- Embed EDI objectives into executive and senior manager appraisal frameworks.
- Refresh inclusive recruitment guidance and processes.
- Deliver inclusive recruitment training for senior appointment panels.
- Deliver mentoring and sponsorship schemes for under-represented staff.
- Review and strengthen reporting routes and staff support pathways.
- Relaunch centralised reasonable adjustment process.
- Provide manager guidance and training on reasonable adjustments.
- Strengthen governance and executive sponsorship for staff networks.
- Explore menopause-friendly accreditation.
- Deliver Trust-wide inclusion and engagement events.

Our ongoing work in equality, diversity, and inclusion reflects our commitment to not just meet statutory obligations but to exceed them. By embracing and supporting the diverse identities of our staff, patients, and communities, we are building a Trust that is inclusive, respectful, and resilient.

Workforce Data Snapshot (as of December 2025)

Data compiled from DHCFT's ESR system:

- **Table 1:** Overall Workforce Composition
- **Table 2:** Recruitment Trends
- **Table 3:** Working Patterns
- **Table 4:** CPD Training Access
- **Table 5:** Employee Relations Casework
- **Table 6:** Leavers Breakdown

Table 1: Overall Workforce Composition
Breakdown of employees 31 Dec 2025

	Headcount	FTE	Workforce %
Trust			
Employees	3474	3032.41	100.00%
Race			
White	2559	2199.11	73.66%
White - British	2441	2100.29	70.26%
White - Any other White background	69	61.29	1.99%
White - Irish	25	19.38	0.72%
White English	10	7.65	0.29%
White Unspecified	7	4.49	0.20%
White Other European	2	1.40	0.06%
White Cornish	1	1.00	0.03%
White Mixed	1	1.00	0.03%
White Northern Irish	1	1.00	0.03%
White Scottish	1	0.80	0.03%
White Turkish	1	0.80	0.03%
Mixed Race	79	71.21	2.27%
Mixed - White & Asian	27	23.97	0.78%
Mixed - White & Black Caribbean	27	24.81	0.78%
Mixed - Any other mixed background	12	10.93	0.35%
Mixed - White & Black African	12	11.10	0.35%
Mixed - Black & White	1	0.40	0.03%
Asian or Asian British	325	282.79	9.36%
Asian or Asian British - Indian	200	173.38	5.76%
Asian or Asian British - Pakistani	99	85.13	2.85%
Asian or Asian British - Any other Asian background	13	12.40	0.37%
Asian or Asian British - Bangladeshi	5	4.59	0.14%
Asian Punjabi	2	1.67	0.06%
Asian Tami	2	1.80	0.06%
Asian British	1	0.83	0.03%
Asian Sinhalese	1	1.00	0.03%
Asian Sri Lankan	1	1.00	0.03%
Asian Unspecified	1	1.00	0.03%
Black or Black British	426	405.17	12.26%

Black or Black British - African	341	329.29	9.82%
Black or Black British - Caribbean	60	52.92	1.73%
Black or Black British - Any other Black background	13	11.56	0.37%
Black Nigerian	7	6.80	0.20%
Black British	4	3.60	0.12%
Black Mixed	1	1.00	0.03%
Other Ethnic Backgrounds	35	31.80	1.01%
Any Other Ethnic Group	22	20.00	0.63%
Chinese	10	8.80	0.29%
Filipino	2	2.00	0.06%
Other Specified	1	1.00	0.03%
Not Stated	50	42.33	1.44%
Total BME			24.90%

Gender

Female	2759	2373.45	79.42%
Male	715	658.96	20.58%

Religious Belief

Christianity	1492	1307.07	42.95%
Atheism	696	619.49	20.03%
Do not wish to disclose	507	423.28	14.59%
Other	390	343.54	11.23%
Islam	135	119.59	3.89%
Unspecified	95	78.82	2.73%
Sikhism	71	58.73	2.04%
Hinduism	58	54.08	1.67%
Buddhism	22	19.81	0.63%
Judaism	6	6.00	0.17%
Jainism	2	2.00	0.06%

Sexual Orientation

Heterosexual or Straight	2937	2577.13	84.54%
Not Stated	266	215.84	7.66%
Gay or Lesbian	92	84.53	2.65%
Other Unspecified	91	74.54	2.62%
Bisexual	64	58.87	1.84%
Not Listed	14	13.51	0.40%
Undecided	10	8.00	0.29%

Disability

No	2680	2375.35	77.14%
Yes	431	372.10	12.41%
Not Declared	344	269.68	9.90%
Prefer Not To Answer	19	15.28	0.55%

Age

16-20	15	11.85	0.43%
21-30	466	439.07	13.41%
31-40	888	788.23	25.56%
41-50	921	822.40	26.51%
51-60	859	737.13	24.73%

61-70	311	225.67	8.95%
71 & above	14	8.05	0.40%

Marriage & Civil Partnership

Married	1748	1485.59	50.32%
Single	1190	1078.21	34.25%
Divorced	242	208.25	6.97%
Unknown	142	127.06	4.09%
Civil Partnership	66	59.56	1.90%
Widowed	47	37.55	1.35%
Legally Separated	39	36.18	1.12%

Maternity

Maternity Leave	61	54.07	1.76%
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Table 2: Recruitment Trends

Breakdown of Recruitment Data 01 Apr 2025 to 31 Dec 2025		Applications	%	Shortlisted	%	Interview Attended	%	Appointments	%
Trust	Employees	16994	-	2645	-	1640	-	279	-
Race	White	2985	17.57%	1161	43.89%	732	44.63%	155	55.56%
	BME	13780	81.09%	1398	52.85%	834	50.85%	83	29.75%
	Not Stated	229	1.35%	86	3.25%	74	4.51%	41	14.70%
Gender	Female	11673	68.69%	1894	71.61%	1161	70.79%	200	71.68%
	Male	5265	30.98%	733	27.71%	468	28.54%	75	26.88%
	Not stated	56	0.33%	18	0.68%	11	0.67%	4	1.43%
Religious Belief	Atheism	1243	7.31%	436	16.48%	280	17.07%	59	21.15%
	Buddhism	217	1.28%	21	0.79%	14	0.85%	4	1.43%
	Christianity	9723	57.21%	1309	49.49%	821	50.06%	101	36.20%
	Hinduism	1308	7.70%	97	3.67%	50	3.05%	7	2.51%
	Not stated	59	0.35%	59	2.23%	58	3.54%	37	13.26%
	Islam	2736	16.10%	237	8.96%	130	7.93%	15	5.38%
	Jainism	9	0.05%	1	0.04%	1	0.06%	0	0.00%
	Judaism	2	0.01%	2	0.08%	1	0.06%	0	0.00%
	Other	641	3.77%	220	8.32%	126	7.68%	23	8.24%
	Sikhism	248	1.46%	66	2.50%	38	2.32%	4	1.43%
	Do not wish to Disclose	808	4.75%	197	7.45%	121	7.38%	29	10.39%
Sexual Orientation	Bisexual	364	2.14%	91	3.44%	60	3.66%	6	2.15%
	Gay or Lesbian	175	1.03%	60	2.27%	43	2.62%	12	4.30%
	Heterosexual or Straight	15844	93.23%	2317	87.60%	1406	85.73%	216	77.42%
	Undecided	39	0.23%	11	0.42%	8	0.49%	1	0.36%
	Other not listed	51	0.30%	15	0.57%	7	0.43%	1	0.36%
	Not Stated	58	0.34%	58	2.19%	57	3.48%	38	13.62%
	Do not wish to Disclose	463	2.72%	93	3.52%	59	3.60%	5	1.79%
Disability	Yes	929	5.47%	325	12.29%	216	13.17%	35	12.54%
	No	15804	93.00%	2188	82.72%	1321	80.55%	196	70.25%
	Prefer not to Answer	192	1.13%	63	2.38%	35	2.13%	6	2.15%
	Not Declared	69	0.41%	69	2.61%	68	4.15%	42	15.05%
Age	Under 20	167	0.98%	25	0.95%	12	0.73%	2	0.72%
	20-24	1579	9.29%	245	9.26%	158	9.63%	33	11.83%
	25-29	4610	27.13%	497	18.79%	292	17.80%	58	20.79%
	30-34	3962	23.31%	504	19.05%	299	18.23%	39	13.98%
	35-39	2776	16.34%	398	15.05%	253	15.43%	45	16.13%
	40-44	1857	10.93%	347	13.12%	223	13.60%	31	11.11%
	45-49	1018	5.99%	240	9.07%	164	10.00%	30	10.75%
	50-54	593	3.49%	206	7.79%	129	7.87%	22	7.89%
	55-59	289	1.70%	113	4.27%	64	3.90%	11	3.94%
	60-64	127	0.75%	62	2.34%	42	2.56%	7	2.51%
	65+	16	0.09%	8	0.30%	4	0.24%	1	0.36%
	Not Stated	0	0.00%	0	0.00%	0	0.00%	0	0.00%
Marriage & Civil Partnership	Civil Partnership	285	1.68%	61	2.31%	34	2.07%	7	2.51%
	Divorced	290	1.71%	100	3.78%	64	3.90%	11	3.94%
	Legally Separated	76	0.45%	23	0.87%	16	0.98%	0	0.00%
	Married	8753	51.51%	1194	45.14%	742	45.24%	99	35.48%
	Single	6979	41.07%	1033	39.05%	615	37.50%	109	39.07%
	Unknown	55	0.32%	55	2.08%	54	3.29%	36	12.90%
	Widowed	47	0.28%	13	0.49%	10	0.61%	2	0.72%
	Other	322	1.89%	115	4.35%	74	4.51%	12	4.30%
	Do not wish to disclose	187	1.10%	51	1.93%	31	1.89%	3	1.08%

Table 3: Working Patterns

Breakdown of Working Pattern 31 Dec 2025

		Full Time	Workforce %	Part Time	Workforce %
Trust					
	Employees	2041	58.75%	1433	41.25%
Race					
	White	1393	54.44%	1166	45.56%
	BME	620	71.68%	245	28.32%
	Not Stated	28	56.00%	22	44.00%
Gender					
	Female	1494	54.15%	1265	45.85%
	Male	547	76.50%	168	23.50%
Religious Belief					
	Christianity	892	59.79%	600	40.21%
	Atheism	428	61.49%	268	38.51%
	Do not wish to disclose	258	50.89%	249	49.11%
	Other	227	58.21%	163	41.79%
	Islam	86	63.70%	49	36.30%
	Unspecified	50	52.63%	45	47.37%
	Sikhism	34	47.89%	37	52.11%
	Hinduism	43	74.14%	15	25.86%
	Buddhism	15	68.18%	7	31.82%
	Judaism	6	100.00%	0	0.00%
	Jainism	2	100.00%	0	0.00%
Sexual Orientation					
	Heterosexual or Straight	1745	59.41%	1192	40.59%
	Not Stated	123	46.24%	143	53.76%
	Gay or Lesbian	64	69.57%	28	30.43%
	Unspecified	46	50.55%	45	49.45%
	Bisexual	49	76.56%	15	23.44%
	Not Listed	11	78.57%	3	21.43%
	Undecided	3	30.00%	7	70.00%
Disability					
	No	1644	61.34%	1036	38.66%
	Yes	249	57.77%	182	42.23%
	Not Declared	137	39.83%	207	60.17%
	Prefer not to Answer	11	57.89%	8	42.11%
Age					
	16-20	10	66.67%	5	33.33%
	21-30	374	80.26%	92	19.74%
	31-40	536	60.36%	352	39.64%
	41-50	574	62.32%	347	37.68%
	51-60	454	52.85%	405	47.15%
	61-70	90	28.94%	221	71.06%
	71 & above	3	21.43%	11	78.57%

Marriage & Civil Partnership

Married	922	52.75%	826	47.25%
Single	817	68.66%	373	31.34%
Divorced	131	54.13%	111	45.87%
Unknown	86	60.56%	56	39.44%
Civil Partnership	41	62.12%	25	37.88%
Widowed	17	36.17%	30	63.83%
Legally Separated	27	69.23%	12	30.77%

Maternity

Maternity Leave	36	59.02%	25	40.98%
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Table 4: CPD Training Access

Breakdown of Mandatory Training Compliance 31 Dec 2025

		%
Trust		
	Employees	93.66%
Race		
	White	94.63%
	BME	91.32%
	Not Stated	84.51%
Gender		
	Female	94.21%
	Male	91.62%
Religious Belief		
	Atheism	95.12%
	Buddhism	95.35%
	Christianity	94.21%
	Hinduism	88.54%
	Not stated	87.04%
	Islam	92.10%
	Jainism	90.91%
	Judaism	95.00%
	Other	94.82%
	Sikhism	89.92%
	Do not wish to disclose	91.94%
Sexual Orientation		
	Bisexual	95.53%
	Gay or Lesbian	95.37%
	Heterosexual or Straight	94.21%
	Not stated	89.14%
	Other sexual orientation not listed	99.31%
	Undecided	96.81%
	Unspecified	85.52%
Disability		
	Yes	94.14%
	No	94.43%
	Prefer not to Answer	92.51%
	Not Declared	87.33%
Age		
	16-20	94.30%
	21-30	94.32%
	31-40	94.22%
	41-50	95.24%
	51-60	93.26%
	61-70	88.53%
	71 & above	73.61%

Marriage & Civil Partnership

Civil Partnership	94.78%
Divorced	94.64%
Legally Separated	94.94%
Married	93.23%
Single	94.11%
Unknown	93.04%
Widowed	92.67%

Table 5: Employee Relations casework

Breakdown of ER Casework Data 01 Apr 2025 to 31 Dec 2025		Disciplinarys	%	Grievance	%	Dignity at Work	%
Trust	Employees	21	-	11		10	
Race							
	White	16	76.19%	10	90.91%	7	70.00%
	BME	5	23.81%	1	9.09%	3	30.00%
	Not Stated	0	0.00%	0	0.00%	0	0.00%
Gender							
	Female	12	57.14%	7	63.64%	6	60.00%
	Male	9	42.86%	4	36.36%	4	40.00%
	Not stated	0	0.00%	0	0.00%	0	0.00%
Religious Belief							
	Atheism	5	23.81%	2	18.18%	2	20.00%
	Buddhism	0	0.00%	0	0.00%	0	0.00%
	Christianity	9	42.86%	4	36.36%	6	60.00%
	Hinduism	0	0.00%	1	9.09%	0	0.00%
	Not stated	1	4.76%	3	27.27%	1	10.00%
	Islam	2	9.52%	0	0.00%	1	10.00%
	Jainism	0	0.00%	0	0.00%	0	0.00%
	Judaism	0	0.00%	0	0.00%	0	0.00%
	Other	4	19.05%	1	9.09%	0	0.00%
	Sikhism	0	0.00%	0	0.00%	0	0.00%
Sexual Orientation							
	Bisexual	1	4.76%	0	0.00%	0	0.00%
	Gay or Lesbian	1	4.76%	1	9.09%	1	10.00%
	Heterosexual or Straight	17	80.95%	10	90.91%	8	80.00%
	Undecided	0	0.00%	0	0.00%	0	0.00%
	Other not listed	0	0.00%	0	0.00%	0	0.00%
	Not Stated	2	9.52%	0	0.00%	1	10.00%
Disability							
	Yes	7	33.33%	8	72.73%	2	20.00%
	No	13	61.90%	2	18.18%	7	70.00%
	Not Declared	1	4.76%	1	9.09%	1	10.00%
Age							
	16-20	0	0.00%	0	0.00%	0	0.00%
	21-30	0	0.00%	0	0.00%	0	0.00%
	31-40	6	28.57%	4	36.36%	0	0.00%
	41-50	7	33.33%	3	27.27%	3	30.00%
	51-60	5	23.81%	1	9.09%	5	50.00%
	61-70	3	14.29%	3	27.27%	2	20.00%
	71 & above	0	0.00%	0	0.00%	0	0.00%
Marriage & Civil Partnership							
	Civil Partnership	1	4.76%	0	0.00%	0	0.00%
	Divorced	4	19.05%	3	27.27%	3	30.00%
	Legally Separated	2	9.52%	0	0.00%	0	0.00%
	Married	4	19.05%	5	45.45%	5	50.00%
	Single	8	38.10%	3	27.27%	2	20.00%
	Unknown	2	9.52%	0	0.00%	0	0.00%
	Widowed	0	0.00%	0	0.00%	0	0.00%
	Other	0	0.00%	0	0.00%	0	0.00%

Table 6: Leavers Breakdown

Breakdown of Leavers 01 Apr 2025 to 31 Dec 2025

		Headcount	Workforce %
Trust			
	Employees	371	-
Race			
	White	291	78.44%
	White - British	279	75.20%
	White - Any other White background	6	1.62%
	White Unspecified	3	0.81%
	White - Irish	2	0.54%
	White Other European	1	0.27%
	Mixed Race	14	3.77%
	Mixed - White & Black Caribbean	6	1.62%
	Mixed - White & Black African	3	0.81%
	Mixed - Any other mixed background	2	0.54%
	Mixed - White & Asian	2	0.54%
	Mixed - Other/Unspecified	1	0.27%
	Asian or Asian British	21	5.66%
	Asian or Asian British - Indian	15	4.04%
	Asian or Asian British - Pakistani	5	1.35%
	Asian or Asian British - Any other Asian background	1	0.27%
	Black or Black British	35	9.43%
	Black or Black British - African	24	6.47%
	Black or Black British - Caribbean	9	2.43%
	Black British	1	0.27%
	Black or Black British - Any other Black background	1	0.27%
	Other Ethnic Backgrounds	4	1.08%
	Any Other Ethnic Group	2	0.54%
	Chinese	1	0.27%
	Vietnamese	1	0.27%
	Not Stated	6	1.62%
Gender			
	Female	295	79.51%
	Male	76	20.49%
Religious Belief			
	Christianity	157	42.32%
	Atheism	77	20.75%
	Do not wish to disclose	66	17.79%
	Other	35	9.43%
	Unspecified	11	2.96%
	Islam	10	2.70%
	Buddhism	6	1.62%
	Sikhism	5	1.35%
	Hinduism	4	1.08%
Sexual Orientation			
	Heterosexual or Straight	293	78.98%
	Not Stated	51	13.75%

Bisexual	12	3.23%
Gay or Lesbian	11	2.96%
Other	3	0.81%
Undecided	1	0.27%

Disability

No	275	74.12%
Yes	56	15.09%
Not Declared	38	10.24%
Prefer Not To Answer	2	0.54%

Age

16-20	2	0.54%
21-30	50	13.48%
31-40	87	23.45%
41-50	62	16.71%
51-60	95	25.61%
61-70	67	18.06%
71 & above	8	2.16%

Marriage & Civil Partnership

Married	175	47.17%
Single	140	37.74%
Divorced	32	8.63%
Unknown	12	3.23%
Civil Partnership	7	1.89%
Widowed	3	0.81%
Legally Separated	2	0.54%

Maternity

Maternity Leave	2	0.54%
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