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Section 1

Inclusion and Health Inequalities Strategy 2022-2027



Wirral Community Health and Care NHS Foundation Trust has a 5-year organisational strategy which outlines our vision to be a population-health focused organisation specialising in supporting people to live independent and healthy lives. We are now into the fourth year of delivery of this strategy.

There are a range of supporting strategies that underpin the Organisational strategy including Quality, Digital, People and Inclusion and Health Inequalities strategies. The Inclusion and Health Inequalities Strategy contains our equality objectives for this period. Detailed delivery plans are developed each year for our Quality and People strategies which include specific actions to support our Inclusion and Inequalities ambitions. Progress on the delivery plans for these two strategies is included in this report.

To support Inclusive leadership throughout the organisation being led from the top, each of the board members have Equality, Diversity and Inclusion objectives to meet.

Our Strategies can be accessed [here](#)



Section 2

Overview of population focussed inclusion activity



To help us understand the people we care for we collect information about you and your preferences and characteristics such as age, gender, religion, ethnicity, sexual orientation and any disabilities or impairments you may have.

We use this information to make sure we communicate well with you; we make adjustments in how we deliver our services to you to take account of your needs.

We also use this data to monitor which groups of people are accessing our services and who is less able to, and we use this to inform how and where we deliver our services, targeting those at most disadvantage. You may be asked some of these questions when you attend for your appointment, or in advance of this via text message or via the telephone and you can of course choose not to answer any or all of these, but it helps us if you do choose to answer.

All this information is all held confidentially within the organisation. This information supports us in our compliance with our Public Sector Equality Duties and the Accessible Information Standard (AIS) ensuring we treat people fairly and equitably and we communicate in a way that supports people with disabilities or impairments.

We have been making ongoing improvements to how and when we collect this information and ensuring that we only ask you when we first see you and then periodically to make sure nothing has changed. The chart below shows as a percentage of all patient records, how many have the patients' details recorded under a range of characteristics. The chart shows an improvement for the 2024/25 period compared to the 2023/24 period for Religion and Sexual Orientation, but a small decline in recording performance for Ethnicity and a sharper decline for marital status.

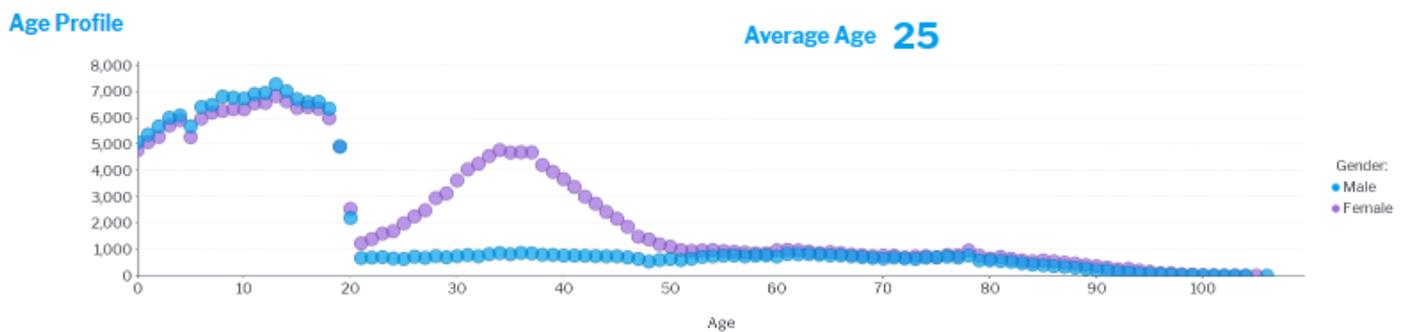
Protected Characteristics Recording

Year	Ethnicity	Marital Status	Religion	Sexual Orientation
2022/23	53.2%	21.2%	3.0%	1.3%
2023/24	69.6%	21.7%	21.8%	7.8%
2024/25	64.0%	3.1%	25.0%	10.1%

Information about the people we serve – age range of our patients

The following section shows information about the people who are using our services. We split this information into groups of characteristics that are protected under law by the Equality Act 2010, commonly called the “Protected Characteristics”.

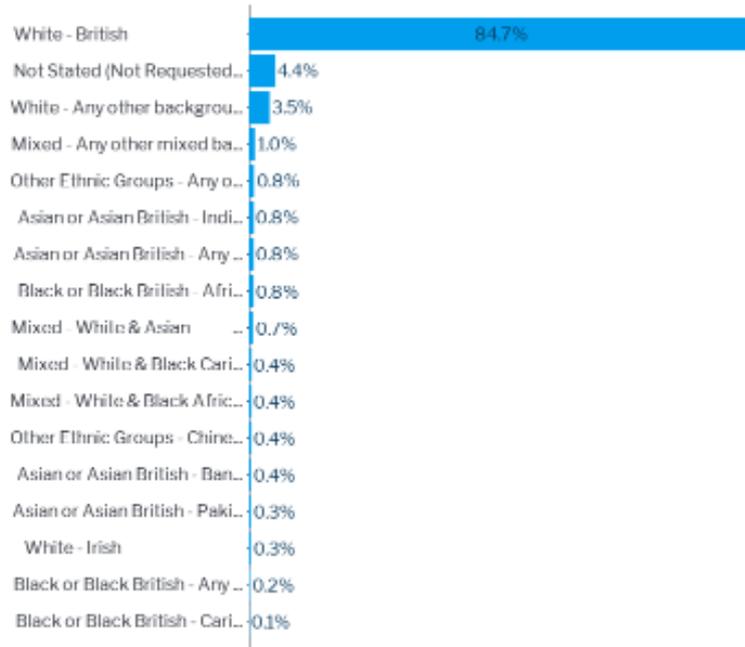
This shows the number of patients in each age banding that we saw in 2024/25 (split by gender).



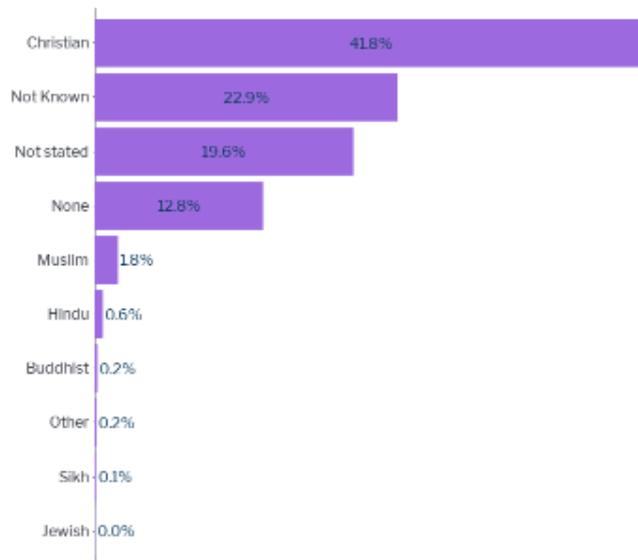
Information about the people we serve – other protected characteristics

This shows the % of patients we saw in 2024/25 by a range of protected characteristics. We are aware that not all patient demographics are recorded and this is an identified action for 2025/6.

Ethnicity



Religion



Accessibility and Inclusion Template

In 2022/23 we undertook a Quality Improvement project to improve the collection of protected characteristics data and to clarify and improve how we record and act upon the communication needs of patients and carers that result from disability and impairment.

To do this we developed a single form which appears on every patient's electronic health record. We have asked staff to complete this for every patient we see either face to face or via telephone or video.

During 2023/24 & 2024/25 we continued to monitor completion rates across our services, setting an ambition to have the template completed for 85% of all new patient contacts. Whilst we have continued to make progress toward this ambition in 2024/25 and two of our 5 directorates are now performing over target, there is further work for us to do to achieve this level of performance and to use digital innovation to support this.

Health Inequalities Waiting List Tool

During 2024/25 we have continued to evolve the tool we piloted in the previous year to support our services in managing our waiting lists in a way that helps us to reduce potential health inequalities and allows us to better prioritise those who are most in need whilst waiting for a service.

Patients receive a pre-appointment questionnaire whilst on the waiting list for these services. This is texted out to the patient who can complete it on their smartphone, tablet or computer, or call us to assist with completing it over the telephone. Alternative formats will be made available for those patients identified needing additional support.

This data is used alongside patients own clinical coding and other data sets including the Indices of Multiple Deprivation to identify those people who may be a risk of experiencing health inequalities.

The tool is aligned to the National Core 20 Plus 5 model and Patient Safety Incident Response Framework (PSIRF) and is then used to flag anyone at increased risk of inequalities and allow us to prioritise them or adjust their care accordingly alongside standard clinical triage. Work in 2024/25 focused on digital innovation and making the questionnaire for the tool available for patients to complete digitally at their convenience prior to their appointment. Work is ongoing to develop the tool to embed it as part of usual business for our services, supporting us to reduce known health inequalities.

Armed forces community Inclusion

The Trust signed the Armed Forces Covenant in June 2022, confirming our commitment to support the armed forces recognising the value serving personnel, both regular and reservists, and military families contribute to the Trust and our country.

To support this work, we established the Armed Forces Community Working Group to include those with lived experience, led by an Executive, Management and Clinical leads.

The work of the group has included ongoing partnership development work and engagement with other related local networks and partners including Poppy Factory, Cheshire and Wirral Partnership NHS Foundation Trust, Primary care colleagues and more.

During 2024/25 the Working Group focussed on working towards the annual review of VCHA Veterans Aware Status.

The group has also established an Armed Forces Community Staff Network to support those members of our workforce who are a part of this community.



EMPLOYER RECOGNITION SCHEME

SILVER AWARD 2023

Proudly supporting those who serve.



Inclusion Events and Campaigns

A number of Events and Campaigns throughout the 2024/25 period have been hosted by the Trust, aimed at encouraging both staff and members of the public to celebrate diversity with us, and to embed inclusive practices to ensure that we are getting it right for everyone.

Menopause network - in October 2024 to celebrate Menopause Day a number of awareness raising events were held including an online "cuppa and a chat" to open the network up to new members. The network continues to meet regularly and has an active membership.

LGBTQ+ Pride - the Trust formally supported New Brighton Pride in August 2024 for the third successive year. Supported from our LGBTQ+ staff network, our Sexual Health Wirral service and our colleagues in Sahir (a local HIV support organisation) ensured that we celebrated the diversity in our communities and our workforce showing positive allyship to our LGBTQ+ colleagues, friends, families and to LGBTQ+ communities where we provide services.

LGBT+ History Month (Feb 24). We produced an infographic to support staff with understanding the issues faced by the LGBTQ+ community and to understand some of the language and terminology currently in use around this community.

Staff Network Celebration event and understanding allyship - in December 2024 all of our staff networks came together for a half day celebration event to celebrate our individual and collective successes over the last 12 months and to reflect on and celebrate our intersectionality. We were joined by the Trust board who were able to share in our celebrations and to contribute to our work on defining how 'allyship' should look and feel within our organisation.

Carers Awareness week - during carers week (June 2024) the Working Carers staff network and the HR team supported an Information Stand in St Catherine's Health Centre. The stall was supporting unpaid carers within the organisation or people who use our services, to identify themselves as a carer. We shared a wealth of information about the support available to carers across Wirral and to carers who are also a part of our workforce. This information included the carer's passport, useful apps, and information about our policies and procedures that support staff with caring responsibilities. The Trust also had a marketplace staff at Wirral Carers Alliance 'Commitment to carers event in New Brighton and took part in Healthwatch's Carers event at Arrowse Park Hospital in the summer working closely in partnership with Hospital Trust Colleagues and a wide range of organisations offering services to carers.

Ability Network - the group has welcomed new members during the year and widened to include neurodivergent staff. This has highlighted the need to increase awareness and promote access to shared resources and learning. The group has contributed to the review of the following policies: managing attendance, reasonable adjustments, navigating access to work processes and flexible working.

Cheshire and Merseyside NHS Prevention Pledge

Wirral Community Health and Care NHS Foundation Trusts has continued to support and actively strive to put 'prevention first' in line with the commitments we have made under the Cheshire and Merseyside NHS Prevention Pledge

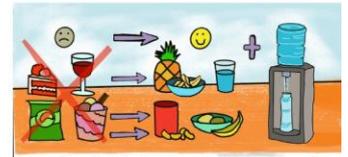
The NHS Prevention Pledge is underpinned by 14 'core commitments' (below) that have been developed through extensive consultation with representatives from provider Trusts, NHS England, local authority public health teams, Office for Health Improvement and Disparities (OHID), and third sector organisations across the region.

Wirral Community Health and Care NHS Foundation Trust signed up to the pledge in 2022/23 and has worked on delivering 14 commitments during 2024/25.

The pledge links strongly to the ambitions in our strategies and is reflected in our delivery plans. As a result, the pledge contributes to key priorities for the Trust including; Population Health, Health Inequalities; Workforce Health and Wellbeing, Social Value and supporting our role as an Anchor Institution.



CHESHIRE & MERSEYSIDE NHS PREVENTION PLEDGE



1 Prioritise long-term focus on prevention, early intervention, embed it in governance. Appoint Exec Sponsor, MECC (make every contact count) prevention is everybody's business

11 Review food & drink provision make it healthier, convenient & affordable. Limit access to high fat/sugar/salt content. Increase access to fresh water & encourage reusable bottle refills

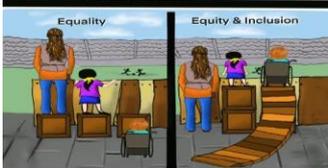


2 Create conditions to support service managers & staff to take a Quality improvement approach to review & transform services to embed prevention.

5 Increase social value by establishing anchor practices, that positively impact on the wider determinants of health AND climate health. Use Social responsibility in procurement and purchasing supplies.

8 Support workforce development, train staff in brief advice & referral in supporting people to eat well, be physically active, reduce harm from tobacco and alcohol and promote mental well-being.

12 Support the sub-regional physical activity strategy; promote & create opportunities for people to be physically active, on & off site and in line with active travel & sustainable management plans.



MAKE EVERY CONTACT COUNT MECC
A MECC is a brief intervention that can be delivered in just 10-15 seconds. MECC is NOT a time-consuming intervention. MECC is a simple, evidence-based, brief intervention that can be delivered in just 10-15 seconds. MECC is a simple, evidence-based, brief intervention that can be delivered in just 10-15 seconds.

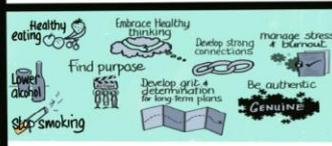


3 Use Marmot principles; develop approaches to prevention, work with partners at place to address inequalities, deliver local priorities and prevention plans (as per NHS Plan & COVID rec)

6 Adopt & embed a MECC approach, increase the number of brief or very brief interventions, supporting people to eat well, be physically active, reduce harm from alcohol & tobacco, promote mental well-being

9 Ensure a smoke free environment, linked to support to stop smoking for patients and staff who need it

13 Sign up to the 'Prevention Concordat for Better Mental Health for All' and to embed the Prevention Concordat across health & care policies and practices.



4 Work in partnership of common prevention pathways across Trusts work on prevention that reduces the impact of disease through lifestyle advice and cardiac or stroke rehabilitation programmes.

7 Work with primary care, LA, Voluntary sector to refer to non clinical support via social prescribing, build community capacity to reduce GP, A&E, hospitalisation, medication use and social care

10 Workplace health programmes, foster org culture that promote workplace resilience, creates opportunities for staff to eat well, be active, reduce harm from alcohol, tobacco & promote MH well-being

14 Monitor the progress of the pledge against all commitments And to publishing the results of our progress at regular intervals.

Section 3

Overview of workforce focussed inclusion activity



Workforce Accreditations

The Trust has continued its work to achieve a range of standards and accreditations focussed on ensuring that we are an inclusive organisation for our workforce and the following accreditations have been achieved or maintained during 2024/25

- Disability Confident Employer
- Mindful Employer
- Menopause Pledge
- Rainbow Pin Badge
- Veteran Aware (VCHA)
- Silver Defence Employer Recognition Scheme



Inclusion Learning and Development

Ensuring our people have the relevant knowledge, skills and competencies to deliver our Inclusion and Health Inequality ambitions is a key deliverable in our strategies. In 2024/25 we have achieved the following outcomes.

- Maintained compliance with Mandatory Equality Diversity and Inclusion Learning at over 90% across the whole year
- The trust continues to work with local organisations who support people with Learning Disabilities (LD) and Autism to implement the Oliver McGowan Mandatory Training for LD and Autism. The training is delivered in two parts, the first is eLearning and the second is a workshop delivered by people who have lived experience of LD and Autism. The Trust has maintained well over 90% target compliance with the eLearning element of this training in 2024/and has commenced delivery of the second part of the Tier 2 training to relevant staff via our partnership with Autism Together, and we remain in line with our three year delivery plan target.
- We have an inclusion champions network in the organisation, and they have continued to meet regularly to share best practice around Equality, Diversity and Inclusion and to share with their teams information and experiences to support our understanding of vulnerable or excluded people and communities.
- During 2024 the Behavioural Standards Framework continued to be implemented which had been shared with all staff network groups for their involvement into the content.
- As part of our Festival of Leadership, during October-November 2024, sessions were delivered on Microaggressions and Allyship to the Senior Leadership Forum within the organisation.

- At the Senior Leadership Forum in November 2024 all delegates attended a session on Health Inequalities to raise awareness of the impact we have as health professionals on the outcomes and experience of marginalised or vulnerable groups.
- The 5 staff networks and representatives from the Inclusion and Human Resources teams celebrated the achievements of the networks at a celebration event in December 2024. This event also continued our work on defining what 'Allyship' was for us all and helped us to define the behaviours we would like to see amongst our colleagues, ensuring that respect and kindness is fostered for everyone. The event shared with Trust Board members the work of the networks over the year and to discuss the role that the Board have in leading the organisation by sharing and discussing the emerging vision for active allyship within the organisation.

Engagement Forums

The Trust also has two Engagement forums, Involve and Your Voice who support the organisation in our quality improvement work by ensuring we consult with and involve both under 18's (Involve) and adults (Your Voice) in the co-design of our services.

Both groups have been meeting on a regular basis throughout 2024/25 and we have continued focus on recruitment to the groups from a diverse range of individuals to better reflect the diversity in the communities we serve.

Both forums have been involved in a range of initiatives and reviews of public facing information resources and provide invaluable feedback supporting the services to ensure their quality improvements are effective and meaningful to the patient. For example, the Your Voice group were engaged with the development of a 'Patient Information Leaflet' detailing the choice of continence products available as the service introduced washable continence products, ensuring the content, including the language used and tone of the leaflet was understood and well received by patients. The group were also consulted on a range of quality improvements implemented our urgent care services helping to support the public in understanding what our Walk-in Centre and Urgent Treatment Centre is able to treat.

Celebration and Sharing Events

As a showcase opportunity for our services who have undertaken Quality Improvement Projects and as an opportunity to celebrate and share these innovations and improvements with others, we run Celebration and Sharing events twice a year. During 2024/25 we had two successful events in the main atrium area of St Catherine's Health Centre. These events are a great opportunity for services to show how they are improving for better patient outcomes. These improvements often include a focus on access to services for all, ensuring that the patient

experience is also positive and that we are able to deliver better outcomes for everyone. We were also joined by a range of key stakeholder organisations at our Celebration and Sharing events including organisations such as DA Languages, Signalise Cooperative, Age UK, Healthwatch, and others who we work with to ensure we make our services accessible and appropriate for the diverse individuals who may need them.

Staff Networks update

The trust has 5 staff network groups and is currently supporting the formation of a sixth Armed Forces Community Staff Network.

Our staff networks provide important peer support and a sense of belonging for staff who share a particular protected characteristic or other vulnerability. Alongside the important function of support for members, the network also provides important steer and challenge to the organisation around its strategic direction, with a wide range of policies and procedures going to some or all of the staff networks for consultation and feedback. This helps to ensure that the Trust remains an inclusive and supportive organisation for everyone to work in but also ensures that the policies that impact on patients and service users are also inclusive and put prevention first, ensuring we do all that is possible to tackle health inequalities.

Our staff networks are:

- Ability Staff Network (including long term conditions, disabilities and neurodiversity)
- Black Asian and Minority Ethnic (BAME) Staff Network
- PRIDE Staff Network (LGBTQ+)
- Menopause Staff Network
- Working Carers Staff Network
- Armed Forces Group (under development)

Each of our staff networks benefit from an executive sponsor. The sponsors are committed to gaining a deeper understanding of the groups' lived experience and representing their network at the board level providing escalation of any identified issues to their exec and non-exec colleagues.

Section 4

Workforce Inclusion Data

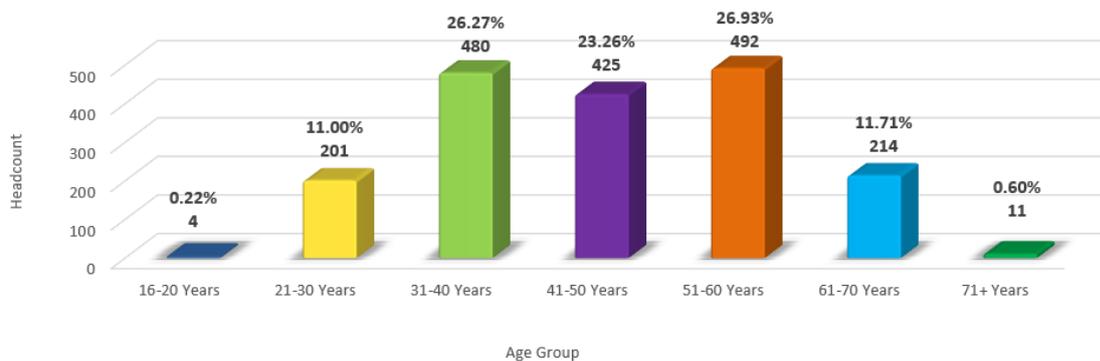


Reporting is a requirement of the public sector equality duty. The next few pages tells you a bit more about the make-up and profile of the workforce. Where possible we have compared to 2021 census data available [here](#).

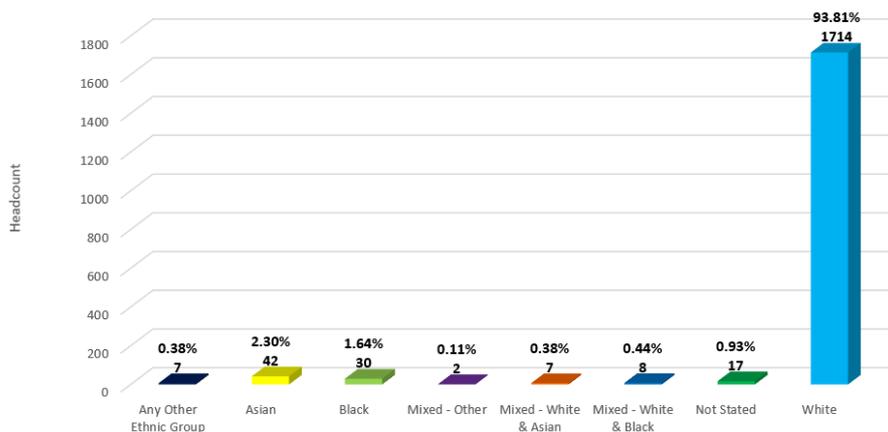
Workforce diversity

This information has been generated from our Electronic Staff Record (ESR) system and shows data as of 31 March 2025.

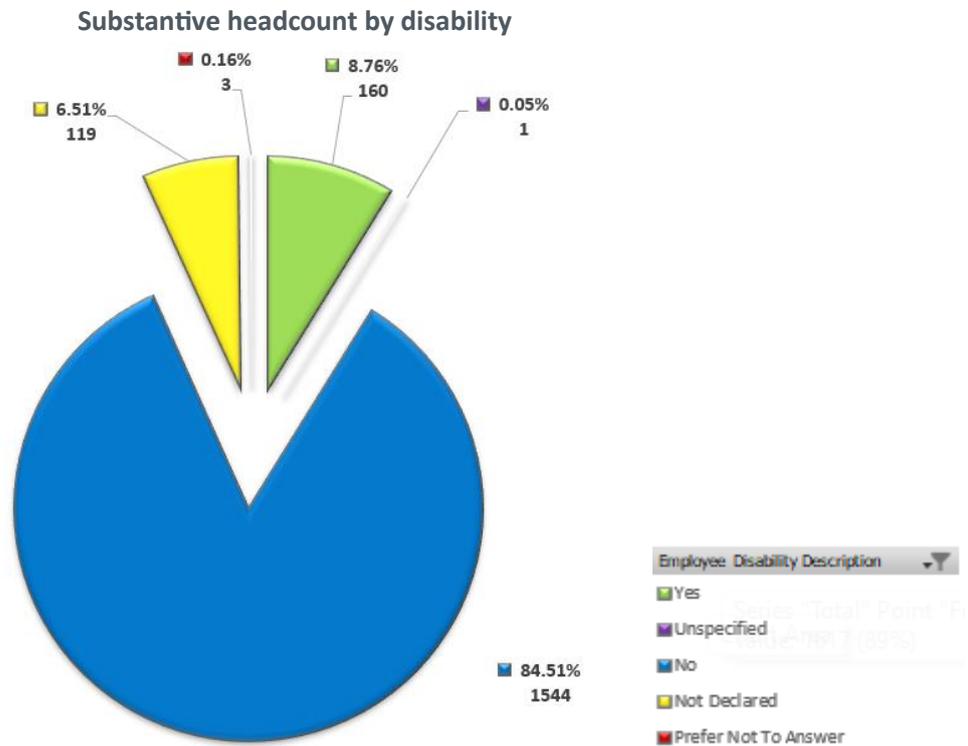
Substantive headcount by age group



Substantive headcount by ethnicity

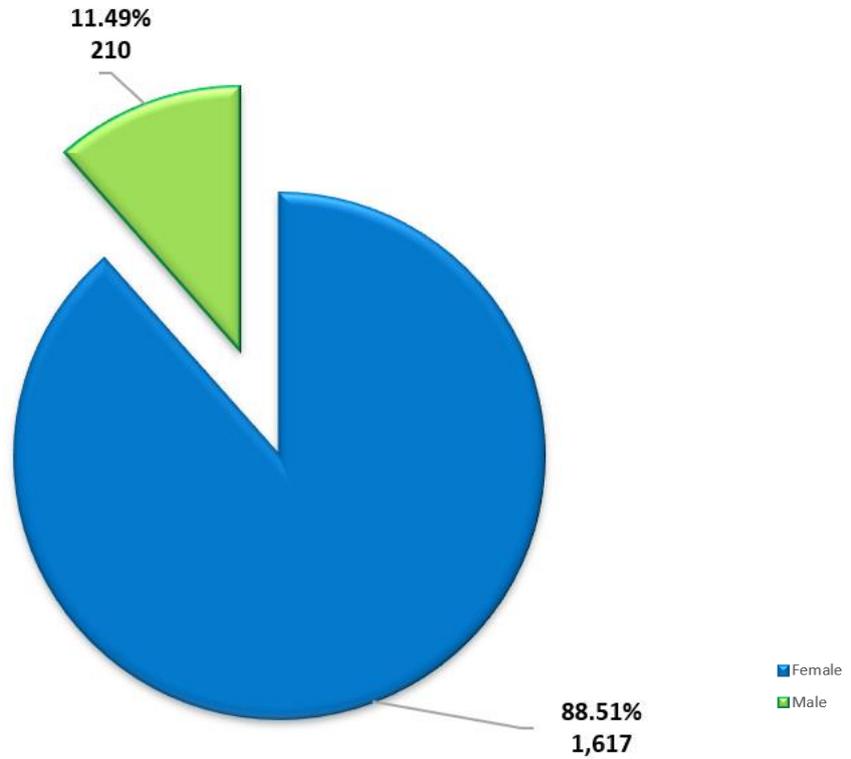


BAME staff increased from 4.4% March 2024 to 5.26% in March 2025.



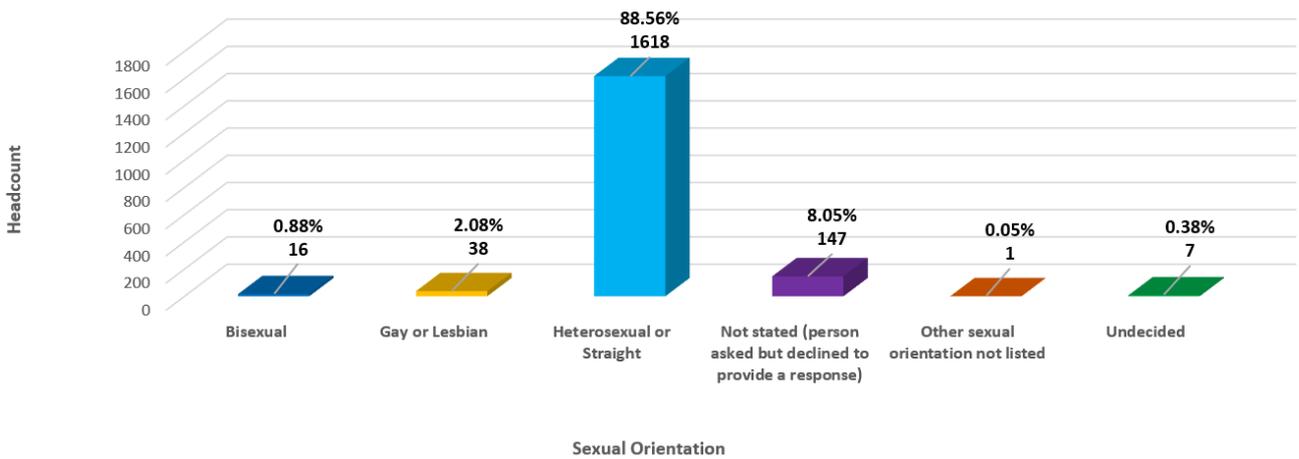
Declaration rates have improved from 7.26% in March 2023 to 8.76% in March 2024. This compares to a Wirral figure for Disabled (under Equality Act) of 22.2%.

Substantive headcount by gender



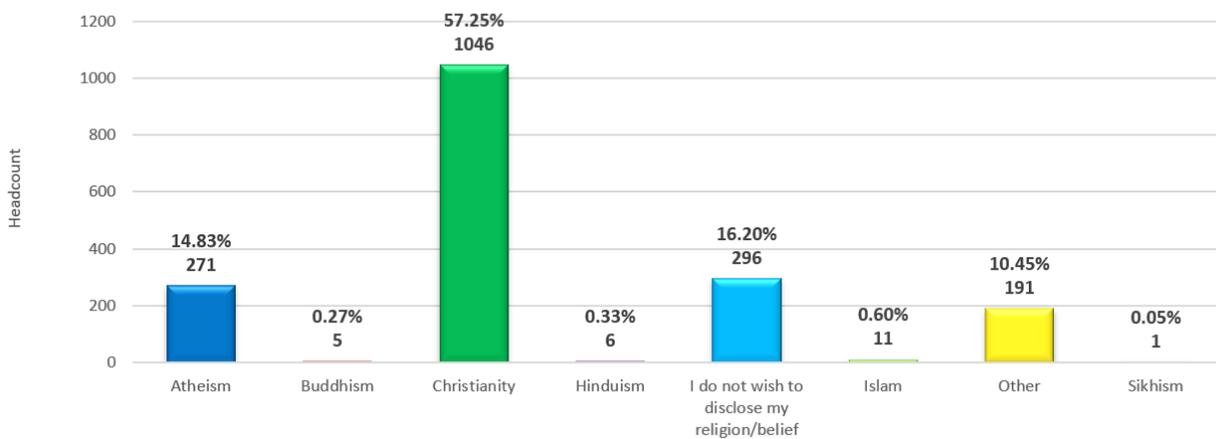
This has not changed from March 2023 to March 2024. This compares to Wirral 51.6% Female. Trans/non-binary status is not recordable in ESR.

Substantive headcount by sexual orientation



This has not significantly changed since March 2024 and this compares to Wirral 90.65% straight/heterosexual.

Substantive headcount by religion and belief



The measure for Christianity for the Trust has not significantly changed from March 2024 and is at 57.25% which compares to a Wirral Population figure of 55.0%. Staff with the religion and belief of Islam / Muslim is 0.33% compared to the Wirral 1.00% and has gone up by 0.05% from 2024.

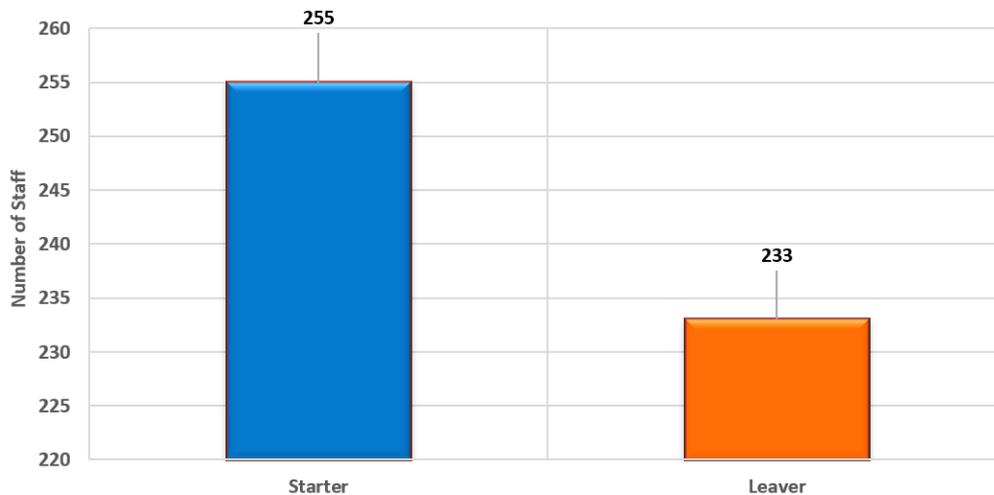
Disciplinary cases

Closed Cases 2024/25	Ethnicity	Sex	Disability
17 in total	16 white British	14 female	4 disabled
	1 BAME	3 male	11 not disabled
			2 not stated
Patient related: 5 out of 17 cases patient related incidents			

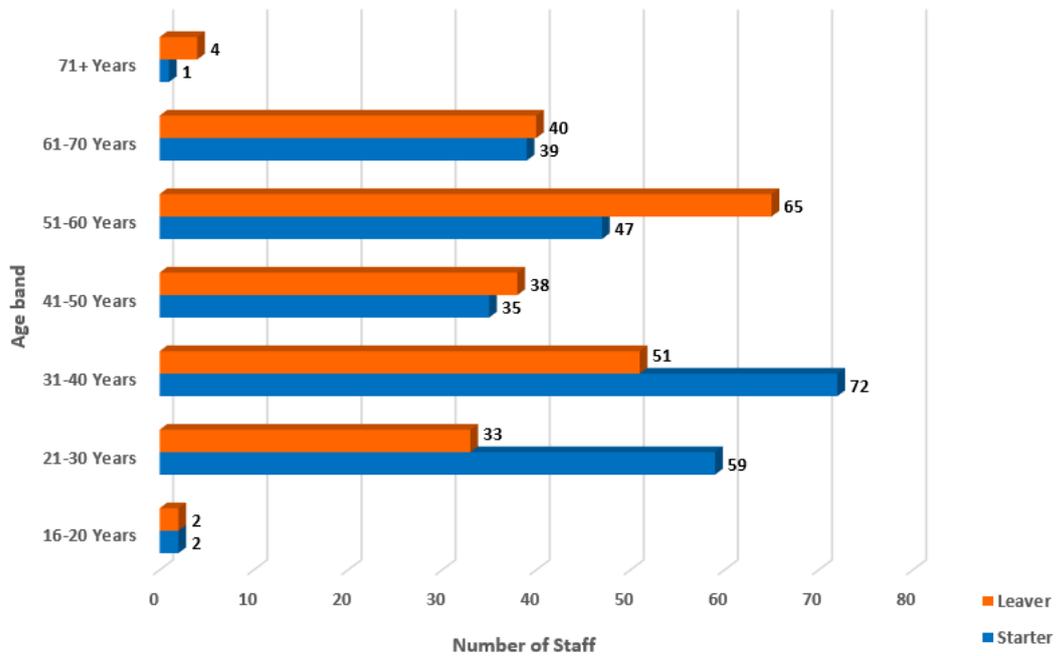
Starters and leavers

The following graphs tells you a bit more about the make-up and profile of new starters in the organisation and those that have left the organisation, by protected characteristic.

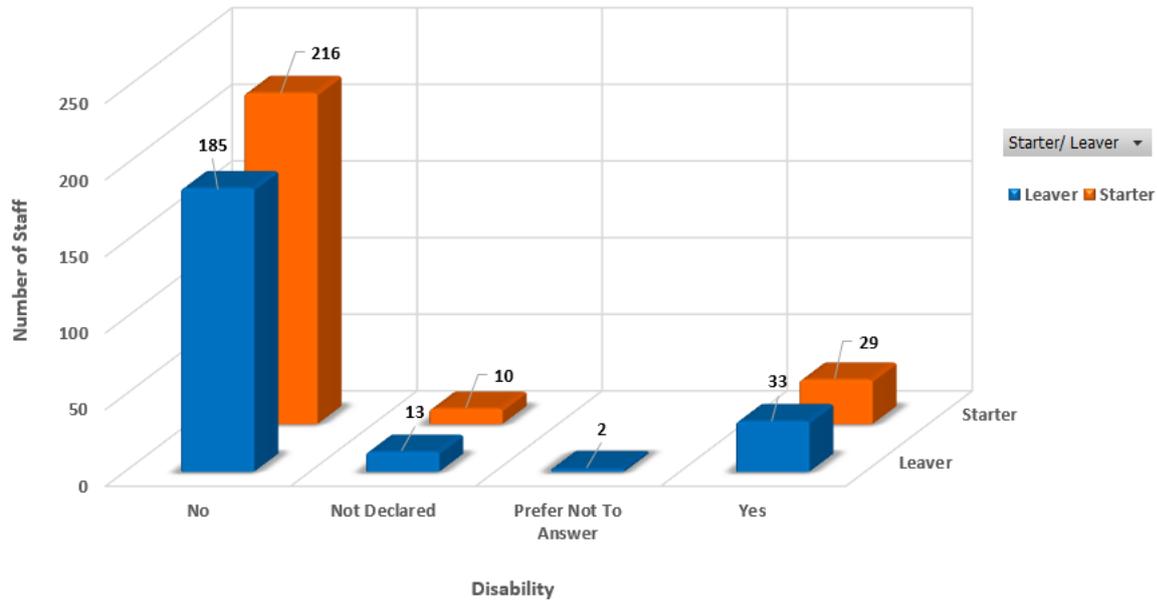
Substantive total of starters and leavers



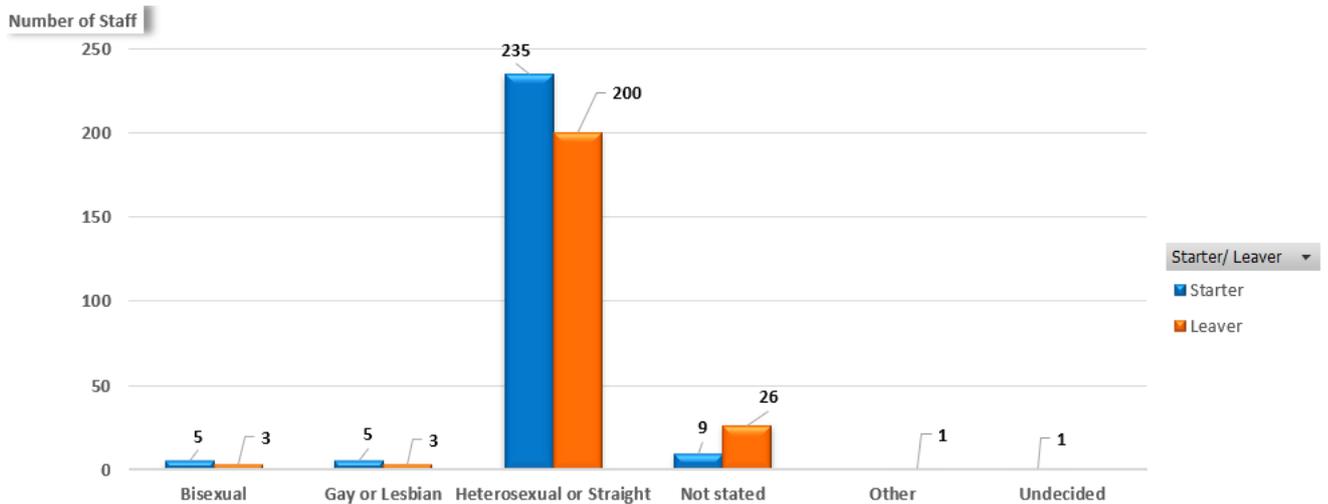
Substantive total of leavers and starters by age



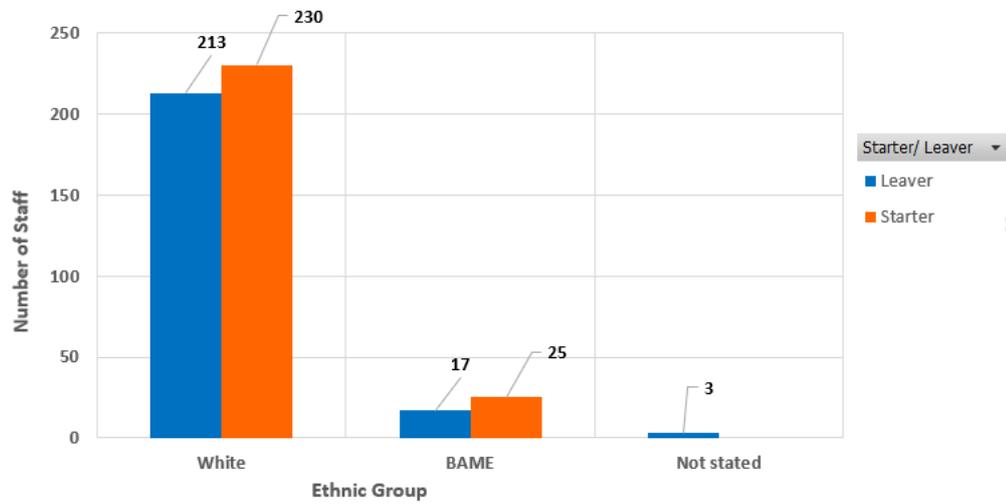
Substantive total of starters and starters by disability



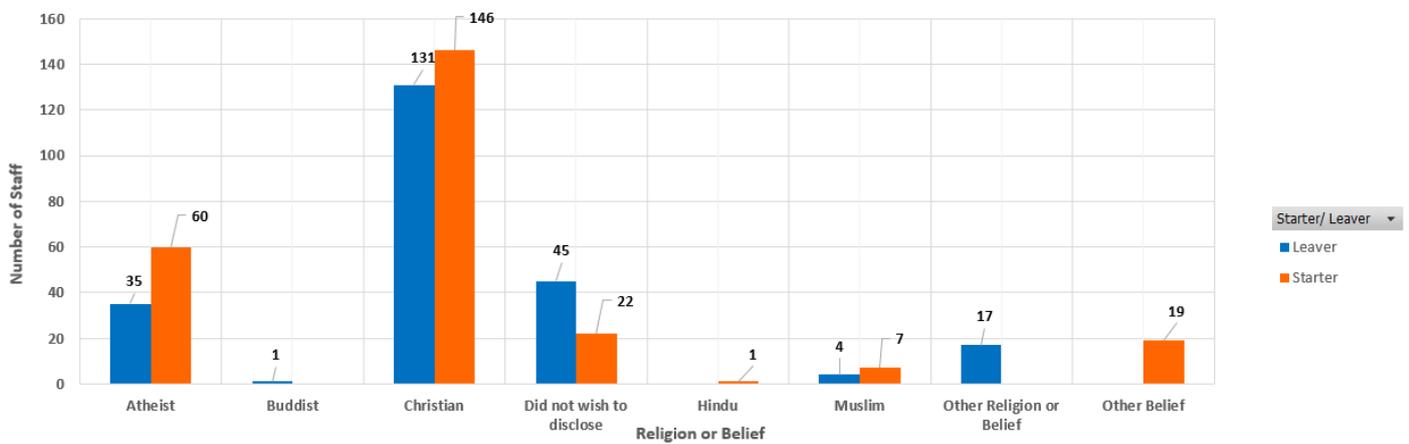
Substantive total of leavers and starters by sexual orientation



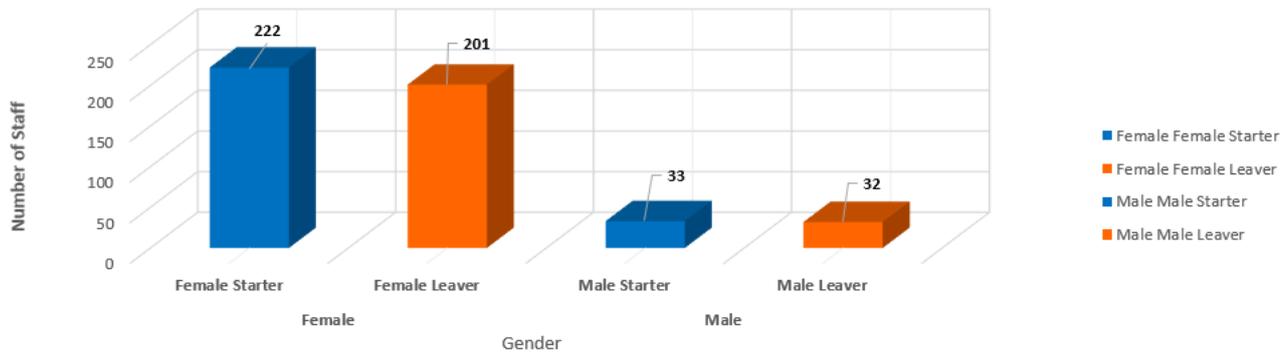
Substantive total of leavers and starters by ethnicity



Substantive total of leavers and starters by religion or belief



Substantive total of leavers and starters by gender



Recruitment - positive action

During 2024/25 the Trust continued to support positive action in relation to increasing diversity through its inclusive recruitment programmes.

For disabled applicants we continue to maintain our accreditation with the Disability Confident Scheme at Employer level status.

For those applicants who state they meet the Armed Forces status when applying for roles will have guaranteed interview scheme implemented if they meet the essential criteria for roles and this resulted in 16 applicants being offered interviews.

We continued to use positive action to increase the number of BME staff within the Trust and for senior roles which are Band 8a and above applicants have the guaranteed interview scheme implemented if they meet the essential criteria for roles and this resulted in 13 applicants being offered interviews.

Section 5

Assurance and compliance
against Statutory duties



Equality Delivery System

The Equality Delivery System (EDS2022) is designed to support local and regional NHS organisations to help them fully develop inclusive services in response to the NHS Long Term Plan.

In 2024/25 we implemented the third version (EDS2022) of the EDS and did this jointly with Wirral University Teaching Hospitals NHS Foundation Trust focussing on the experience of Learning Disability patients for Domain 1.

The EDS process was undertaken alongside local and place-based partnerships of NHS and local authority commissioners, providers and others; and ultimately Integrated Care Systems (ICSs).

EDS now supports the outcomes of the Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES).

The EDS assists organisations in looking at the physical impact of discrimination, stress and inequality, providing an opportunity for organisations to support a healthier and happier workforce, which will in turn increase the quality of care provided for patients and service users.

The EDS comprises eleven outcomes across three Domains:

1. Commissioned or provided services.
2. Workforce health and wellbeing.
3. Inclusive leadership.

Services examined this year for Domain 1 were:

- Community Dental services

The Trust was rated '**Achieving**' across all three domains. The framework can be seen in full at [NHS England/Equality Delivery System 2023](#).

Improvement actions identified are incorporated into Trust-wide delivery plans and service improvement plans for 2025/26.

The full report and the accessible summary report are available [here](#).

Workforce Race Equality Standard (WRES)

The annual report and action plan were completed with involvement from the BAME Staff Network.

The data was submitted to the national team in May 2025 and, in line with requirements, will be published on the external website in October 2025.

9 indicators - based on data from the annual national NHS Staff Survey and % BME staff in the Trust using ESR, disciplinarys, applications and appointed staff and board membership.

Based on WRES data for 2024/25 key actions were identified as:

- improve the awareness of issues faced by BME staff
- to support the BAME staff network and new co-chairs
- Deliver education and training sessions on cultural awareness and anti-racism
- Celebrate and promote inclusion events to enhance understanding and support for staff

Workforce Disability Equality Standard (WDES)

The annual report and action plan were completed with involvement from the Ability Staff Network.

The data was submitted to the national team in May 2025 and, in line with requirements, will be published on the external website in October 2025.

10 indicators - based on data from the annual national NHS Staff Survey and % disabled staff in the Trust using ESR, capability, applications and appointed staff and board membership.

Based on WDES data for 2024/25 key actions were identified as:

- To seek to understand the issues faced by disabled and neurodiverse staff
- Support the promotion the awareness and utilisation of reasonable adjustments
- Deliver education and training sessions on disability and neurodiversity
- Celebrate and promote inclusion events to enhance understanding and support for staff

Gender Pay Gap

Gender Pay Gap is a measure of the average difference between how much men and women are paid in an organisation.

We must find and compare:

- the average difference between men and women's hourly and bonus pay
- the percentage of men and women in the highest, middle and lowest pay groups in the organisation

All companies, including NHS organisations, with more than 250 employees have to declare their gender pay gap data which needs to be published within 1 year of the data.

The results for 2024/25 (31st March 2024) for the mean average hourly rate demonstrate a pay gap of 8.59%. The second measure is the median difference with a 0.56% gap, a slight increase compared to 2023.

Download the full Gender Pay Gap Report in our [Publications](#).

Race Pay Gap

Race Pay Gap is a measure of the average difference between how much staff from different ethnic backgrounds are paid in an organisation.

We must find and compare:

- the average difference between staff from a BME background and white staff hourly and bonus pay
- the percentage of BME and white staff in the highest, middle and lowest pay groups in the organisation

This is now a requirement as part of the NHS England Equality, Diversity and Inclusion Improvement Plan and this is the second year the Trust has undertaken a Race Pay Gap analysis. The report is not yet available but will be published on the Trust website.

Section 6

Inclusion Priorities 2025/26



Our priorities

The following priorities have been identified for 2025/26 from our People Strategy, our Quality Strategy and our Inclusion and Health Inequalities Strategy and their delivery plans.

- Continue our work around Carers and work with Wirral Carer Alliance to pilot their Carers Standards Framework within a Community Nursing Team
- Continue our roll out of the Oliver McGowan Mandatory Training on Learning Disability and Autism level 2 training, prioritising our service who see most people with Learning Disability or Autism with an aim to achieve our 30% target of Eligible staff by the 31/03/2026
- Continue to develop better ways to collect and manage data about protected characteristics, disabilities or impairments and reasonable adjustments, ensuring compliance with the Accessible Information Standard (AIS) and sharing practices with the hospital trust
- We will further develop and evaluate our approach to waiting list management and prioritising those at risk of experiencing health inequalities across all our services as business as usual
- We will continue to work with our providers and other key stakeholders including the hospital trusts and members of the communities we are supporting, to improve our Interpretation and Translation service helping to remove barriers for those who do not have English as a first language or have sensory impairments.

- Continue our work with those from Black, Asian and minority ethnic communities via Wirral Multicultural Organisation and Wirral Change alongside our partners at the hospital trust to better understand and improve their access, experience and outcomes of our services
- Develop and launch cultural awareness training for managers and staff, utilising the behavioural standards framework and including reference to the importance of allyship and the identification of different examples of discrimination
- We will demonstrate our commitment to becoming an Anti-racist organisation by developing and launching our Anti-racism statement and implementing the North West BAME Assembly Anti-racism framework and achieve the bronze status by the end of the financial year.

Inclusion
Getting it right for everyone