Workforce Race Equality Standard (WRES) Report
April 2024 – March 2025

Introduction

Ramsay Health Care UK Operations Limited is committed to the equality and diversity agenda as defined by the protected characteristics of age, disability, gender reassignment, marriage and civil partnerships, pregnancy and maternity, race, religion or belief, sex and sexual orientation.

This is demonstrated by our corporate vision 'The Ramsay Way', which ensures staff, patients and customers, are treated fairly and equitably regardless of their individual preferences and beliefs.

- We value integrity, credibility and respect for the individual.
- We build constructive relationships to achieve positive outcomes for all.
- We believe that success comes through recognizing and encouraging the value of people and teams.

The Workforce Race Equality Standards are part of our commitment to equality and diversity as outlined in our Equality and Human Rights Policy LS-002. It has been developed as a tool to measure improvements within the workforce with respect to Black and Minority Ethnic (BME) staff.

This report provides a summary of the findings and recommendations for improvement in respect of the WRES which in turn contributes to our wider equality and diversity strategy.

1. **Name of organisation**
   Ramsay Health Care UK Operations Limited

2. **Date of report**
   Month: April
   Year: 2025

3. **Name and title of Board lead for the Workforce Race Equality Standard**
   Mr Nick Costa, Chief Executive Officer

4. **Name and contact details of lead manager compiling this report**
   Gemma Bullock – Culture Partner

5. **Who has this report has been sent to:**
   This report will appear on our company website. It will be sent to third parties including the WRES Implementation Team and shared with Ramsay People and Culture Forum and the People Governance Committee for actions to be progressed.

6. **This report has been signed off by on behalf of the Executive Board**
   Mr Nick Costa, CEO, July 2025.

Background Narrative

7. Any issues of completeness of data?

Data was collected from Ramsay's electronic personnel system Workday and our company engagement survey conducted by Qualtrics.

8. Any matters relating to reliability of comparisons with previous years?

Our Workday system enables colleagues to self-report on their own personal data including their ethnicity. As such the integrity of the data is greater than prior to the implementation of Workday as it is self-reported. The organisation has a clear plan to increase reporting in this area in the coming reporting period.

9. Total number of staff employed within this organisation at the date of the report.

5,969 contracted employees (Previously 5,757)

10. Proportion of BME staff employed within this organisation at the date of the report?

15% (Previously 14%)

11. The proportion of total staff that have self–reported their ethnicity?

89% (previously 89%)

12. Have any steps been taken in the last reporting period to improve the level of self-reporting by ethnicity?

Our HR Information System, Workday allows all employees to update personal data via self-service. Employees are encouraged to self-report via an annual companywide campaign and during the induction programme. We run annual campaigns to ensure that along with other personal data, ethnicity is reviewed and updated.

13. Are any steps planned during the current reporting period to improve the level of self-reporting by ethnicity?

89% of employees have reported their ethnicity on Workday. We will continue to promote the ability for employees to tell us information regarding themselves including their ethnicity and other demographics they can share and disclose on their profiles within the Workday system. This is part of a wider annual campaign to ensure that personal data is correct and updated.

Workforce Data

14. What period does the organisation's workforce data refer to?

1st April 2024 – 31st March 2025.

Workforce Race Equality Indicators

For each of these workforce indicators, compare the data for White and BME staff.

15. No. of Non-Clinical and Clinical staff headcount.

Data for reporting year: 1st April 2024 – 31st March 2025

Non-Clinical Staff

	White	BME	Unknown	Headcount Total
Support	80%	9%	11%	2500
Middle	86%	6%	8%	177
Senior	90%	3%	7%	123
Very Senior Managers	50%	25%	25%	8
TOTAL	2284	232	292	2,808

Clinical

	White	BME	Unknown	Headcount Total
Support	67%	22%	11%	2923

Middle	79%	11%	10%	175
Senior	76%	5%	19%	42
Very Senior Managers	100%	0%	0%	1
Doctors	80%	10%	10%	20
TOTAL	2,143	658	360	3161

The proportion of non-clinical BME staff varies between management levels with the lowest representation at senior manager level and the highest level at very senior manager level.

The proportion of clinical BME staff decreases with increasing levels of seniority between support staff to senior staff.

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

Reporting Year	
March 2022	The relative likelihood of appointing someone white from the shortlisting stage was 0.53. The relative likelihood of appointing someone BME from the shortlisting stage was 0.57.
March 2023	The relative likelihood of appointing someone white from the shortlisting stage was 0.89. The relative likelihood of appointing someone BME from the shortlisting stage was 0.93
March 2024	The relative likelihood of appointing someone white from the shortlisting stage was 0.89. The relative likelihood of appointing someone BME from the shortlisting stage was 0.83
March 2025	The relative likelihood of appointing someone white from the shortlisting stage was 0.93. The relative likelihood of appointing someone BME from the shortlisting stage was 0.81.

Therefore, the relative likelihood of a white employee being appointed from shortlisting compared to BME employees is 0.87. This figure was 1.1 for the previous reporting year.

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

The figures for this reporting period indicate that both groups are not equally impacted:

- **White: 0.014%**
- **BME: 0.026%**

Therefore, the relative likelihood of BME employees entering the formal disciplinary process compared to white employees is 1.88 (with 1.38 for the previous reporting year).

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

Reporting Year	White	BME	Unknown/Prefer not to say
March 2022	0.10	0.07	0.64
March 2023	0.11	0.11	0.11
March 2024	0.25	0.20	0.20
March 2025	0.33	0.30	0.25

The relative likelihood of white employees accessing non-mandatory training and CPD compared to BME employees is 1.01 (with 1.04 for the previous reporting year).

Ramsay
Health Care

Ramsay Staff Survey 2024 Indicators

For each of the four staff survey indicators, compare the outcomes of the responses for White and BME staff

A staff survey was completed in October 2024. All employees were invited to respond to the survey. The overall completion rate was 77%.

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

Data for reporting year: 13% of BME employees and 9% of white employees stated they had experienced harassment, bullying or abuse from patients, relatives or the public in the last 12 months.

Data for previous year: 11% of BME employees and 10% of white employees stated they had experienced harassment, bullying or abuse from patients, relatives or the public in the last 12 months.

Actions include

1. Raising awareness of the appropriate reporting process for such instances and ensuring all staff complete their mandatory e-learning training on diversity and inclusion.

2. Continuing to monitor staff survey responses against workforce data and investigate any trends and discrepancies.

3. Clear communication to patients, relatives and the public regarding acceptable standards of behaviour. Including a new campaign from our Ethnicity People Resource Group around anti-racism in the workplace.

4. New Customer Service Training to include further support and guidance in terms of how to handle harassment, bullying or abuse from patients.

5. New mandatory Sexual Safety and Harassment E-learning module launched including updates to our Harassment Policy and new reporting channels for staff to report incidents.

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

Data for reporting year: 7% of BME employees and 7% of white employees stated that they had experienced harassment, bullying or abuse from staff in reported period.

Data for previous year: 15% of BME employees and 11% of white employees stated that they had experienced harassment, bullying or abuse from staff in reported period.

Actions include

1. Continuing to raise awareness of the appropriate reporting process for such instances using induction and training and to ensure all staff members complete their mandatory e-learning training covering diversity. Further enhanced modules are now available on areas of EDI including unconscious bias.

2. New modules also launched for leadership teams including 'Inclusive Leadership' and 'Unconscious Bias'. We have also created F2F learning modules for delivery by our People Team for area's who score low in this area to ensure continuous upskilling of our leadership communities.

3. Continuing to monitor staff survey responses against workforce data and investigate any trends and discrepancies.

4. Reinforce the Ramsay Values and ensure that all staff behaves in accordance with these standards specifically relating to respect, dignity and integrity.

5. Continued investment in our People and Culture Forum to highlight feedback across the organisation on the culture and create robust action plans to improve inclusivity and respect for all employees.

6. New People Resource Groups launched to include the following: Pride, Disability & Neurodiversity, Ethnicity, Wellbeing, Armed Forces, Generations and Social Impact all with strong objectives in this area and over 280 members.

7. New Content Calendar launched celebrating diverse holidays, key calendar events and sharing colleague stories around EDI. This has supported further discussion, understanding and awareness around these key topics.

8. Culture a key area of focus during our 'Better Together' leadership conference where we focused on the stories of the People Resource Group and members of the community to showcase to our leaders the importance of key DEI work. As part of this we heard colleague stories from our chairs of the Ethnicity, Disability, Women's Health and Armed Forces Groups. We also dedicated an hour to a problem-solving task around the key challenges from our colleague survey around inclusion.

21. Percentage believing that Ramsay provides equal opportunities for career progression or promotion.

Data for reporting year: 73% of BME employees and 73% of white employees believed they had equal opportunities for career progression or promotion.

Data for previous year: 71% of BME employees and 75% of white employees believed they had equal opportunities for career progression or promotion.

Ramsay Healthcare welcomes and celebrates diversity. Diversity and inclusion contribute to creativity, performance, collaboration and success in our teams. As people caring for people, we want to ensure that we connect all our diverse teams and use the Workplace platform as a support system and to share our enriched culture.

In addition to our People and Culture Forum, which is made up of representatives that were voted by their peers; there are now seven People Resource Groups active within the business ensuring that diverse groups of employees are represented; and have a forum by which to debate company approach and generate suggestions. These groups now have 280+ members and have chairs of all backgrounds ensuring a feeling of representation to all groups.

With learning being accessed via the Workday platform, visibility and accessibility to mandatory training, non-mandatory training and leadership development courses has increased and our Academy team can review this data and act accordingly.

All internal career opportunities including secondments are also advertised on the Workday system and available for all employees to apply to. The 'Internal Mobility' policy has also been reviewed within the period to ensure that career progression is accessible for all within Ramsay Health Care UK.

As part of our continued work on 'Internal Mobility' we have also launched a People Resource Group focused on 'Social Impact' with a purpose to 'To Foster an inclusive environment that empowers individuals from all backgrounds to succeed and thrive'. As part of this we have also launched this year the 'Ramsay Honours' event celebrating over 40 apprentices for graduating their programmes. Ramsay UK is unique in that the average apprenticeship age is 34 showcasing we offer opportunities for colleagues of all ages.

Talent Mapping is now an established cyclical process within Ramsay Health Care UK and the exercise has been extended within the reporting period to include employees at Head of Department level and above. The talent mapping framework enables identification of talent in all areas of the business and supports succession planning.

Actions include –

1. Ensuring all staff continue to have access to all vacancies within the organisation including promotional opportunities internally to support our social mobility objectives.

2. Continue to undertake talent mapping and succession-planning to Head of Department level.

3. Explore further avenues to better promote internal promotional opportunities in addition to those currently utilised.

4. Use our Social Impact PRG to support further social mobility including offering work experience and work insights into other sides of the business, utilising our scholarship fund and actively advertising apprenticeships which supports our 'Grow our own' workforce strategy.

22. In the last 12 months have you personally experienced discrimination at work from a manager/team leader?

Data for reporting year: 9% of BME employees and 8% of white employees stated they had experienced discrimination at work.

Data for previous reporting year: 11% of BME employees and 6% of white employees stated they had experienced discrimination at work.

During the reporting period, Ramsay Health Care have developed further education sessions on Diversity and Inclusion within all the internal leadership development programmes.

We have also on boarded a Culture Partner that will allow us to focus further on making education and training available to all our colleagues and leaders.

Actions include –

1. Continue to include inclusivity training within all leadership programmes including a new programme called 'Stepping into Leadership' where we spend 3 hours talking about being an inclusive leader and explaining what discrimination in the workplace is.

2. Develop further training sessions for workforce colleagues and leaders across the organisation.

3. Continue to act upon feedback from the engagement survey with the involvement of the Culture Partner, People Resource Groups and the People and Culture Forum representatives.

Board Representation Indicator

For this indicator, compare the difference for white and BME staff.

23. Percentage difference between the organisations' board membership and its overall workforce?

	White	BME	Prefer not to say / Unknown
Executive Board Member % by ethnicity	67%	11%	22%
Overall workforce % by ethnicity	74%	15%	11%
Difference (Total Board - Overall workforce)	-7%	-4%	11%

24. Are there any other factors or data which should be taken into consideration in assessing progress?

During the 2024/25 reporting period, the organisation has made substantial progress in embedding a culture of equality, inclusion, and continuous improvement, with several developments that should be considered when interpreting this year's WRES data.

A key milestone has been the appointment of a dedicated Culture Partner role in July 2024. This new position demonstrates the organisation's long-term commitment to cultural transformation and plays a central role in advancing the priorities identified through the WRES report. The Culture Partner supports the refreshed People and Culture Forum, which now operates with clearer governance and closer alignment to executive decision-making structures.

People Resource Groups (PRGs) have moved from pilot to permanent status and now operate with formal executive sponsorship and a clear set of KPIs. These groups continue to provide critical lived experience insights and contribute directly to shaping policy and practice across the organisation.

The Employee Voice campaign has evolved into a sustained programme of engagement activity, including bi-monthly "Colleague Forums" sessions with the executive team. Diversity, equality and inclusion topics are now regularly featured at these forums, reinforcing psychological safety and encouraging open dialogue. Mandatory Inclusivity and Allyship Training continues to be rolled out across the organisation, with current compliance reaching 91% among managers.

Looking ahead, priorities for 2025/26 include embedding the Culture Partner role through the development of a three-year Cultural Roadmap, increasing ethnicity declaration rates, and implementing further data around DEI through our partnership with ENEI. We will also continue enhancing our reporting tool for harassment, and refresh PRG charters to align with organisation-wide goals.

Taken together, these developments reflect a deliberate shift from measuring inclusion to actively embedding it into the way we lead, support, and develop our people. They should be considered as key contextual factors when assessing progress against WRES indicators.

Mr Nick Costa
Chief Executive Officer _____

Focus Area	Actions	Responsibility	Timeframe
Data Analysis	1. Analysis key trends for indicators 15-18 by facility. Facilities with WRES concerns are escalated to the Chief People Officer	Head of People Operations and People Partners	Annually
	2. Benchmark our WRES data with the independent sector and the NHS and identify any focus areas for discussion at Executive Board	Culture Partner	December 2025
	3. Continue to monitor levels of self-reporting of equal monitoring information	Culture Partner	Ongoing
	4. Continue to ensure Employee Engagement Surveys allow for reporting on ethnicity	Culture Partner	October 2025
	5. Enhance Case Management reporting to include diversity information	Head of People Operations	December 2025
	6. Continue annual campaign of Personal Data within Workday to drive levels of self-reporting	Head of People Operations	January 2025
Training	7. Review and provide further areas for improvement in the Diversity, Equality and Inclusion training offerings across the company	Culture Partner	Ongoing
	8. Monitor WRES Data for access to non-mandatory training, leadership courses and apprenticeships	Culture Partner	Annually
	9. Ensure WRES principles are reflected within all our Leadership training	Head of Ramsay Academy	Ongoing
	10. Continue programme of Talent Mapping and monitor against WRES principles	Talent Partner	Ongoing
	11. Promote the Inclusivity Training at all levels to increase participation	Learning Partner	Ongoing
Recruitment	12. Continue to review current recruitment practices to ensure they meet the Standards. Review best practices within the industry	Head of Recruitment	Ongoing
	13. Ensuring where there is a vacancy that we advertise using the appropriate channels to promote vacancies to a diverse pool of potential applicants	Recruitment Team and Head of Recruitment	Ongoing