

Equality Diversity & Inclusion Annual Report 2025 - 2026



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We are proud to publish our 2025/6 Public Sector Equality Duty Annual report, highlighting our successes over the last year and the measures we will take into 2026/7 to improve within Equality Diversity and inclusion.

Chelsea and Westminster Hospital NHS Foundation Trust (CWFT) is one of the top performing hospital Trusts in the UK. We employ over 7000 staff across our two main hospital sites, Chelsea and Westminster Hospital and West Middlesex Hospital, alongside community services. Both hospitals have major A & E departments and the Trust provides one of the largest maternity services in England.

We are part of the Acute Provider group which formed on April 1 2026, along with Imperial College Healthcare NHS Trust, The Hillingdon Hospitals NHS Foundation Trust and London NorthWest University Healthcare NHS Trust. The group is focused on reducing inequalities for patients accessing acute care across North West London by developing joint clinical pathways and providing mutual aid.

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Chelsea and Westminster Hospital



West Middlesex Hospital



Introduction to the report

Purpose and scope

In line with the Equality Act 2010, the Trust is legally required to publish equality information annually to show how it has complied with the public sector equality duty. This annual report covers 1 April 2025 to 31 March 2026 and focuses on our workforce, providing the Trust with valuable insights into our workforce equality performance. It identifies priority areas for improvement. In addition, this report has incorporated information required by the Workforce Race Equality Standard (WRES) and Workforce Disability Equality Standard (WDES) that is mandated in the NHS standard contract. It also includes the gender and ethnicity pay gap report. We report separately on other NHS requirements which as the Equality Delivery System 2022.

Use of Data and Information

Within this report we refer to important equality monitoring information about our workforce. When staff join our organisation as an employee we ask questions about personal details, including protected characteristics such as age and sexual orientation. This is known as equality monitoring information. Any information provided is held securely and confidentially on our electronic staff record system (known as ESR). The data, when extracted for analysis in reports such as this one is anonymous. We must comply with strict rules in managing and using people's personal information. We analyse the anonymised information to identify and respond to any issues affecting groups that share certain protected characteristics. We use data and information in relation to a range of national standards relating to workforce equality that we are required to meet annually as outlined in this report. Staff can update their personal data via employee self-service at any time.

Terminology

Throughout this report, we use the term Black, Asian and Minority Ethnic (BAME) 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.

This report serves to assure compliance with the Public Sector Equality Duty (PSED) for 2025/6 for Chelsea and Westminster NHS Foundation Trust. In accordance with legal obligations the Trust is required to monitor, analyse and annually publish data related to equality diversity and inclusion, aligning with its commitment to the Public Sector Equality Duty (2018). The data encompasses protected characteristics outlined in the Equality Act 2010 including age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race (ethnicity), religion and belief, sex and sexual orientation.

Highlights 2025/6

The annual report provides an overview of the highlights from April 2025 to March 2026. Some of these highlights are listed below:

Positive and improved scores in the NHS Staff Survey 2026 for “We are compassionate and inclusive”. Our score increased consecutively over 4 years and at 7.46 is above the acute Trust average of 7.28

Reduction in the number of staff who have experienced discrimination from manager/team leader or other colleagues from 11.53% in 2024 to 10.04% in 2025. It has fallen year on year over 5 years from 2021 when it was 12.31%

Continued to develop out “Belonging” steering group driving our Equality Diversity and inclusion programmes.

Secured commitment and launched our Cultural Intelligence training programme in 2026

Continued to grow our staff networks

Signed up to the Sexual Safety Charter and launched a new policy with increased reporting routes and increased training for managers in responding to reports of sexual misconduct

Trust is in its 7th year of project SEARCH providing internships for individuals with autism and or learning disability to gain work experience

Sustained high levels of patient satisfaction across inpatient, outpatient and birthing services, performing broadly in line with or above London and national benchmarks.

Enhanced real-time insight through targeted Friends and Family Test questions, improving monitoring of known pressure points.

Used patient feedback to inform service improvements, including changes to environments, information, communication and care pathways.

Continued delivery of engagement, volunteering and chaplaincy services, supporting patient dignity, access, wellbeing and compassionate care.

PLACE assessment programme with over 15 external patient reps supporting with the national programme

Continued engagement with Healthwatch throughout the year on key projects

Looking forward – our priorities for the year ahead

This report will provide an update on many of the activities and actions that have taken place across the Trust in 2025/6. Chelsea and Westminster Hospital NHS Foundation Trust is committed to the delivery of national and local priorities including the six high impact areas of the NHS EDI Improvement plan and the NHS Staff Standards. Our work will also continue to focus on Anti Racism, Sexual Safety, reducing health inequalities and disability inclusion. The areas of work below form a high-level set of actions which we will continue to progress in 2026/7

Workforce	Career Progression and Development (i) Embed Inclusive recruitment for Band 7+ and medical leaders Improving the representation in the workplace is in part being addressed by further implementation of our Inclusive recruitment approach. With trained Diversity and Inclusion representatives on panels we seek to ensure fair recruitment process. In addition, this process will be enhanced in 2027/8 through the standardization of processes across the Acute provider group and implementing best practices from all 4 Trusts in the group (ii) Grow and develop leaders from Underrepresented groups: Recruit to the Healthcare Leaders Fellowship (iii) Develop and embed the just and learning culture (iv) Focus on employee voice and grow staff networks (v) Launch and implement a programme of cultural intelligence training (vi) Streamline and improve access to reasonable adjustments (vii) Focus on cultural improvements, reinforcing values, behaviours and tackling (i) inclusion and discrimination (ii) bullying and harassment (iii) violence and aggression (iv) sexual safety
Patients and our communities	(i) Embed co-production in service redesign and improvement (ii) Increase engagement with underserved and seldom-heard communities (iii) Improve patient involvement in care, treatment and discharge decisions (iv) Strengthen the use of patient feedback, complaints and experience data to drive improvement (v) Improve access to inclusive, accessible and culturally responsive information and communication (vi) Reduce inequalities in access, experience and outcomes through targeted improvement programmes (vii) Strengthen community partnerships to improve trust, engagement and health outcomes

Our workforce 2025-6



**PROUD
TO CARE**

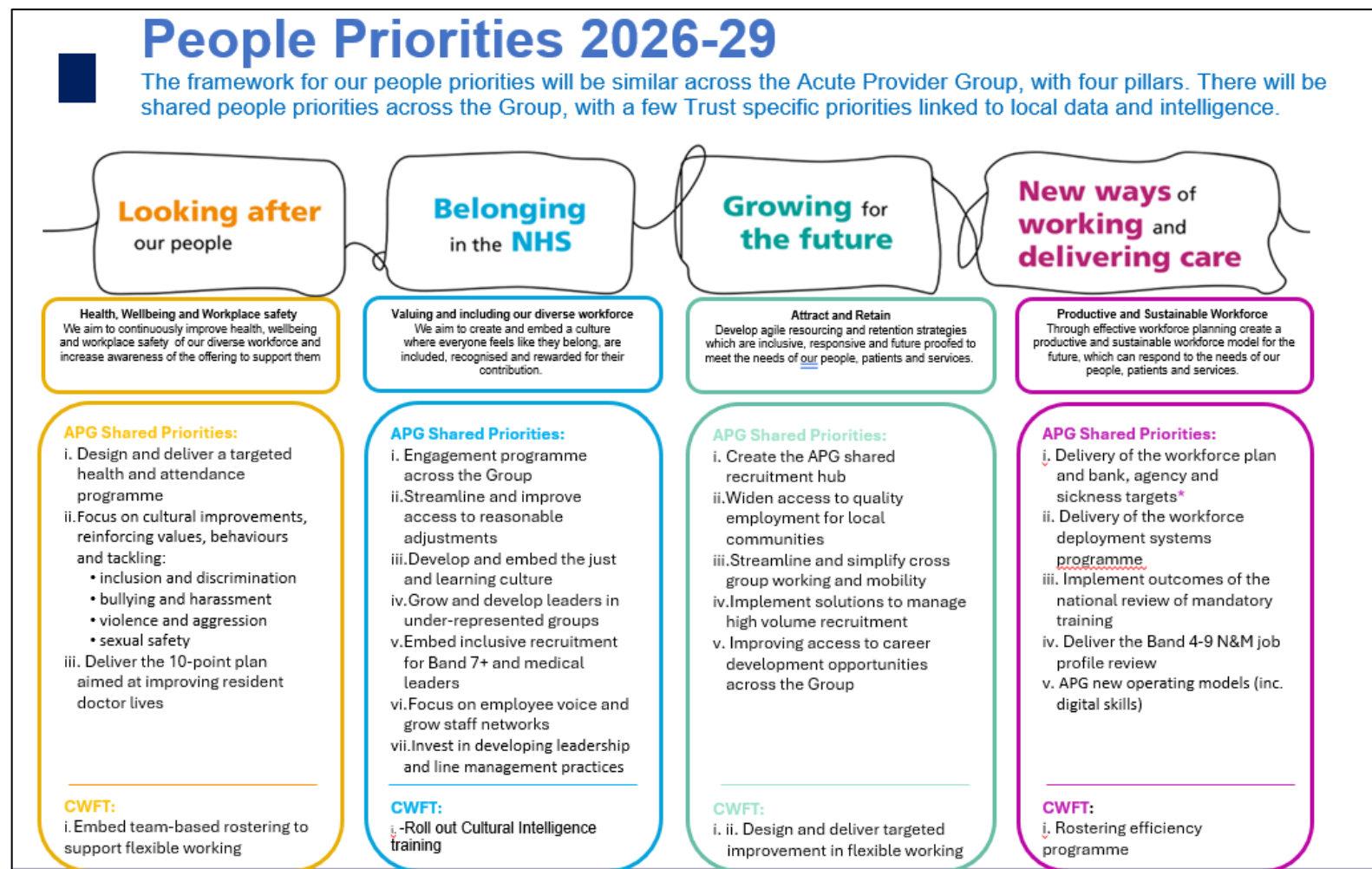


Chelsea and Westminster Hospital
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Equity Diversity and Inclusion action 2025-6

In this section, we highlight our strategic priority areas for workforce development, focusing on creating an inclusive, diverse, and supportive environment where all staff can thrive and contribute to the delivery of high-quality care.

We agree a set of People Priorities each year which sets out wide range of programmes and improvements which respond to staff feedback, our data and other drivers for change



Summary from 2025/6

1. Inclusive Culture

Sexual Safety: The Trust signed the Sexual Safety Charter in 2024 and has since worked to make tangible improvements in the prevention of sexual misconduct and sexual harassment and to support staff who do experience it. We launched a new policy in 2025 which put in place wider measures to encourage reporting including anonymous reporting, to ensure that reports are managed quickly and fairly and to improve access to support. It also offers the same support to any staff who are the victims of domestic abuse. We have launched training for any staff who may be “first responders” to any staff raising complaints and will be providing specialist training to our HR teams who investigate and manage cases.

Freedom To Speak Up: The Trust has continued to promote a wide range of routes to feedback or raise concerns including conversation relating to negative behaviours or negative experiences or our staff, including those with protected characteristics. Our Freedom to speak team has relaunched with new channels of communication and promotion across the Trust.

Project Search: We continue to offer one- year internships for young people with learning disabilities and autism in roles across the Trust. Not only does this provide excellent pathways to long term employment for the interns but it also brings culture change giving staff the opportunity to mentor, manage and work alongside the interns in work.



Sexual Safety in Healthcare Organisational Charter

We have signed the [sexual safety in healthcare organisational charter](#) and extended the principles to be inclusive of domestic abuse and sexual violence, as part of our Charter for Change.

The Trust is implementing the sexual safety charter by actively reviewing and updating support and guidance to assist colleagues who have experienced or witnessed sexual misconduct in the workplace and online.

Summary from 2025/6

Cultural Intelligence training: In 2025/6 the Trust agreed funding for significant investment in a programme of Cultural Intelligence training. Cultural Intelligence is the ability to function and relate effectively in culturally diverse situations. We have trained a faculty of 20 internal trainers to deliver this training. It will have impact not only in staff interactions and culture but also with patients. This will form a major part of our Equity Diversity and Inclusion programme in 2026/7 and will respond to many of the issues identified in our staff survey data around including, discrimination, bullying and harassment and patient experience

Cultural Intelligence (CQ)TM is the capability to function and relate effectively in culturally diverse situations/contexts



- **CQ Drive:** level of interest, persistence, and confidence during multicultural interactions
- **CQ Knowledge:** understanding of how cultures are similar and different
- **CQ Strategy:** awareness and ability to plan for multicultural interactions
- **CQ Action:** ability to adapt when relating and working in multicultural contexts

Highlights from 2025/6

Just and Learning culture: In 2025/6 we redesigned our employee relations pathway to help debias any process which link to staff entering disciplinary processes. A new triage panel with EDI and BAME representation will seek to oversee decision making and to help seek alternative solutions

Continued to embed Inclusive Recruitment process for Leaders Band 7+ and medical leaders

We have continued to roll out the inclusive recruitment practice with the aim of increasing appointments from underrepresented groups. We have a network of 70 Diversity and Inclusion representatives who support the programme

Participation in The Healthcare Leaders' Fellowship regional leadership development programme

The Healthcare Leaders Fellowship is a positive action programme for clinical leaders at Band 7 and above. Cohort 1 "Get On" and Cohort 2 "Go Further" are designed as a strategic talent management and succession planning initiative to help address the under representation at senior levels. Delegates take part in a structured development programme with a leadership apprenticeship and bespoke workshops, career planning support and mentorship alongside colleagues from other Trusts across the ICS

Menopause

Our work to support staff who are impacted by menopause symptoms continues with a monthly network session covering a range of Menopause related topics supported by subject matter experts from across the Trust. Our Menopause Team continue to support the network and have introduced a referral pathway for staff to see a menopause clinical nurse specialist within the Trust for support and advice. We host an annual conference with our APG partners featuring a range of expert speakers to celebrate World Menopause Day in October.



GO FURTHER
HEALTHCARE LEADERS FELLOWSHIP

**Shape the future.
Lead clinical transformation.**

Go Further is a leadership development fellowship specifically designed to support experienced healthcare leaders from Black, Asian and minority ethnic backgrounds at Bands 8a-8d.

Developed in response to the persistent underrepresentation of ethnically diverse colleagues in senior NHS leadership roles, the fellowship aims to strengthen the pipeline of diverse talent progressing into executive and very senior leadership positions.

Through a structured development pathway, participants build expertise in strategic thinking, improvement science, data analytics, leadership and change management, while applying their learning to complex workplace challenges that deliver measurable organisational impact.

WHO CAN APPLY?

- Band 8a - 8d Clinical staff**
- From a Black, Asian or minority ethnic background, as declared on ESR
- Nurses, midwifery, A&P, paramedic professional, healthcare scientist or registered pharmacy professional

WHAT THE FELLOWSHIP INCLUDES

- LEVEL 5 DIPLOMA IN IMPROVEMENT SPECIALIST + AI STRATEGY AND OPPORTUNITY APPRENTICESHIP UNIT**
A unique blended pathway created by Henley Business School to support leaders in developing skills around strategy, improvement, data analytics, leadership development and change management.
- SUPPLEMENTARY WORKSHOPS**
Up to three supplementary workshops delivered by NHS colleagues on topics such as Cultural Intelligence.
- SENIOR LEADER MENTORSHIP**
Guidance and networking with senior colleagues.

JOIN THE NEXT INSIGHT SESSION
Have your questions answered at the next insight session. Register to book your place [HERE](#).

UPCOMING SESSIONS

- Wednesday 12 August, 11:00 - 12:00
- Thursday 02 September, 11:00 - 12:00

READY TO SHAPE THE FUTURE?
Apply today!
Scan the QR code or click [HERE](#) to apply.
imperial.hnl@nhs.net

Henley Business School | **NHS Imperial College Healthcare** | **Once London Equity Initiatives**

APPLICATIONS CLOSE
Friday 25th September
11.59pm

01 CLINICAL EXPERTISE
02 QUALITY IMPROVEMENT
03 DATA & INSIGHT
04 STRATEGIC INFLUENCE
05 EXECUTIVE LEADERSHIP

Staff Networks

The Trust has 5 Staff Networks helping every member of staff feel respected, represented and able to thrive. Our staff networks bring colleagues together from across the organisation, providing safe and supportive spaces for connection, collaboration and change. Each Staff Network has an Executive Sponsor and either chairs or co-chairs who organise the network priorities and annual work plans. Each network is open to all staff including allies recognising the intersectionality of our staff members who want to learn, share experiences and support others.

Our maternity cultural safety champions facilitate and accelerate organisational change within the maternity services and to embed, sustain and accelerate culturally safe practice within the service for all women, birthing people, their families and staff. There are also here to support staff to provide excellent care and to work in an environment that provides equal treatment and opportunities to staff from all backgrounds.



Equality Network for Race, Inclusion and Cultural Heritage (ENRICH) Staff Network



Disability network



Women's network
Equality, diversity and inclusion



LGBTQ+ network
Equality, diversity and inclusion



Armed Forces network

Highlights from 2025/6

Highlights from International Women's day March 2025

 **INTERNATIONAL WOMEN'S DAY**

Celebrating the women leading our Trust Staff Networks



 Armed Forces network  Disability network  ENRICH network  LGBTQ+ network  Women's network


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INTERNATIONAL WOMEN'S DAY



“We are constantly amazed and inspired by the strength and courageousness of the women who share their maternity and neonatal experiences with us on our units, at community and charity events, and via our Instagram and email.

We are also so grateful for all the incredible women we work with at this Trust, who create the time to listen to those voices and work with us to create meaningful, long-lasting improvements to maternity and neonatal care for families in the future. Women listening to, supporting, and making things better for other women: it's what IWD is all about.

”

Abbie, Helen, Farhanah
Maternity and Neonatal Voices Partnership Leads

INTERNATIONAL WOMEN'S DAY



“Women make this hospital move, and the impact is everywhere: in the detail, in the pace, in the kindness, and in the laughs that get us through. As the gynaecology team, it is a privilege to care for women at their most vulnerable moments, and it is a privilege to do it alongside our team members.

They bring the calm, the humour, and the standard that patients feel the moment they walk in.

”

Gynaecology Surgical Team

Highlights from 2025/6

London PRIDE march
June 2025



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Highlights from 2025/6 Armed Forces Family Network June 2025



"I want to give back by being there for serving and ex-service personnel and their families when they access healthcare."

—**Christine Adamson**
Co-chair, Armed Forces Staff Network

"I joined the Armed Forces Family Network because my husband served in the Royal Air Force for 27 years. I was a very proud and happy military spouse and, as a nurse and midwife, I could usually find employment. However, frequent moves and having a partner who was away a lot, often for long periods, made life challenging at times. Now that we are settled, I want to give back by being there for serving and ex-service personnel and their families when they access healthcare."



"I joined to help ensure service members, veterans and their families have a voice in healthcare."

—**Dr Dominika Goroszeniuk**
Co-chair, Armed Forces Staff Network

"I'm a full-time Emergency Medicine consultant and an active Army reservist with 335 Medical Evacuation Regiment, where I work as Second in Command. I joined the Armed Forces Family Network because I wanted to represent my military family and help make sure they have a voice in healthcare. Active service members, veterans and their families can have additional needs that the healthcare system should recognise and understand. Let's look after those who give so much for us."

Highlights from 2025/6

Black History Month
October 2025

This October we celebrate Black History Month under the powerful theme
“Standing Firm in Power and Pride.”



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Chelsea and Westminster Hospital
NHS Foundation Trust

Highlights from 2025/6

Disability History Month

November 2025

UK Disability History Month

20 Nov–20 Dec 2025

“What matters most is creating a place where people feel seen, supported and able to be themselves at work.”

Virginia
CFO/Disability Network Executive Sponsor



UK Disability History Month

20 Nov–20 Dec 2025

“My autism shapes the way I see, think and create. What helps most is being understood, not treated differently.”

George
Communications Designer



UK Disability History Month

20 Nov–20 Dec 2025

“Losing the sight in one eye changed my life, but the support from my team and the Disability Network helped me find my footing again.”

Daniel
Sterile Services Team Leader



UK Disability History Month

20 Nov–20 Dec 2025

“With the support of my team and the Disability Network, I’ve discovered that dyslexia strengthens how I care, connect and grow.”

Charlotte
Clinical Nurse Specialist



Highlights from 2025/6 Scrubs to Sequins Fashion show April 2025

In 2025 we launched a Fashion show which showcased fashions from a wide range of cultures, and both represented and celebrated the diversity of our workforce



Highlights from 2025/6

4. Career Progression

Apprenticeships:

The Trust continues to expand its apprenticeship offerings through partnerships with reputable training providers, ensuring a diverse range of opportunities and high-quality delivery. During the financial year 2025-2026, the Trust delivered 48 distinct apprenticeship programmes, with an average of 4.1% of its workforce participating as apprentices. There were 111 completions across 22 different apprenticeship programmes this year, compared to 94 completions last year. As a main provider, the Trust continues to deliver the Healthcare Support Worker Apprenticeship and is actively exploring further expansion of its provision as an Apprenticeship Main Provider. The Trust's achievement rate is 84%, which is higher than the national average of 64%. In November 2025, during the NHSE London Capital Clinical Support Workers (CSW) Awards, the Trust was recognised as the winner in the Widening Access and Supporting Diversity category. Additionally, the Head of Apprenticeships received high commendation in the CSW Lead of the Year category, reflecting the Trust's commitment to inclusion and leadership in the sector.

This programme provides significant opportunity to develop careers and ultimately increase career progression and 62% of those on programmes in 2025-6 were from BAME groups.

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Which apprenticeship did you complete?

I completed the Nursing Associate Apprenticeship, which trains practitioners to deliver safe, compassionate, person-centred care in diverse clinical settings.

2. What inspired you to do this apprenticeship?

I chose the Nursing Associate Apprenticeship for its structured, supportive pathway into nursing, blending academic study with clinical experience. The program builds my confidence in practice and lets me contribute to patient care from the outset. I was motivated by the chance to advance in healthcare and play a greater role in improving care.

3. What are your key takeaways from your experience so far?

Key takeaways include the value of professional curiosity, effective communication, and teamwork in delivering safe, high-quality care. For example, I encountered a challenging yet valuable learning experience while working with a patient with a learning disability. This opportunity allows me to understand how to adapt my care approach while still putting patient care first. By being patient and adapting my communication style, I was able to provide reassurance and ensure their comfort, reinforcing the importance of flexibility and empathy in practice. The apprenticeship has strengthened my resilience, reflective practice, and ability to work independently while knowing when to escalate concerns. Overall, it has demonstrated the significant personal and professional growth possible through real-world learning.

4. Is undertaking the apprenticeship enhancing your skills and career?

The apprenticeship has greatly enhanced my clinical skills, decision-making confidence, and understanding of person-centred care. The program has opened pathways for further progression, leading to registered nursing, and strengthened skills essential for working in the NHS.

What advice would you give anyone considering doing an apprenticeship?

The apprenticeship, it's a rewarding entry into healthcare. Work hard, learn, and seize every learning opportunity. Reflect on your growth, and, most importantly, seek constructive feedback, because growth in your personal and professional life.

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Which apprenticeship did you complete?

I have successfully completed the Student Nursing Associate apprenticeship. Before this, I completed a Healthcare Assistant (HCA) apprenticeship, which provided me with a strong foundation in patient care and helped prepare me for the Nursing Associate role.

What inspired you to do this apprenticeship?

My inspiration came from volunteering at the same hospital during the COVID-19 pandemic in 2020. Working alongside healthcare professionals and supporting patients gave me a real insight into the impact that compassionate care can have on people's lives. I enjoyed being part of the team and wanted to develop my knowledge and skills further. This motivated me to begin my Healthcare Assistant apprenticeship in 2022 and later progress to the Student Nursing Associate apprenticeship. Being able to grow and develop within the same organisation has been incredibly rewarding, and I am proud to have now achieved my Nursing Associate PIN registration.

What are your key takeaways from your experience so far?

My key takeaways include developing clinical skills, improving communication with patients and multidisciplinary teams, and gaining a deeper understanding of person-centred care. The apprenticeship has also taught me the importance of teamwork, professionalism, resilience, and continuous learning within healthcare.

Is undertaking the apprenticeship enhancing your skills and career?

Yes, the apprenticeship has significantly enhanced both my skills and career development. It has enabled me to apply theory to practice, build confidence in delivering patient care, and expand my clinical knowledge. The experience has prepared me for greater responsibilities and provided opportunities for career progression within nursing.

What is next for you once you have completed your apprenticeship?

I began my healthcare journey as a volunteer during the COVID-19 pandemic in 2020. In 2022, I started a Healthcare Assistant apprenticeship, which helped me develop essential patient care skills and gain valuable clinical experience. I then progressed to the Student Nursing Associate apprenticeship, which I have now successfully completed. I am proud to have received my Nursing Associate PIN and look forward to continuing my career as a registered Nursing Associate while further developing my skills and knowledge in healthcare.

What advice would you give anyone considering doing an apprenticeship?

I would highly recommend an apprenticeship to anyone considering a career in healthcare. It provides a unique opportunity to earn while you learn, gain practical experience, and develop valuable skills in a real working environment. My advice would be to stay motivated, be open to learning, ask questions, and make the most of every opportunity. The journey can be challenging at times, but it is incredibly rewarding and can open many doors for your future career.

Chelsea and Westminster Hospital
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Which apprenticeship did you complete?

Registered Nursing Degree Apprentice

What inspired you to do this apprenticeship?

The opportunity of improving my career and me to pursue a nursing apprenticeship. I healthcare, and this apprenticeship provides from skilled nurses, use my knowledge to establish a sustainable career focused on and supporting others.

What are your key takeaways from your experience so far?

My key takeaways are the significance of collaboration, and reflective thinking. I have remain calm under duress, articulate thoughts consistently seek opportunities for improvement.

How has completing the apprenticeship enhanced your skills and career?

The training experience has enhanced my professionalism, and resilience to many of provided me with a robust foundation with nursing profession while maintaining the patient care.

What is next for you now you have completed your apprenticeship?

Having finished my apprenticeship, I am

Chelsea and Westminster Hospital
NHS Foundation Trust

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Our Patients and Communities 2025-6

Health Inequalities Programmes

During 2025/26 we have continued to work towards addressing health inequalities and health improvement for the population we serve. Below is a brief summary of some of our programmes with ongoing and continued worked to improve the health and care of our local population.

Hospital Discharge Pilot: Facilitate timely discharge and prevent avoidable social re-admissions through a person-centred, targeted approach that bridges hospital and community services working collaboratively with partners to address root causes such as housing stability, health and lifestyle, and income maximisation while supporting long-term sustainable outcomes in the community.

Improving Access to Outpatient: In our most deprived patient cohort, the 'did-not-attend' (DNA) Rates for outpatient appointments are seen the highest. We are testing solution including better text reminders, AI system to flag patients at risk of missing appointments and using volunteers to provide reminders of their appointments.

Health literacy: Exploring the implementation of Trust-wide Health Literacy training to reduce unwarranted variation in patient experience and outcomes, ensuring health information is consistently communicated in an accessible way aligned to a universal reading age of approximately 9 years.

Improving Maternity Outcomes: A targeted case-loading model was piloted at West Middlesex for Black women under the age of 25 to improve access and outcomes, resulting in reduced DNA rates, enhanced engagement with services, and demonstrable improvements in measured maternity outcome.

Right Patient, Right Scan, Right Time: Ongoing improvement work in diagnostic imaging focused on appropriate testing, safer pathways, digital decision-support tools and more inclusive practice.

Smokeless/SmokeFree Programme

Smoking cessation support continues to be delivered across both acute and maternity settings. Efforts have focused on improving the recording of smoking status and ensuring patients are routinely advised on the risks associated with smoking.

Where appropriate, patients are offered referral to the smoking cessation service including access to nicotine replacement therapy.



Smokeless

If you are trying to smoke less or quit, we know how hard it can be, but we are here to help

You are 3 times more likely to quit when you combine medicines like nicotine replacement therapy with specialist support

Smokeless is Chelsea and Westminster Hospital Foundation Trust's stop smoking service, available to all inpatients who smoke.

We offer friendly expert advice on:

- Managing cravings whilst in hospital
- Reducing the amount you smoke
- Giving up smoking for good

Specialist smoking cessation advisors are available to see you on the ward, Mon – Fri 9am-5pm.
Please ask your doctor or nurse to refer you.
For more information email: chelwest.smokeless@nhs.net



Our Smokeless service



Smokeless is the Trust's smoking cessation service available to all adult in-patients, offering expert advice on quitting or simply managing cravings and reducing the amount smoked whilst in hospital. As a smoke free site, the trust encourages all patients to practice temporary abstinence during their admission. We know that this improves clinical outcomes and reduces length of stay, so please refer today.

- 74% of in-patients who smoke have engaged in a meaningful way with our tobacco dependency advisors.
- 1 in 2 in-patients who smoke set a quit date with us.
- 1/3 have quit at 28 days.

Alcohol Care

Building on the demonstrated benefits of the alcohol care service at West Middlesex, work is underway to extend the hospital liaison model to Chelsea and Westminster. This includes strengthening partnerships with borough teams and community providers to enhance continuity of care and support patients following discharge.



Change
Grow
Live

The Alcohol Service

Bi-borough of Kensington
& Chelsea and Westminster

**Need advice
on alcohol
and its
effects?**

**Free, confidential
help for adults,
families, carers and
affected others.**



**Find out more at
www.changegrowlive.org/the-alcohol-service**



Change
Grow
Live

The Alcohol Service

Bi-borough of Kensington
& Chelsea and Westminster



**Looking to
cut down or
stop your
alcohol
intake?**

**Find out more at
www.changegrowlive.org/the-alcohol-service**



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Neighbourhood Approach

We are working closely with local integrated neighbourhood teams to improve outcomes for our population through targeted, joined-up initiatives e.g. Local holistic MDT bringing clinical teams, local authorities, VSCE and Primary care together



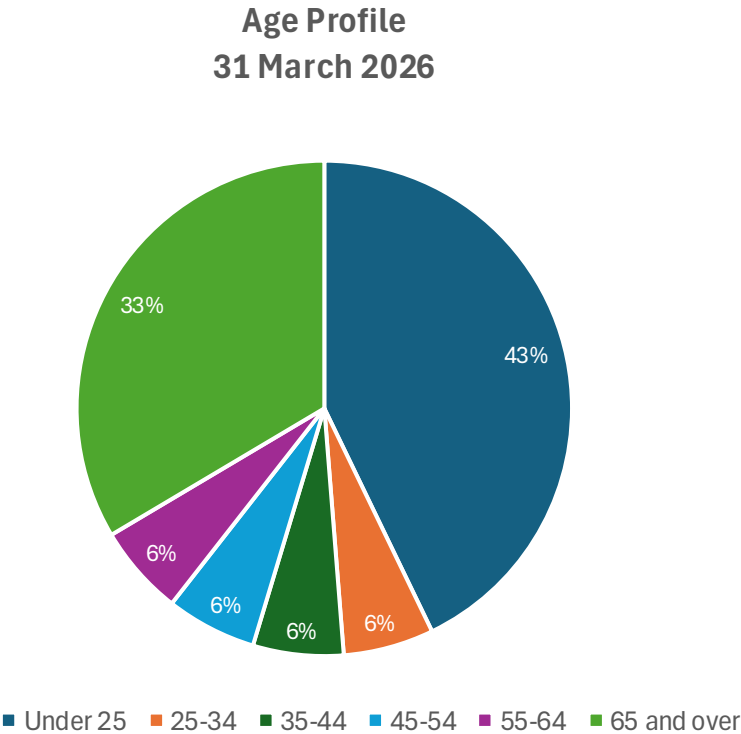
Appendix 1

Workforce profile

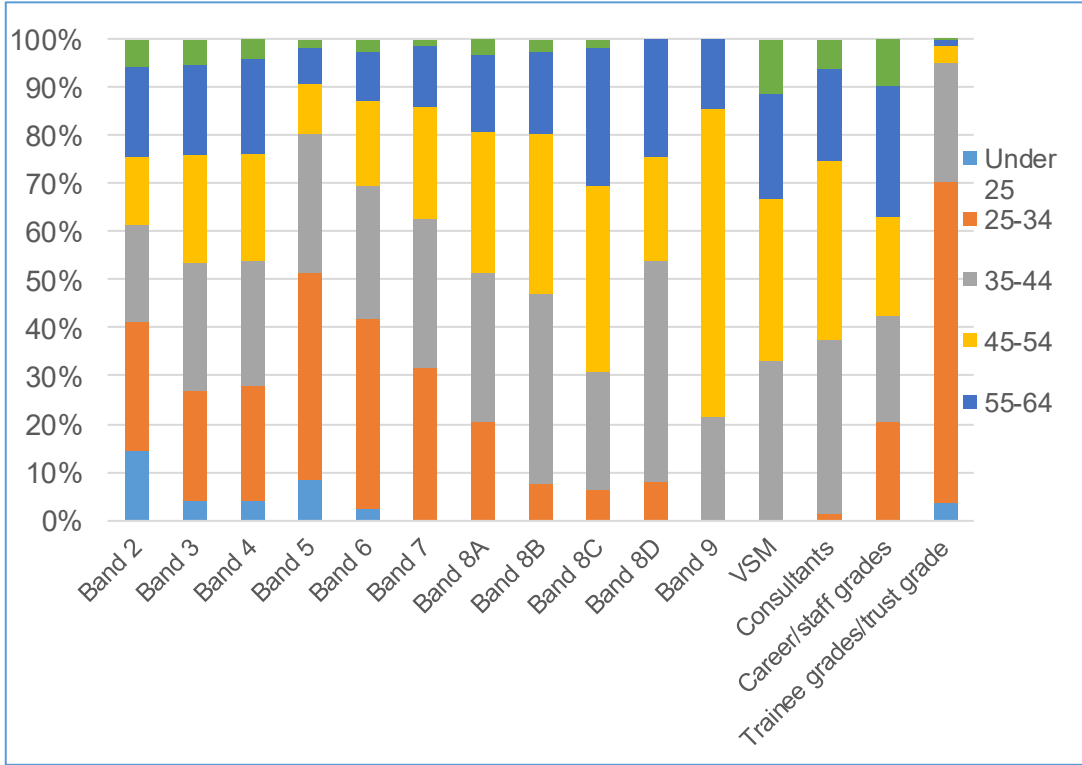


Age

The workforce age profile shows no significant change to last year. The majority of our staff are to 35- 44 42%) followed by the 25- 34 age range. The under 25 age range has fallen from 550 staff last year to 290 this year and the 65 and over age range has increased from 158 staff last year to 227 this year.

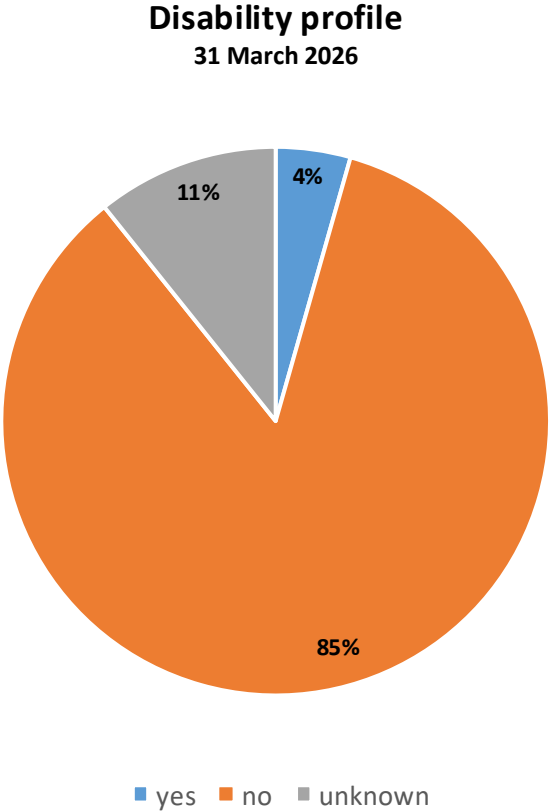


Age profile by band 2026

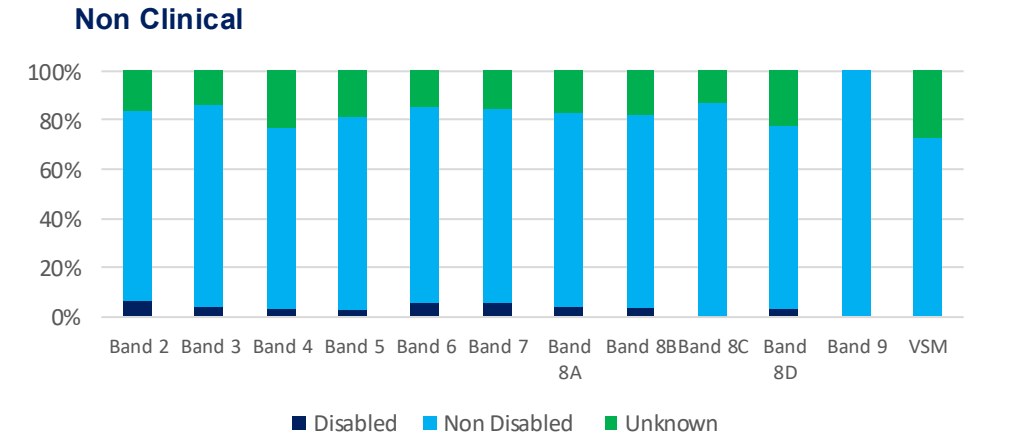
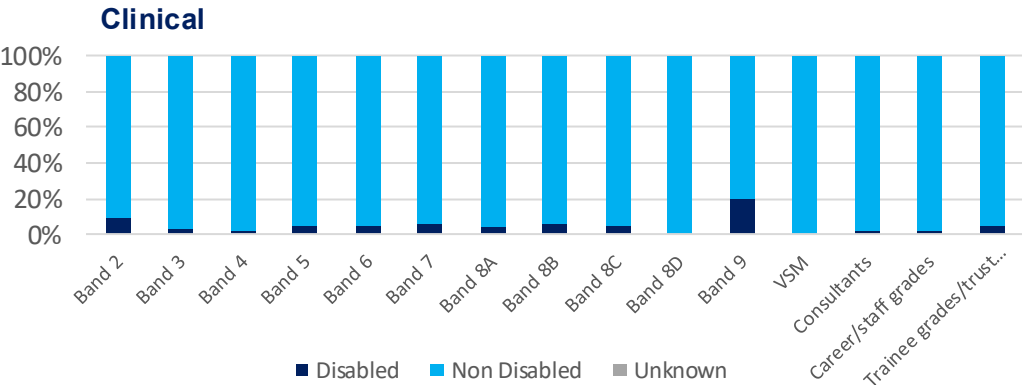


Disability

As at 31st March 2026 the number of staff who have declared a disability on our ESR system is 4.1%. This is a positive increase from 3.2% in 2025. The number of staff who have not declared a disability is 85% and 11% are unknown.

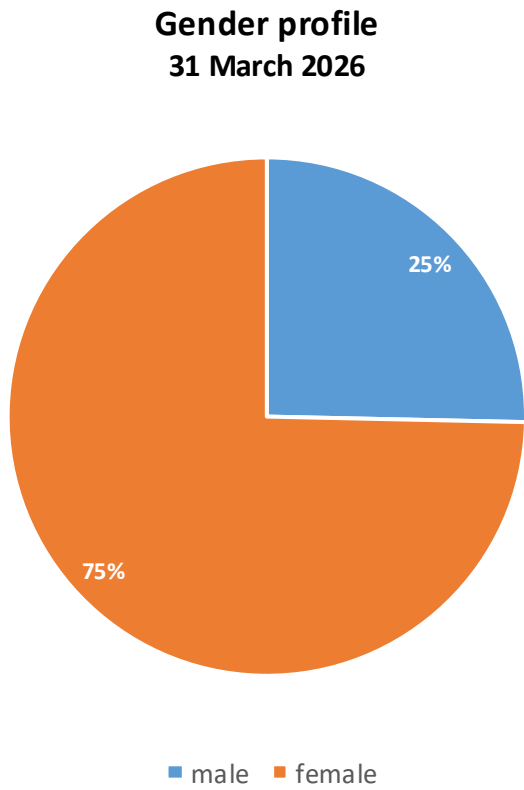


The number of staff who have declared a disability on our ESR system broken down by band and Clinical/Non-clinical shows that staff declaring a disability is spread across pay bands and there is no visible difference across clinical and non-clinical groups.

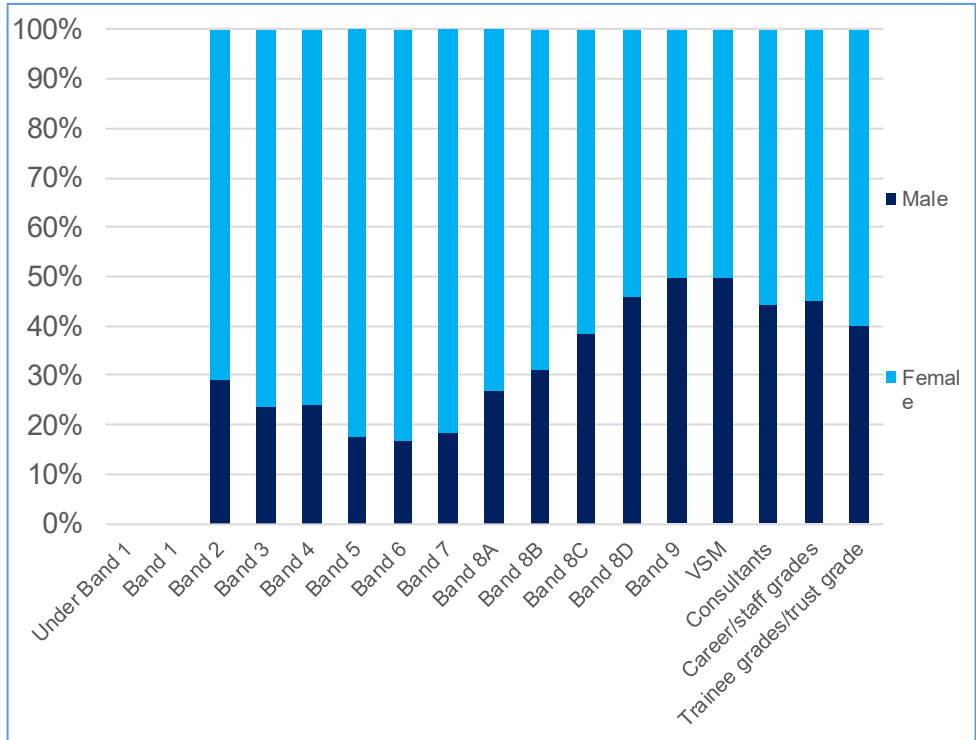


Gender

As at 31st March 2026 the Trust had a total workforce of 7909 (excluding bank staff). The workforce gender split has remained largely unchanged over many years at 75% female to 25%.male.



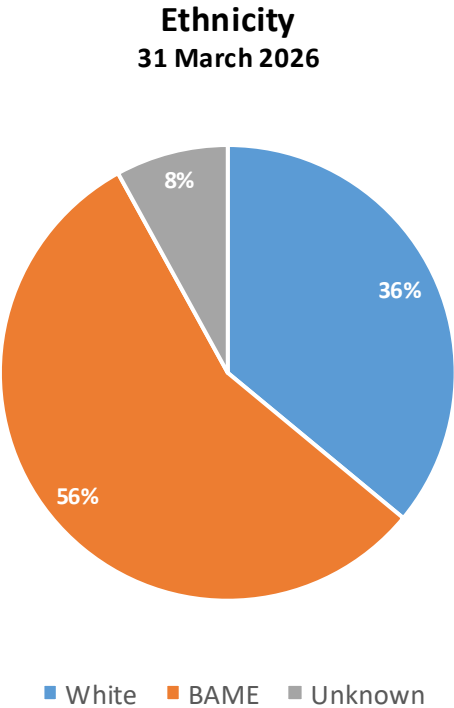
Split by band, the proportion of male colleagues varies ranges from 16% in Band 6 to 50% in band 9 and very senior managers



Ethnicity

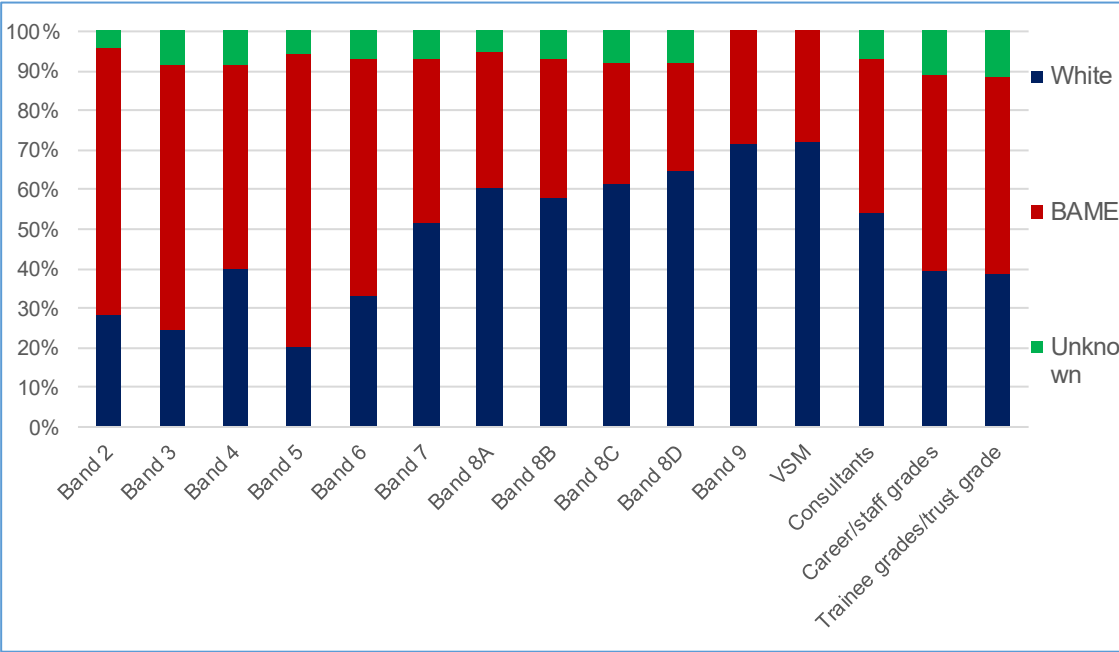
As at 31st March 2026 the Trust had a total workforce of 7909 (excluding bank staff)

Overall, 56% were from a BAME background compared 36% who are white . This is an increase of 1.2% from 2025 when 54.9% were from a BAME group. This is similar to the local London population where white people make up 32.4% of the population compared to 54% BAME.



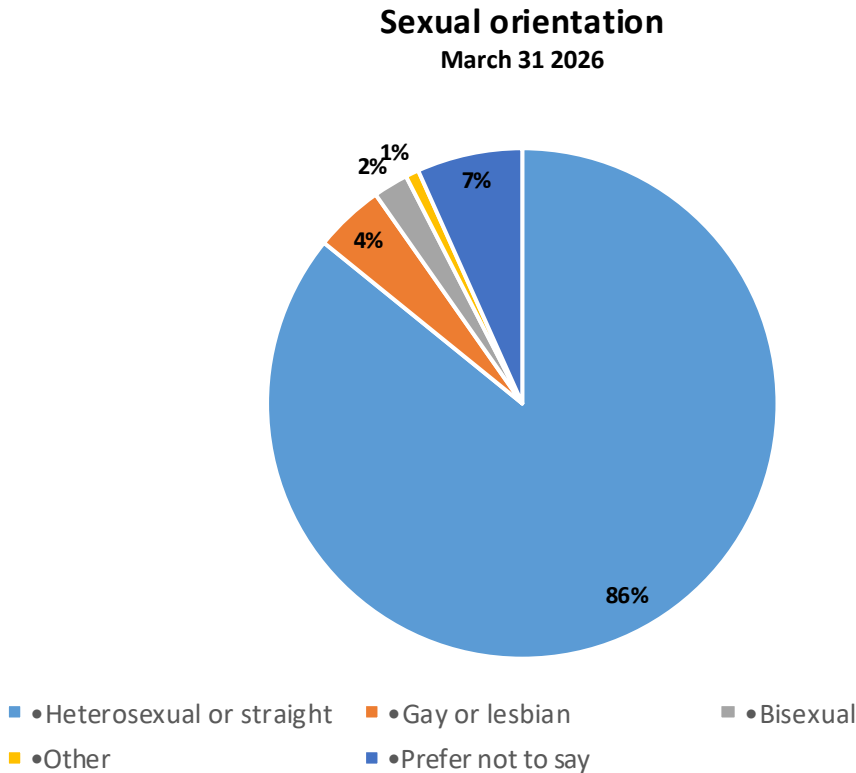
Ethnicity breakdown by band

When broken down by pay and, this shows that the proportion of BAME colleagues varies from 75% in Band 5 to 27% in Band 8d.



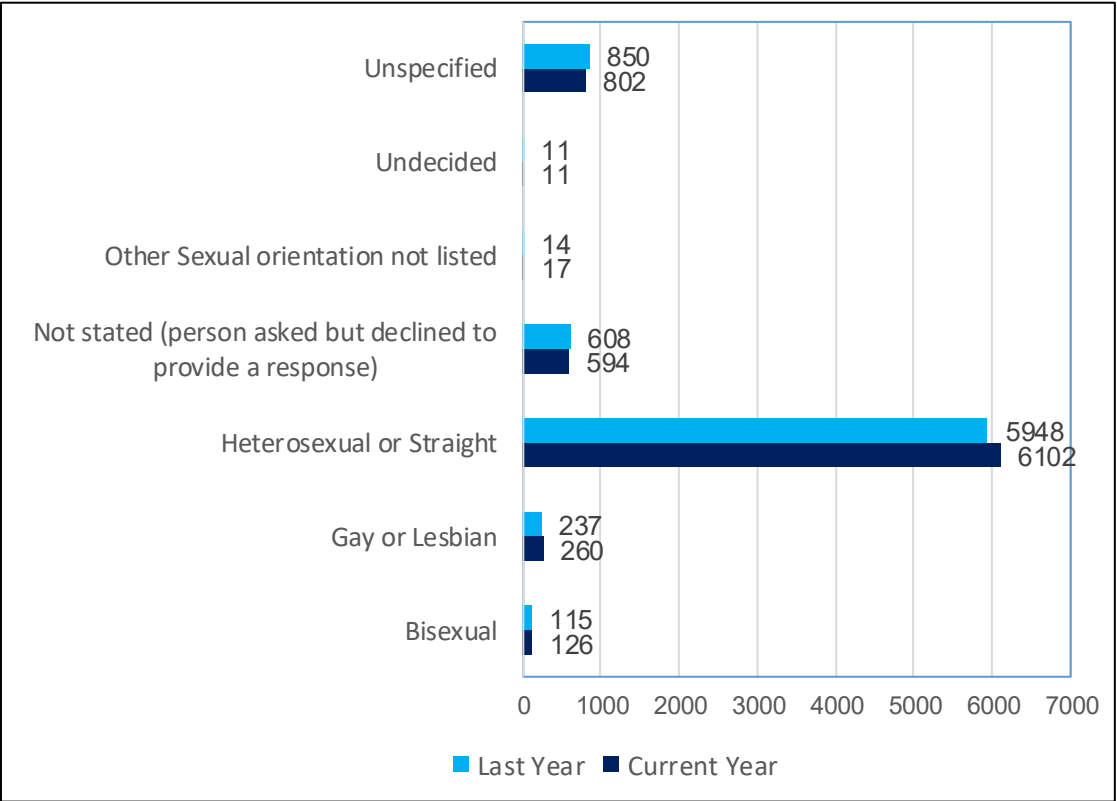
Sexual Orientation

The majority of staff were heterosexual (86%), with 4.42% Lesbian or Gay, and 2.21% Bisexual. A number of staff choose not to disclose and are recorded as either unspecified or not stated on our ESR records.



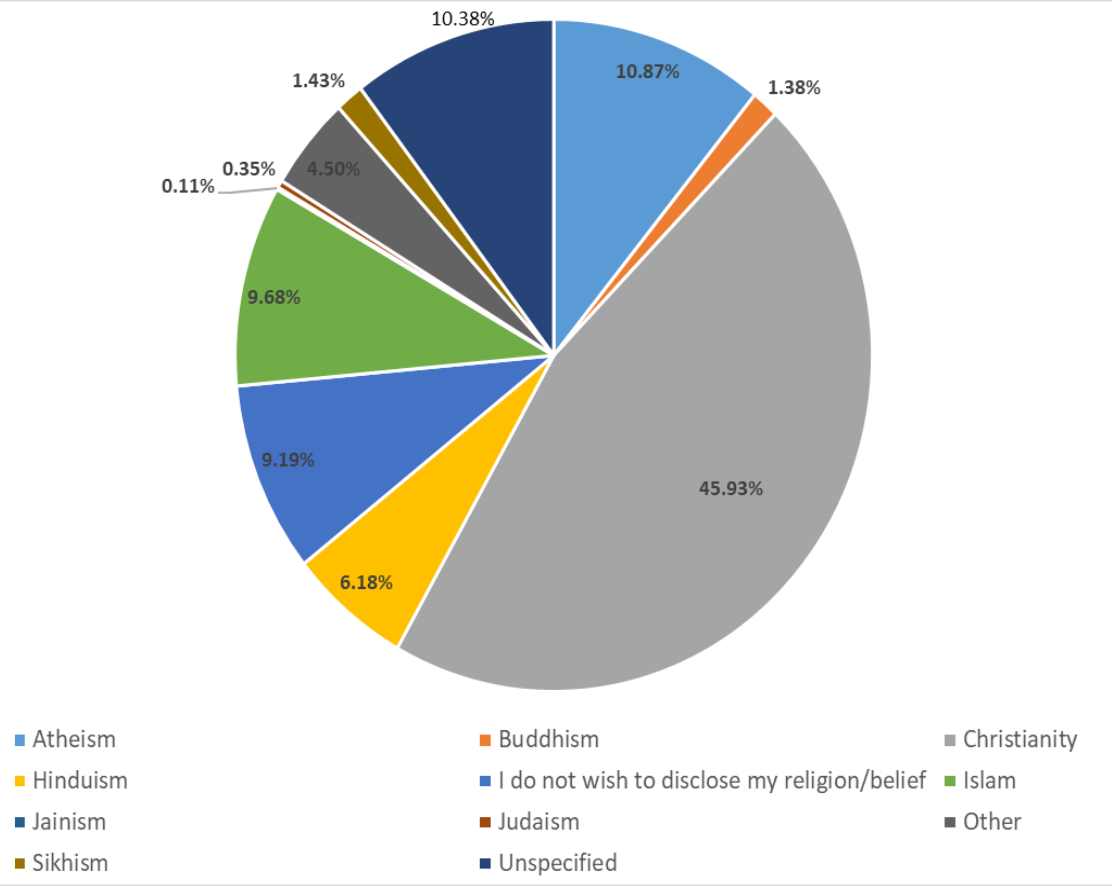
Sexual orientation 2025 to 2026

There has been a small increase in the number of staff who have declared they are Gay or lesbian, and Bisexual since last year.

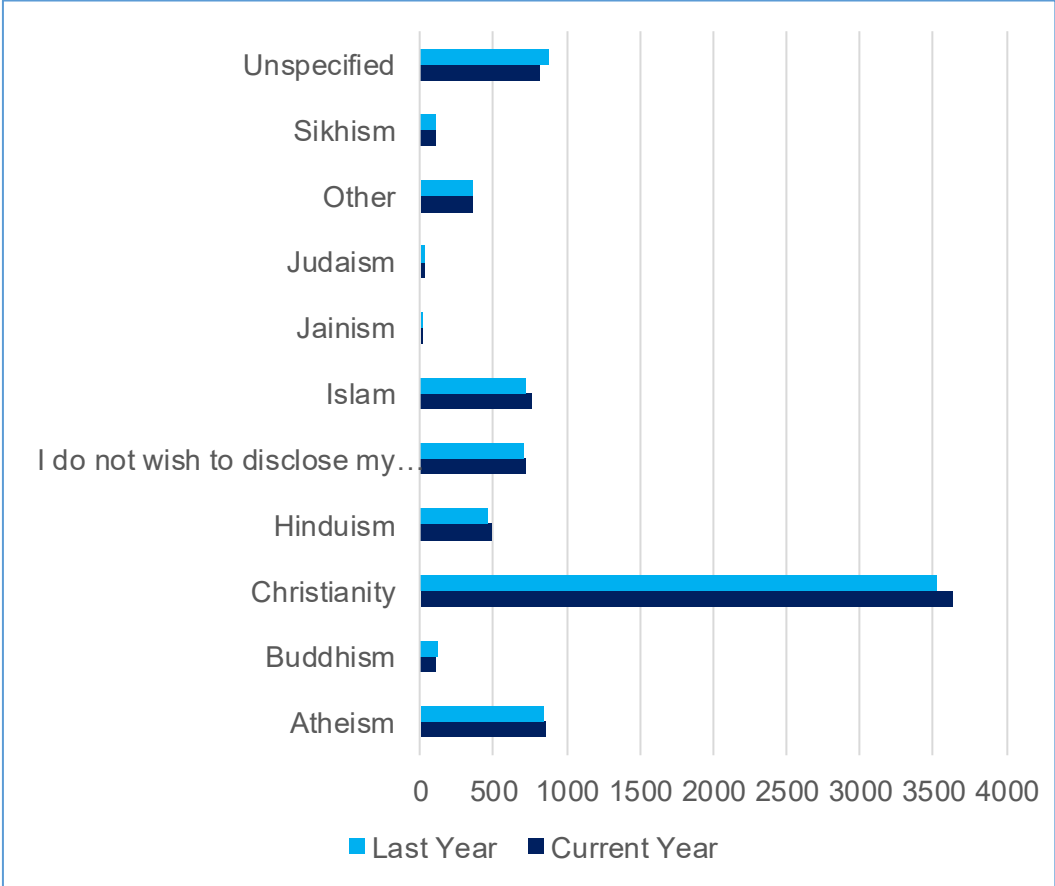


Religious Profile

As at 31st March 2026 the Trust had a total workforce of 7909 (excluding bank staff)
 Overall, 45.93% declared Christianity as their religion, followed by similar numbers (9-10%) in the groups Atheism, Islam, unspecified and those who do not wish to disclose.



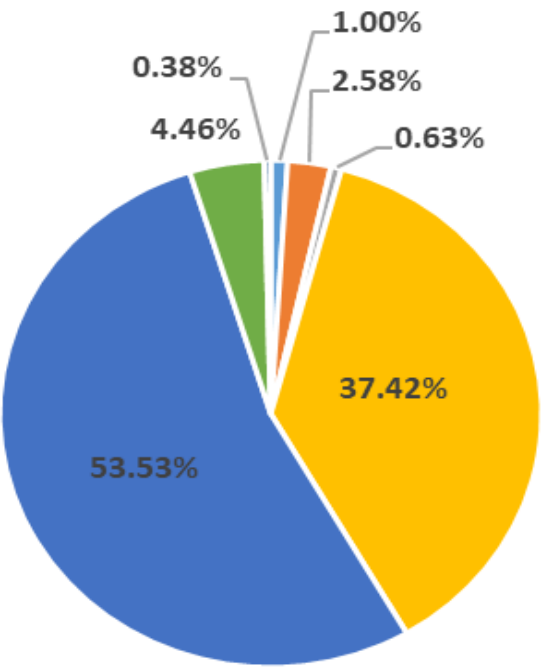
Religion 2025 to 2026
 Compared to the previous year, there has been a small increase in the number of staff in the categories of Christianity, Islam, Hinduism and Atheism





Marriage and civil partnership

The majority of staff have declared that they are single (53.53%) and 37.42% are married.



■ Civil Partnership ■ Divorced ■ Legally Separated ■ Married ■ Single ■ Unknown ■ Widowed

Appendix 2

Patient Profile



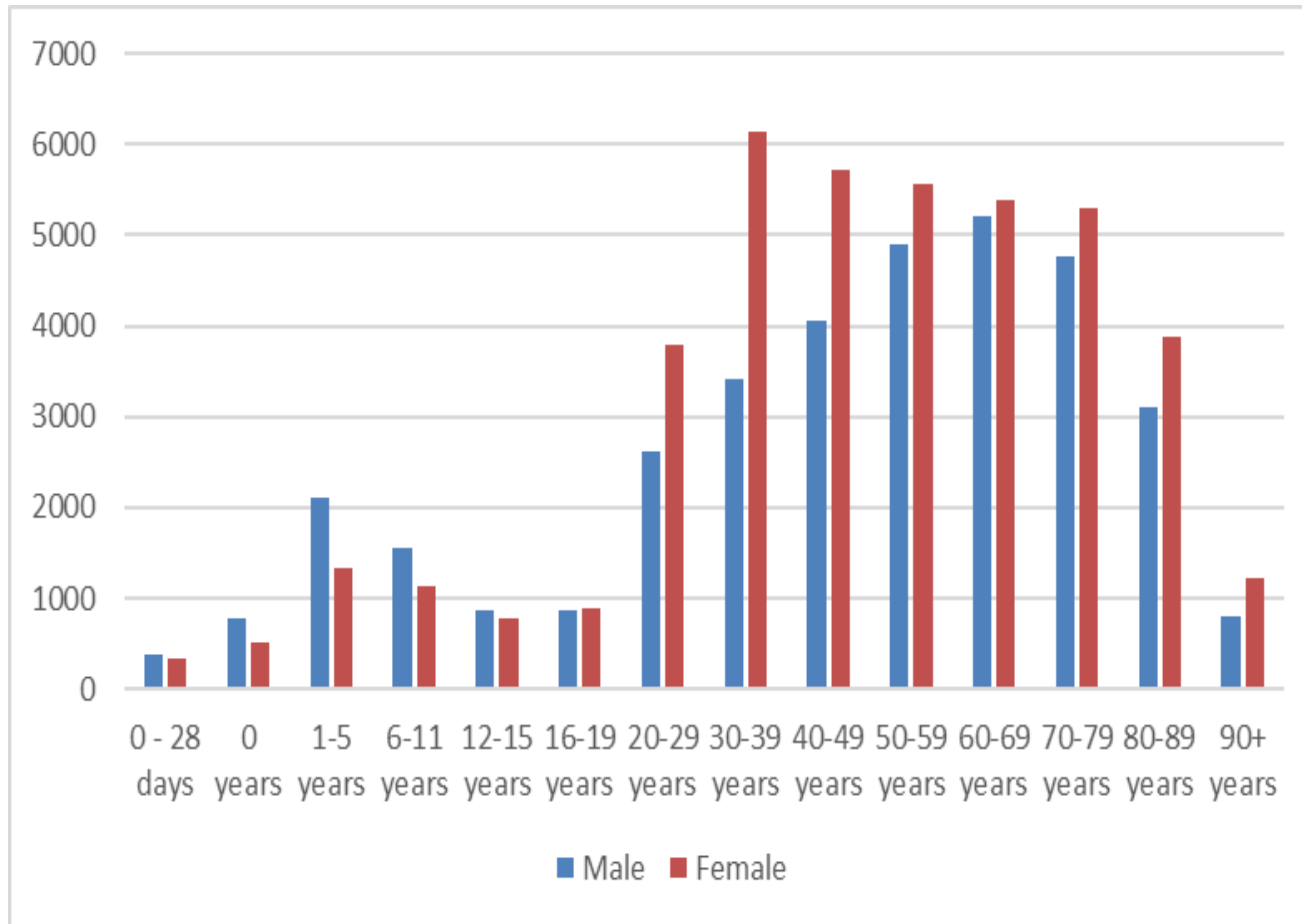
PROUD
TO CARE



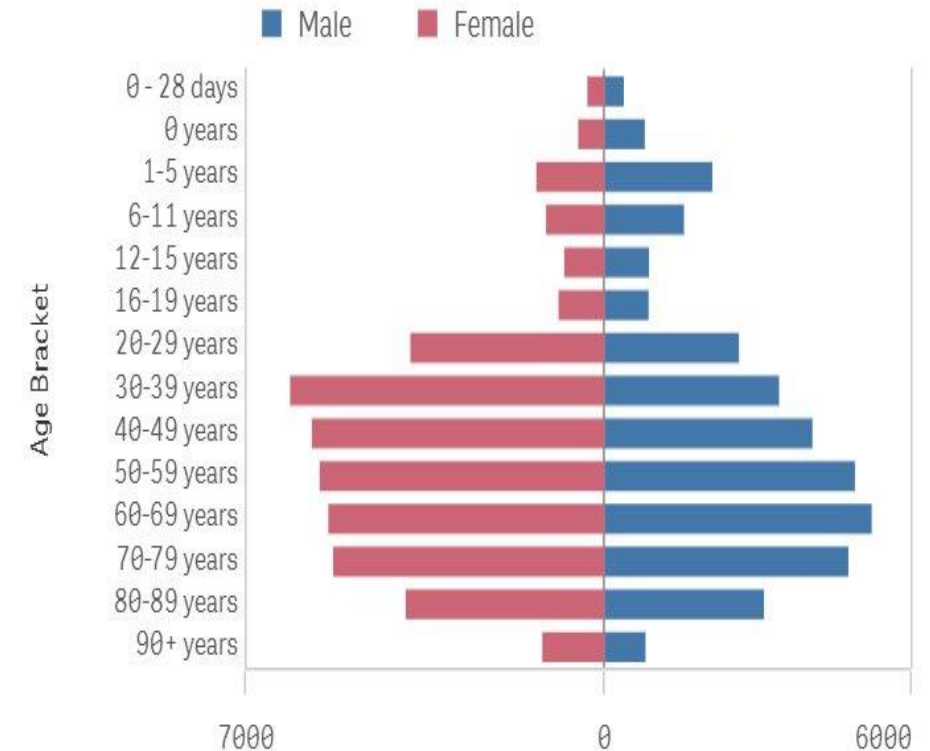
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Inpatients demographics by Gender and Age

From this data we can see the majority accessing inpatient services are females in the 30 – 39 age bracket. For males, it is the 40-49 age bracket



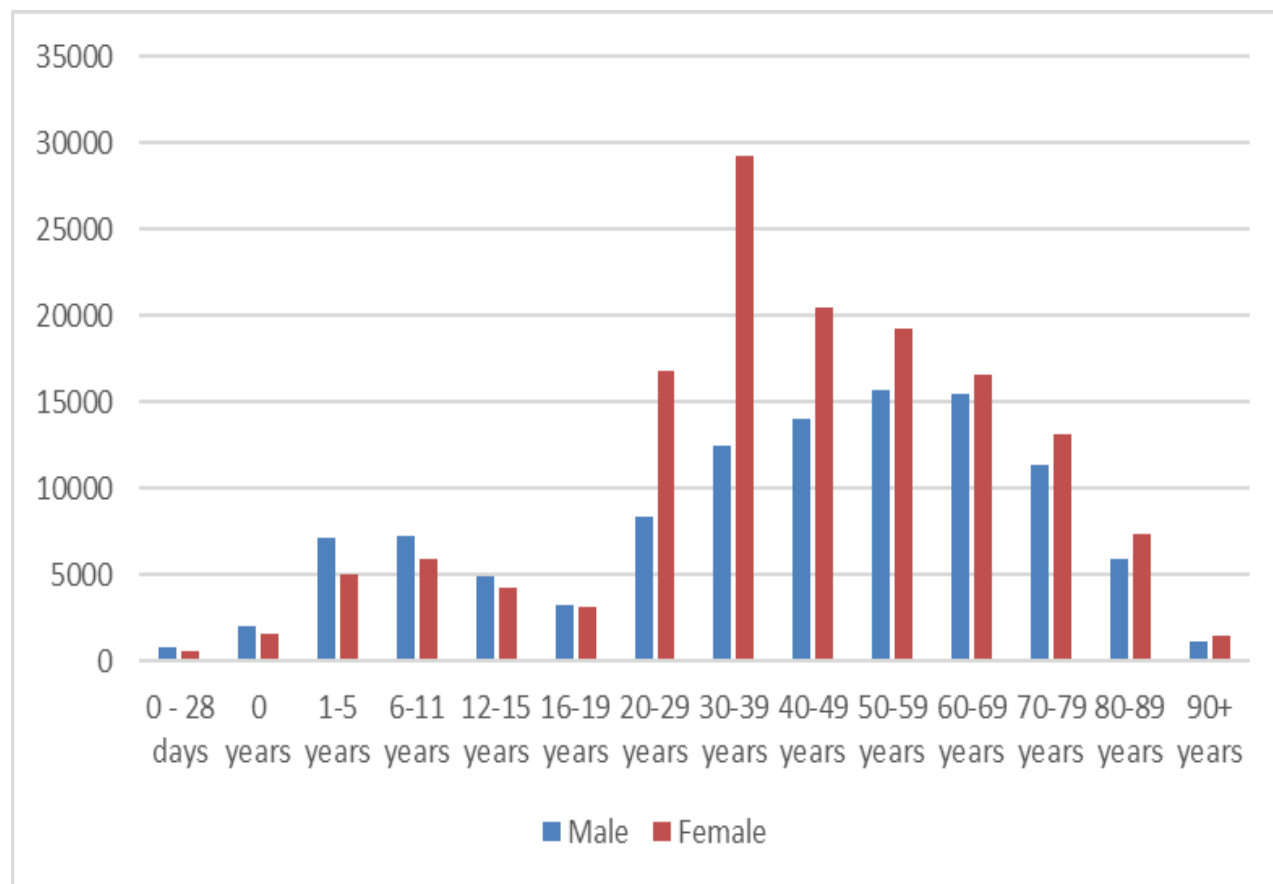
Patients' Age and Gender



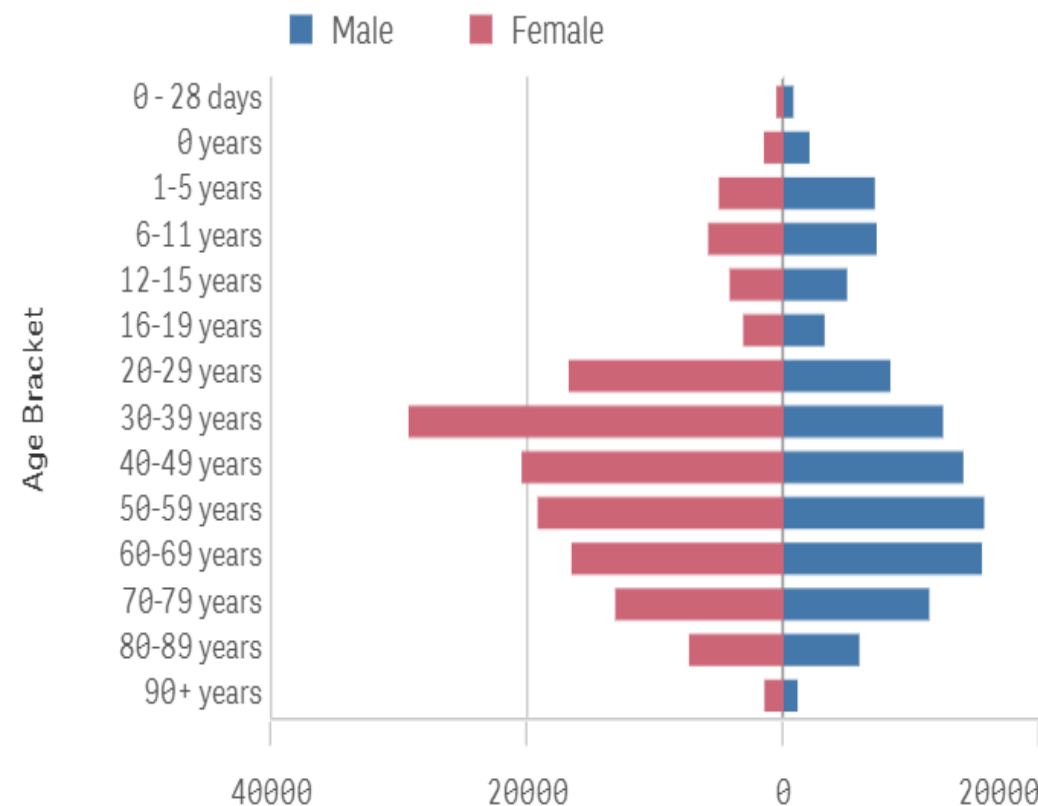
* Note: Each patient is counted as a unique individual within the financial year, regardless of the number of visits or activities

Outpatients demographics by Gender and Age

From this data we can see the majority accessing outpatient services are females in the 30 – 39 age bracket. For males, it is the 50-59 age bracket



Patients' Age and Gender

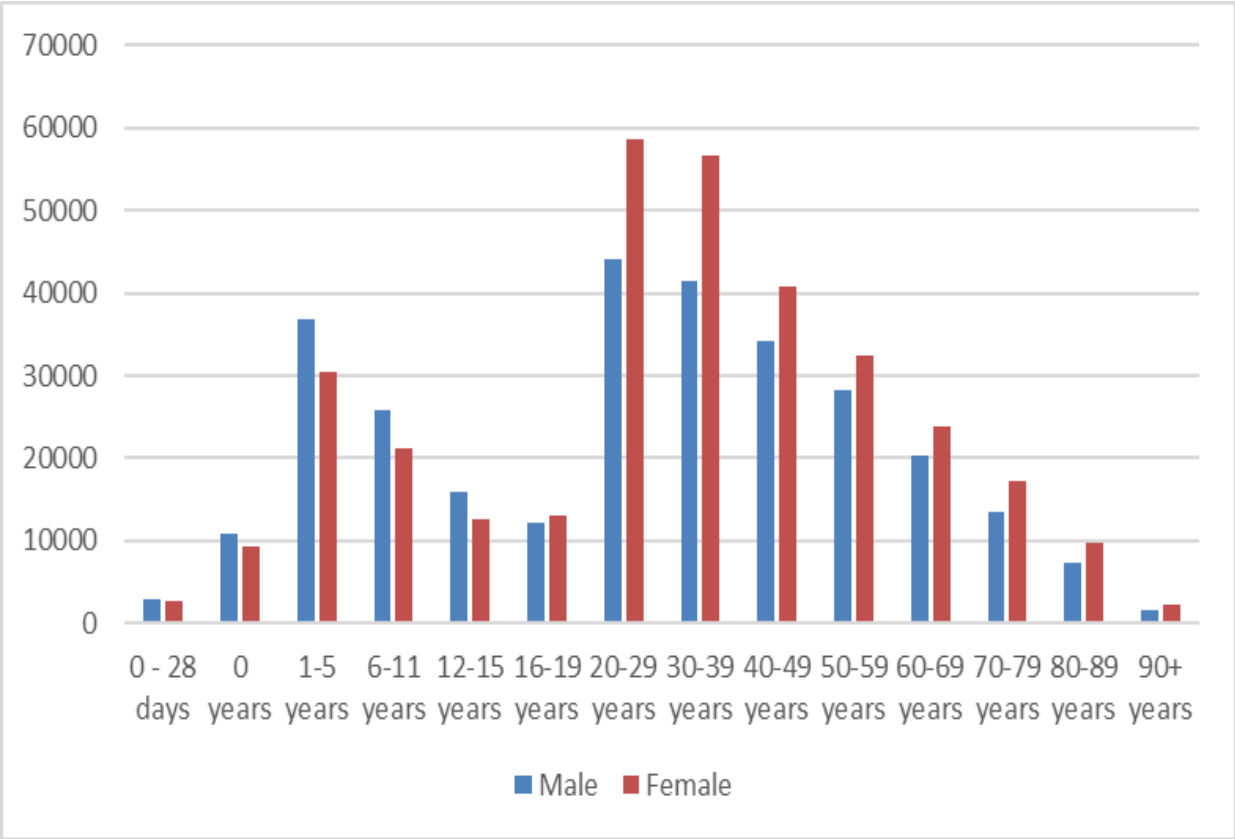


* Note: Each patient is counted as a unique individual within the financial year, regardless of the number of visits or activities

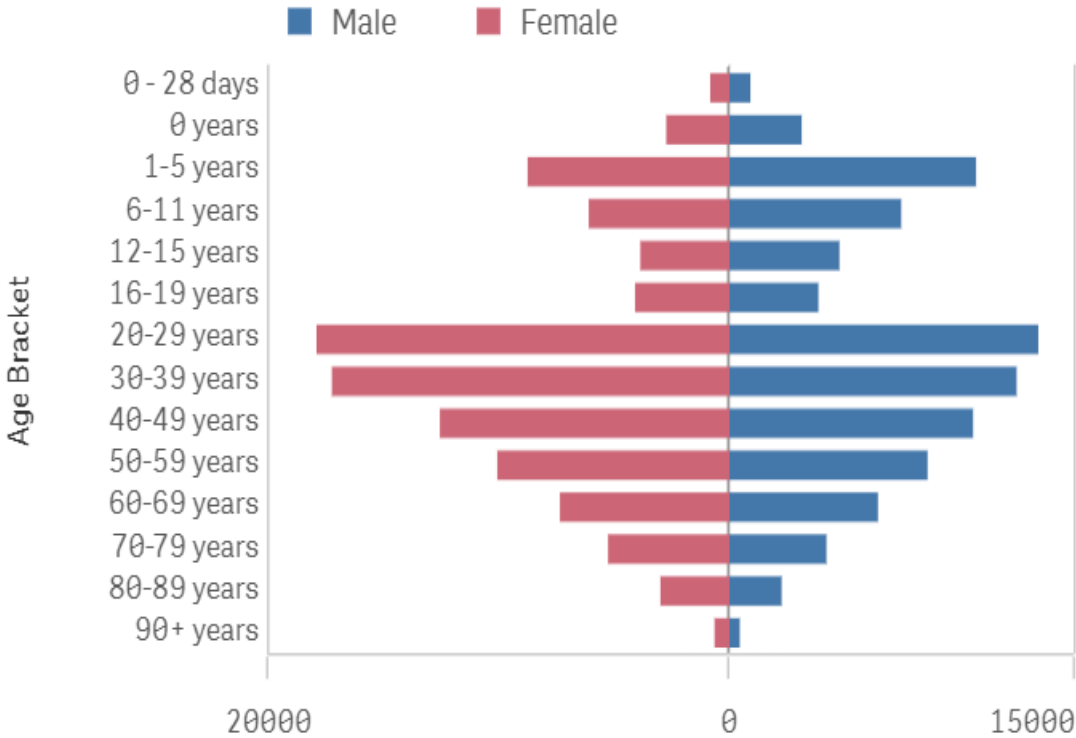


A&E demographics by Gender and Age

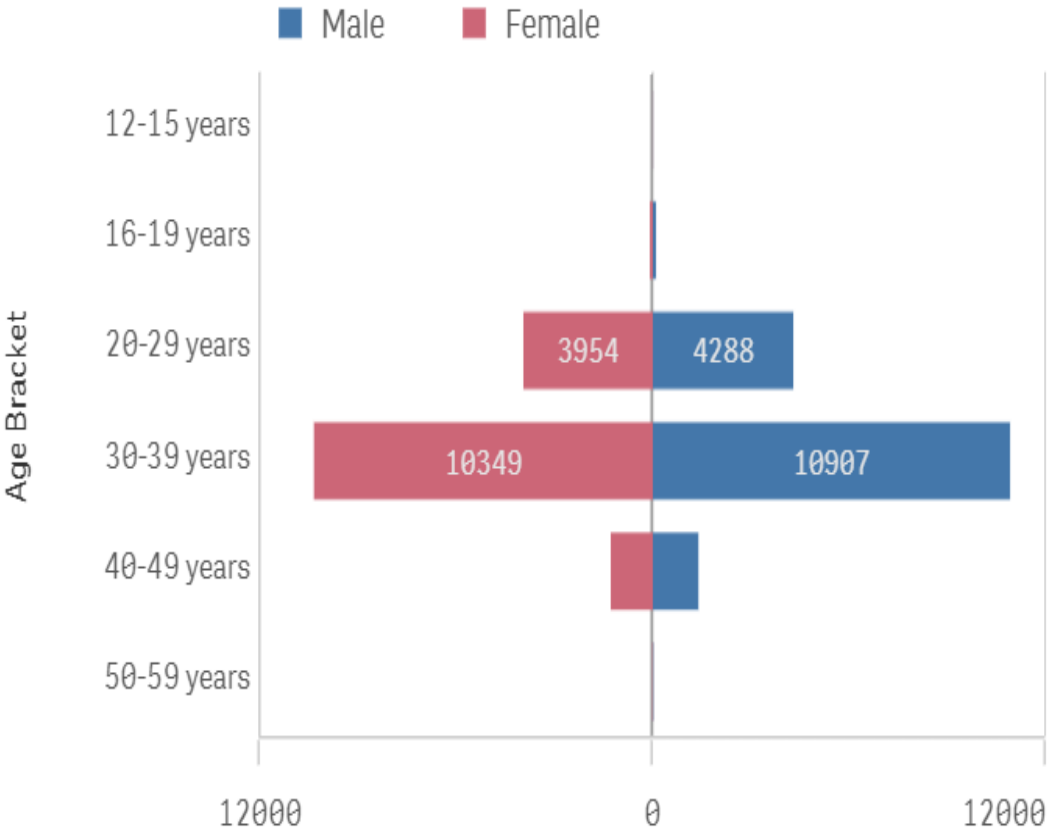
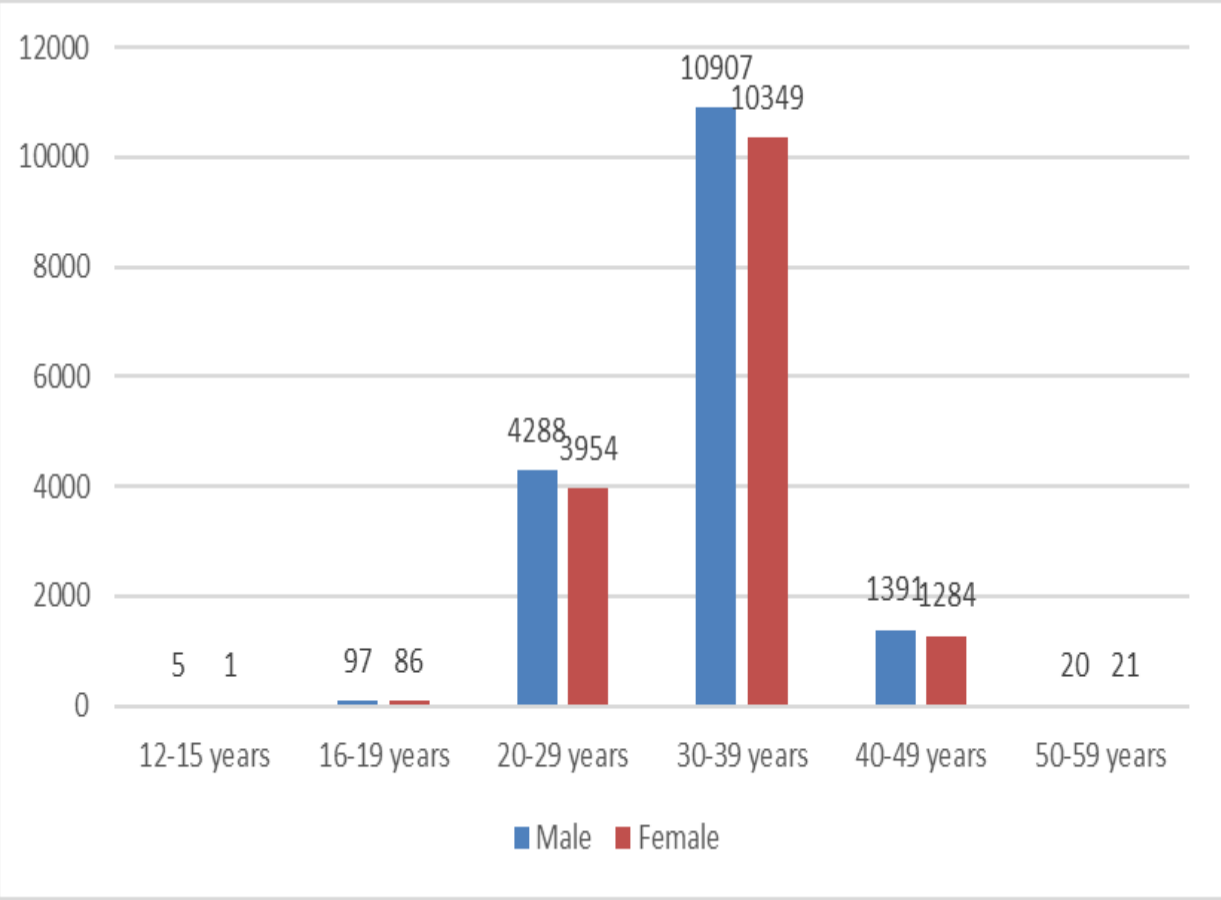
From this data we can see that females are the majority accessing A&E services are females in the 20 – 29 age bracket. For males, the highest age bracket is also the 20 –29 age bracket



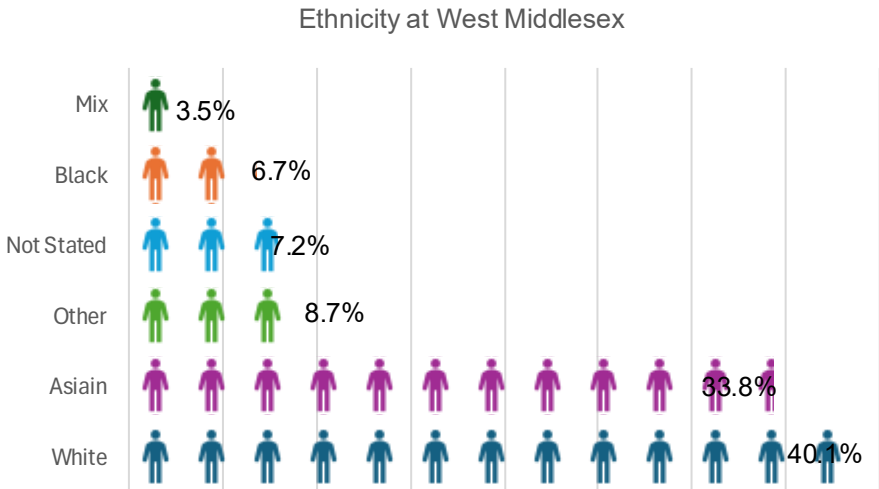
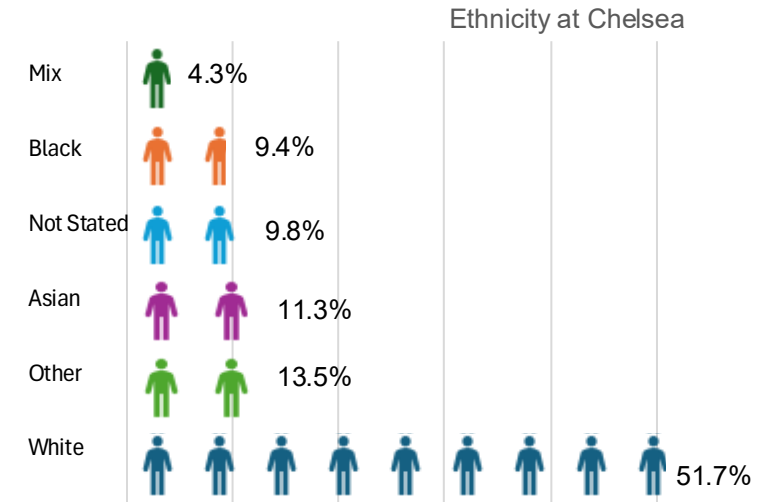
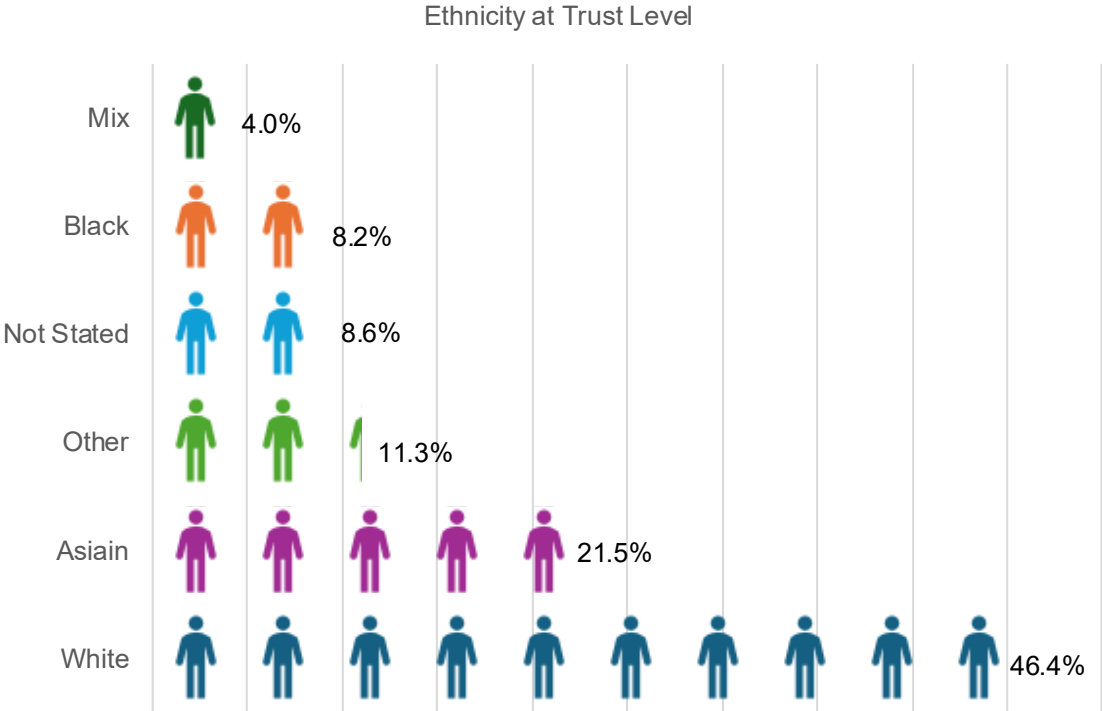
Patients' Age and Gender



Maternity – Mothers Age (at delivery) and baby's gender



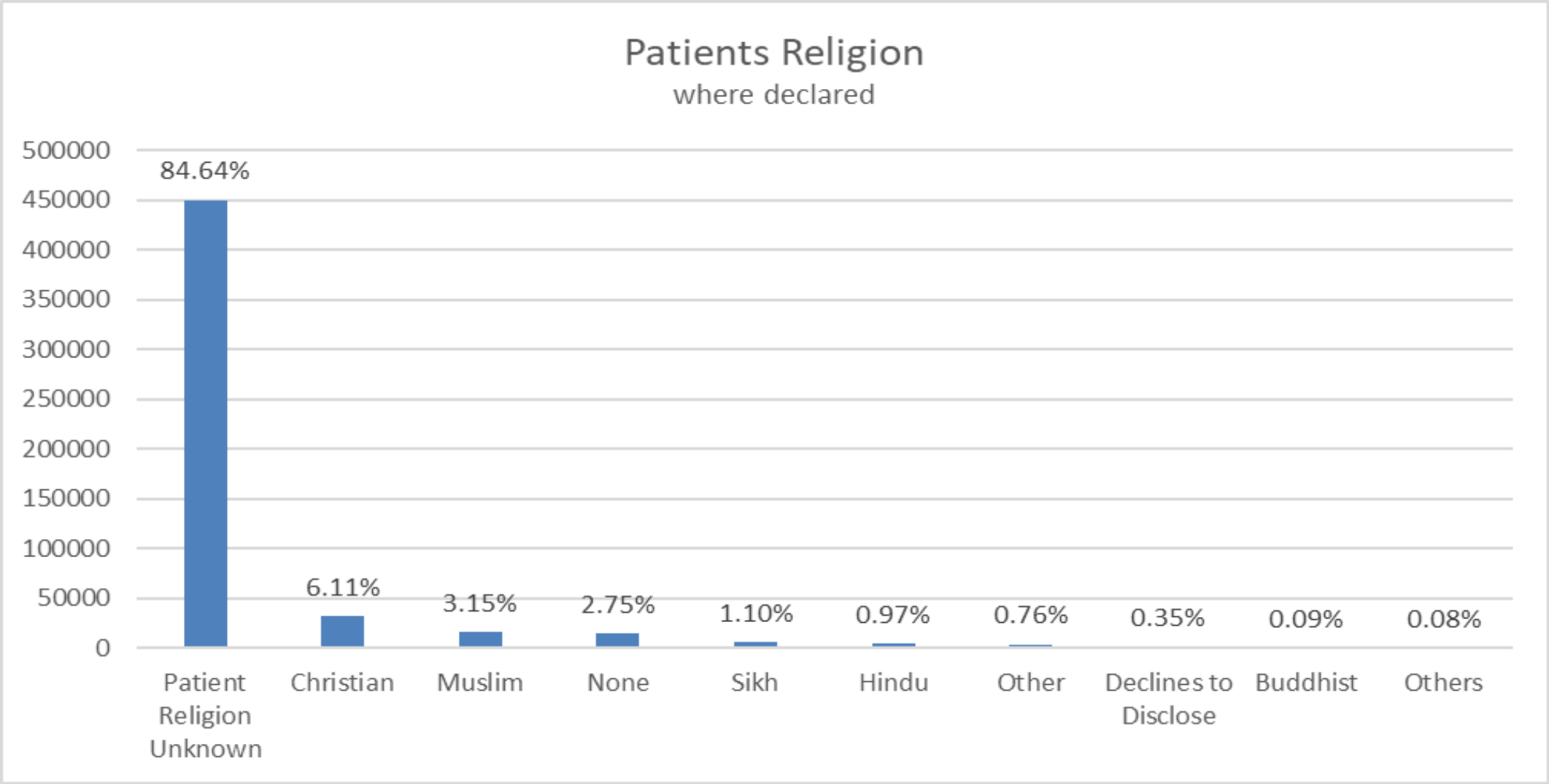
Patient Demographics by Ethnicity



* Note: Each patient is counted as a unique individual within the financial year, regardless of the number of visits or activities



Patients Religious Beliefs

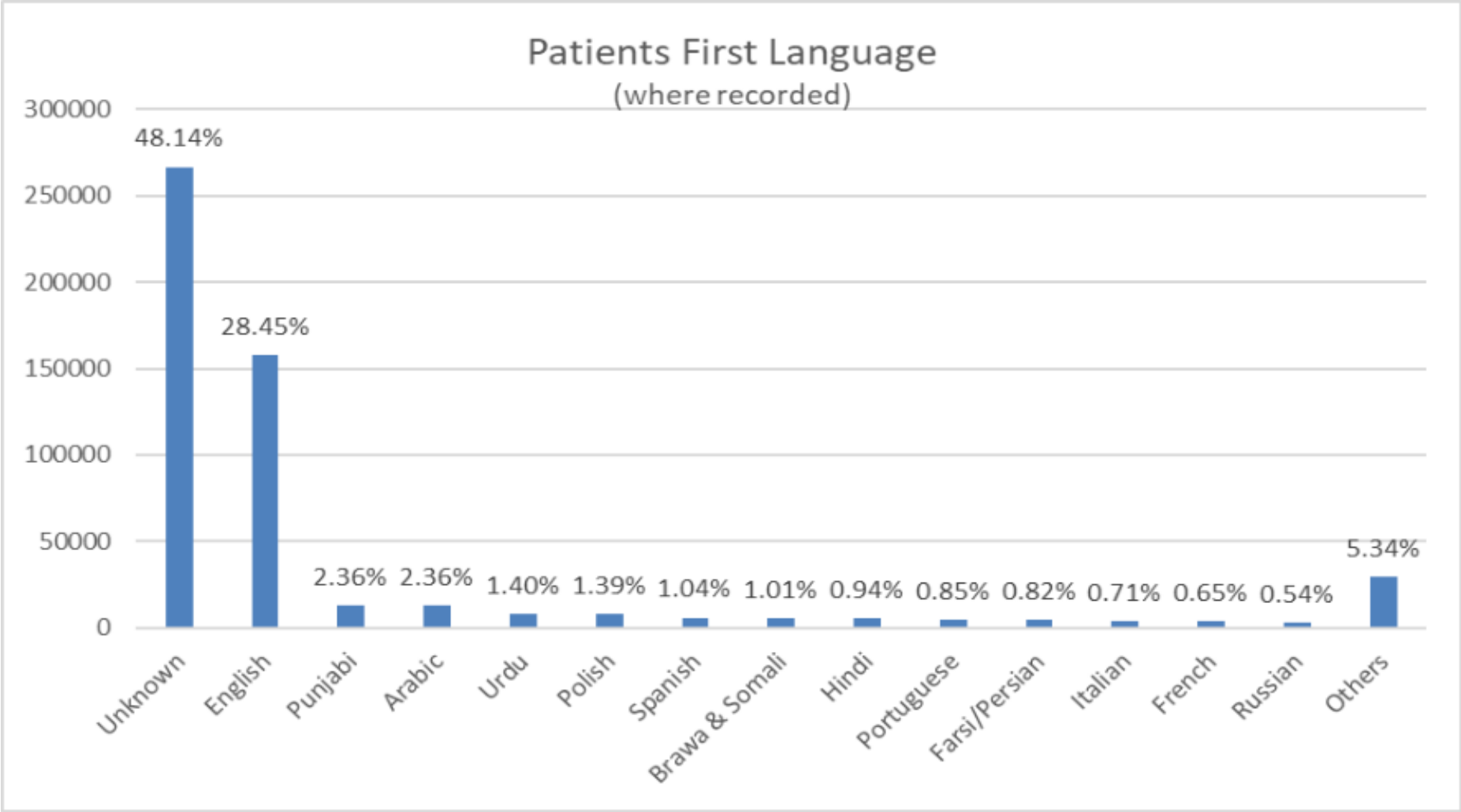


**PROUD
TO CARE**

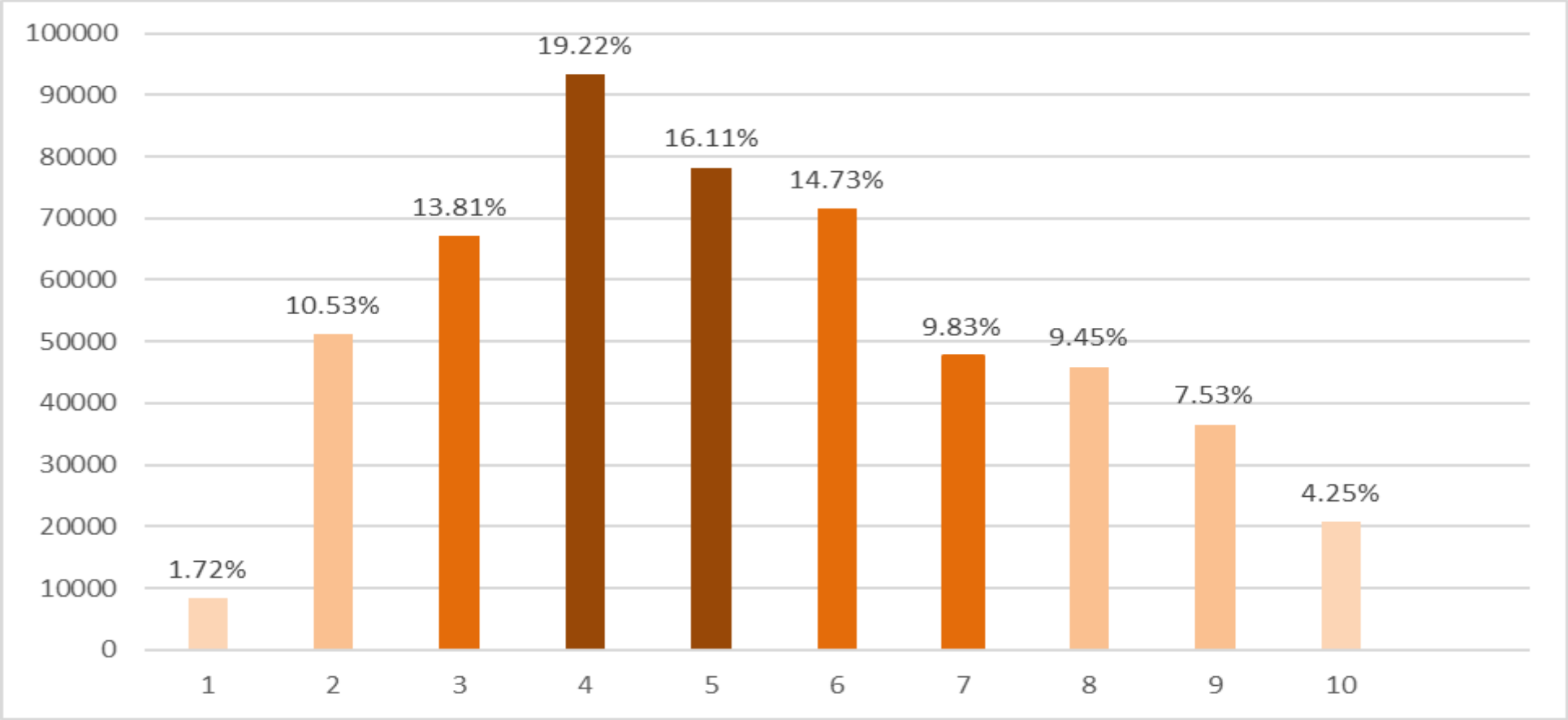


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NHS Foundation Trust

Patients First Language



Patients by Deprivation Index



1 Most Deprived , 10 Least Deprived

Appendix 3 Governance

Since 1st April 2026 our internal governance structure has several groups or committees as per the table below. Externally, we have governance meetings through North West London Acute Provider Group, NHS London Region (including Pan-London and London Workforce Race Strategy), NHS England, NHS WRES and WDES teams amongst others.

Meeting	Purpose	Frequency	Chair	Membership
Belonging Committee	Our dedicated Committee to provide direction and oversight to the delivery of the Trust workforce EDI delivery plan	Monthly	Rob Bleasdale, Chief Nurse	Representatives from our people and organisation development, senior management, divisions and staffside representatives and staff network chairs
Workforce Development Committee	Focus on actions and oversight of the organisation people priorities and programmes of work	Monthly	Kevin Croft (CPO)	Representatives from our people and organisation development, senior management, divisions and staffside representatives
CEO cabinet	Early strategic oversight ahead of Executive Management Board discussions	Weekly	Lesley Watts (CEO)	Trust executive directors and directors
Trust Standing Committee	Oversee the delivery of the Trust strategy and strategic priorities, the achievement of constitutional and regulatory standards, and to provide assurance to the Trust Board that Trust risks and issues relating to this are being managed.	Quarterly	CW Vice Chair (Pat Gallan)	All non-executive directors (voting & designate), with the exception of the Chair in Common who will attend ad hoc ex officio. voting executive directors of the board
Executive Management Board	Strategic oversight of all key workforce business decisions. Review and secondary approval of regulatory papers, plans and key initiatives.	Bi-Monthly	Member of Senior Leadership Team on rotating basis.	Executive and non-executive directors, senior directors
Group People Committee	A non-statutory committee of the Board in Common, to support the Boards of the four acute Trusts in fulfilling their people-related responsibilities. The Committee's role is to oversee and provide assurance on Trust and Group-level people performance, ensure compliance with statutory and regulatory requirements, identify areas of variation and risk that require collective action, and oversee the delivery and development of strategic people priorities and programmes to drive improvement across the Group.	Quarterly	Sim Scavazza (Vice Chair at Imperial).	A Vice Chair of the Board in Common as the Group Committee Chair A non-executive Director from the three other sovereign Trusts within the North West London Acute Provider Group Group Chief People Officer
Board-in-Common	Provides a forum for the four North West London acute provider Trusts to work collectively to improve outcomes, performance and efficiency, with the Board in Common bringing together all Trust Board members to set strategic direction, oversee performance and ensure public accountability.	Quarterly	Chair of the NWL Acute Provider Group (Bob Alexander)	Executive and non-executive directors, senior directors