NHS Workforce Disability Equality Standard (WDES) Annual Report 2026

University Hospitals Dorset NHS Foundation Trust

1. Executive Summary

The NHS Workforce Disability Equality Standard (WDES) was introduced in 2019 to improve the workplace and career experiences of Disabled colleagues across the NHS. The WDES provides a nationally mandated framework through which organisations assess workforce representation, recruitment outcomes, access to opportunities and the lived experience of Disabled staff.

University Hospitals Dorset (UHD) is committed to creating an organisation where Disabled staff and those with long-term conditions can thrive, feel valued, and access the support, development and opportunities they need. During 2025/26 the Trust continued to strengthen its integrated approach to equality, diversity and inclusion (EDI), bringing together improvement activity across WDES, Workforce Race Equality Standard (WRES) and Gender Pay Gap reporting into a single programme of work.

Key Findings

- The disability declaration rate increased from 7.10% in 2025 to 7.64% in 2026, continuing a positive year-on-year trend. However, staff survey data indicates that disability is underreported on ESR, with 21.5% of respondents reporting a long-term physical or mental health condition. This gap limits the Trust's ability to fully understand workforce needs and target support effectively
- Recruitment outcomes remain broadly equitable, with minimal difference between Disabled and non-disabled applicants appointed from shortlisting
- The relative likelihood of Disabled staff entering formal capability processes remains low, although the relative likelihood has increased slightly compared with 2025 and requires continued monitoring
- There has been a notable reduction in harassment, bullying and abuse from patients and the public. However, Disabled staff remain more likely than non-disabled staff to experience harassment, bullying and abuse from managers and colleagues, indicating a continued need to strengthen inclusive workplace behaviours and culture

- The percentage of staff who believe the organisation provides equal opportunities for career progression or promotion has decreased for both Disabled and non-disabled staff. This decline highlights the need for continued monitoring of staff experience and targeted action to address barriers to career development, ensuring equitable progression opportunities for all staff
- Representation of Disabled people at Board level remains below workforce representation, highlighting the importance of inclusive leadership pathways and succession planning

Priorities for 2026-29

- Assess and strengthen organisational EDI capability and capacity through the development and implementation of a three-year EDI strategy and action plan aligned to the NHS People Promise and Staff Standards
- Improve disability declaration rates and workforce data quality to better understand the experiences of disabled staff and inform targeted action
- Strengthen reasonable adjustment processes to ensure timely, consistent and effective support for disabled staff across the organisation
- Improve recruitment, career development and progression opportunities for disabled staff by identifying and addressing barriers to employment and advancement
- Reduce experiences of bullying, harassment and discrimination experienced by disabled staff, particularly from colleagues and managers, by strengthening compassionate leadership, promoting inclusive workplace behaviours, and creating a culture of respect, belonging and psychological safety
- Strengthen staff voice and engagement through the Pro-Ability staff network, lived experience feedback and staff listening mechanisms
- Strengthen leadership accountability for advancing disability inclusion and improving outcomes for disabled staff

2. Introduction

The Workforce Disability Equality Standard (WDES) forms part of the NHS Standard Contract and requires NHS organisations to review their performance against ten indicators covering workforce representation, recruitment, capability processes, workplace experience, reasonable adjustments, engagement and Board representation.

This report presents UHD's 2026 WDES submission and compares results with previous years to assess the current position, understand progress made, and identify priorities for further improvement.

3. Progress Since 2025

Coordinated Action Plan

During 2025/26 UHD introduced a more coordinated approach to equality improvement through a combined WRES, WDES and Gender Pay Gap action plan overseen through the People and Culture Committee.

Disability Inclusion

The Trust continued work to improve disability inclusion through staff network engagement, wellbeing initiatives and action planning aligned to NHS England's EDI priorities.

Data Quality

Improving disability declaration remains a key priority. The Trust has continued to promote self-declaration and improve workforce monitoring arrangements. This has contributed to a sustained increase in disability declaration rates over recent years.

Workforce Wellbeing and Adjustments

The Trust has continued to improve access to workplace adjustments and promote the support available to staff with disabilities and long-term conditions. However, further work is required to increase awareness and understanding among both staff and managers of their roles and responsibilities in relation to reasonable adjustments, ensuring support is timely, consistent and effective.

4. Summary Workforce Disability Equality Standard Indicators

		Measure	2022	2023	2024	2025	2026	UHD Trend
1.	Percentage of staff with a Disability compared to non-disable staff (declaration rate on ESR).	Overall%	4.4	5.6	6.3	7.10	7.64	
2.	Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts.	Likelihood	1.2	1.24	1.11	1.05	1.01	
3.	Relative likelihood of Disabled staff compared to non-disabled staff entering the formal capability process, as measured by entry into the formal capability procedure.	Likelihood	4.12	3.03	2.08	0	1.39	
4a.	Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from patients' /service users, their relatives or other members of the public.	Disabled%	32	32.5	30.56	30.32	26.45	
		Non-Disabled %	25	27.8	25.34	20.94	20.75	
4b.	Managers	Disabled%	15.3	15.3	13.05	12.77	12.58	
		Non-Disabled %	9.11	8.6	5.83	6.16	6.18	
4c.	Other colleagues	Disabled%	25.0	26.6	24.35	23.51	23.26	
		Non-Disabled %	19	17.8	14.21	14.10	14.20	
4d.	Percentage of Disabled staff compared to non-disabled staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it.	Disabled%	45.8	47.8	48.78	48.61	54.63	
		Non-Disabled %	46.1	42.8	46.03	52.95	50.69	
5.	Percentage of staff believing that their trust provides equal opportunities for career progression or promotion.	Disabled %	54.3	55.3	54.25	54.06	52.76	
		Non-Disabled %	59.06	58.5	58.71	60.01	57.98	

6.	Percentage of Disabled staff compared to non-disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.	Disabled %	29.1	28.8	25.21	22.59	25.51	
		Non-Disabled %	21.0	19.6	16.17	14.42	15.62	
7.	Staff Survey Percentage of Disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.	Disabled %	35	31.4	37.6	35.46	33.71	
		Non-Disabled %	43	40.8	45.99	46.64	45.69	
8.	Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to conduct their work. [%]	Overall %	78.3	78.0	78.16	78.44	77.13	
9a.	The staff engagement score for Disabled staff, compared to non-Disabled staff and the overall engagement score for the organisation.	Disabled %	6.6	6.5	6.62	6.53	6.40	
		Non-Disabled %	7.0	6.9	6.96	7.01	6.95	
9b.	Has your trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? (Yes) or (No).	Disabled %	Yes	Yes	Yes	Yes	Yes	
		Non-Disabled %	Yes	Yes	Yes	Yes	Yes	
10.	Percentage difference between the organisation's Board voting membership and its organisation's overall workforce.	By voting and Executive membership of Board	4	5.6	6.2	4.0	5.56	

Green =Positive movement towards race equality outcomes compared with the previous year.

Amber = Limited change requiring continued monitoring and action.

Red = Negative movement compared with the previous year, requiring targeted intervention.

5. Overall Themes

The 2026 WDES submission highlights four key themes that will inform the Trust's priorities for improving disability inclusion, staff experience and workforce equality.

1. **Disability Declaration**
   Disability declaration rates continue to improve, providing a stronger evidence base to understand workforce needs, identify inequalities and inform targeted action. However, further work is required to increase staff confidence in declaring disabilities and long-term health conditions to ensure workforce data more accurately reflects the experiences of staff.
2. **Workplace Culture**
   Disabled staff continue to report higher levels of bullying, harassment and discrimination than their non-disabled colleagues, particularly involving managers and colleagues.
3. **Career Opportunity and Inclusion**
   Disabled staff continue to report less favourable experiences relating to career progression, development opportunities and workplace inclusion.
4. **Presenteeism**
   The increase in reported pressure to attend work when unwell suggests further work is required to strengthen wellbeing culture and manager capability in supporting staff with disabilities and long-term conditions.
5. **Leadership Accountability**
   Sustained improvement requires visible leadership commitment, effective governance and clear accountability for disability inclusion.

Conclusion

The 2026 WDES results demonstrate continued progress in disability declaration rates and equitable recruitment outcomes. However, Disabled staff continue to report less favourable experiences than non-disabled staff, particularly in relation to bullying, harassment, discrimination, career progression and inclusion.

While positive progress has been made, these disparities highlight that disability equality remains a significant organisational challenge requiring sustained leadership focus and accountability. Through the delivery of its EDI Strategy and Action Plan, UHD will continue to reduce inequalities, strengthen compassionate and inclusive leadership, improve workplace culture, and enhance the experience and outcomes of Disabled staff and those with long-term health conditions.

Appendix 1 – Integrated Equality, Diversity and Inclusion Action Plan

Theme	Consolidated Action	Progress since 2025	Focus for 2026-29
Leadership Accountability & Governance	1. A) Assessment of current EDI capability and capacity to develop a three-year EDI strategy and action plan in line with Staff Standards and the People Promise B) Embed EDI objectives in Board appraisals and deliver Board development	• All Board members completed appraisals that included EDI objectives • Board Development session delivered by Yvonne Coghill, CBE • Executive sponsors were appointed to staff networks to strengthen Board-level engagement and support network priorities	• Board members to review and report on progress against EDI objectives • Embed EDI objectives within the Top Leaders Group performance and appraisal framework • Strengthen visible leadership through active role modelling • Expand Executive-Led Staff Voice listening conversations • Implement and monitor the recommendations from the Lord Mann review and Staff Standards

Inclusive Recruitment	2. Strengthen inclusive recruitment practices through training, positive action, and monitoring of recruitment outcomes for senior roles	• The first cohort of Recruitment Allies was trained to support the inclusive interview panels • Conscious Inclusion training modules continued to be delivered to strengthen inclusive behaviours and decision-making across the organisation • A new Recruitment and Selection policy is being developed by the Recruitment Team	• Introduce the monitoring of shortlisting and offers for senior bands • Increase the use of inclusive recruitment panels • Design and implement inclusive recruitment training with an accreditation process for recruiting managers
Career Progression & Pay Equity	3. Improve equitable access to career development and progression through inclusive learning, supported by robust monitoring of promotion and progression by protected characteristics	• Perceptions of equal opportunities for career progression or promotion were lower among staff with a long-term condition, at 52.76%, compared with 57.98% among staff without a long-term condition	• Monitor promotion opportunities • Develop targeted progression pathways for disabled and BME staff with network leads • Create EDI dashboard to present data and use this data to target interventions
Workforce Health & Wellbeing	4. Strengthen wellbeing capability for managers including the implementation and embedding of the reasonable adjustments process	• Reasonable adjustments guidance in process of approval and due to be published shortly • Increased focus on staff wellbeing issues through the delivery of Thrive events	• Communicate guidance to managers and focus on consistency of delivery • Target manager capability through new management framework • Thrive Live extended to 3 weeks for 2026

Staff Experience & Voice	5. Deliver listening events to improve engagement and strengthen the impact of staff networks	• Monthly network events and guest speakers for network events to promote engagement, learning and inclusion • Staff Networks continue to mature, strengthen their influence and drive influencing positive change	• Shift from listening into action; track themes and outcomes • Formalise role of networks in influencing policy and progression pathways • Ongoing monitoring of engagement and value questions through quarterly Pulse and Staff Survey • Target manager capability through new management framework and Staff Standards
Bullying, Harassment & Culture	6. Reinforce anti-discrimination practices through inclusive leadership development to reduce disparities in bullying, harassment and discrimination	• Board and Governor development sessions with Yvonne Coghill CBE • In-house Reverse Mentors piloted to support FNF delegates • Phase 1 of the Behaviour Charter launched • Ongoing Conscious Inclusion training for new managers and staff • Continued promotion of the See Me First campaign	• Sustain focus; target colleague-to-colleague behaviour • Complete rollout and embed in leadership expectations • Introduce measurable reduction targets
International Workforce	7. Ensure PDP coverage and support for internationally recruited staff	• Established support from Practice Educator team and others. • The new Learning Management System (Totara) will improve access to data during roll out in 2026/27.	• Maintain support and monitor PDP
Data, Transparency & Monitoring	8. Improve disability declaration rates and data quality, supported by in-year monitoring	• Review of digital improvement opportunities across People work streams	• Create EDI dashboard to present data and use this data to target interventions • Continue targeted campaigns to improve completeness

	and performance tracking to inform targeted interventions	• Improved reporting to the PCC to strengthen oversight, monitoring and accountability	