

NGH Workforce Disability Equality Standard (WDES) Report

April 2024 – March 2025



EMPLOYER RECOGNITION SCHEME

SILVER AWARD 2024

Proudly supporting those who serve.

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Introduction

It is well evidenced through various sources of data and lived experiences, that colleagues with a **disability or long - term health condition** have a poorer experience of working within the NHS. At UHN we are committed to improving those **lived experiences** and focused on creating a culture where:

- **Working with a disability is not a barrier to progression,**
- **Individuals feel safe in the workplace and**
- **Differences are embraced.**

As a Trust we want to focus on working in **partnership with our patients, service users and colleagues**, to change our ways of working and interacting with each other. This enables our colleagues to **thrive and deliver** the best possible services and care to the people of **Northampton, Kettering and surrounding areas**.

The importance of **disability equality** is embedded into the **NHS People Promise** where it states '**We are open and inclusive. We understand, encourage and celebrate diversity, making the NHS a place where we all feel we belong**'. The **People Promise** declares 'a commitment to creating and maintaining a compassionate and inclusive culture where diversity is valued and celebrated as a critical component, and not just a desirable one.' The Trust must also meet its **legal obligations** under the **Equality Act 2010** and **The Human Rights Act 1998**.

Each year the Trust is required to publish **Workforce Disability Equality Standard (WDES)** data. The WRES provides a framework for NHS organisations to **report, demonstrate and monitor** progress against **ten indicators of workforce equality**. The indicators are a combination of **workforce data and results from the NHS national staff survey** and help to ensure that disabled colleagues receive **fair treatment** in the workplace and have **equal access to career opportunities**. The WDES is included in the NHS Standard Contract and has been a requirement of NHS commissioners and NHS healthcare providers since April 2017.

WDES Indicators



Indicator 1

Percentage of staff in each of the AfC Bands 1-9 or Medical and Dental subgroups and VSM (including executive Board members) compared with the percentage of staff in the overall workforce



Indicator 2

Relative likelihood of non-disabled staff compared to disabled staff being appointed from shortlisting across all posts.



Indicator 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



Indicator 4

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
- Managers
- Other colleagues,
- 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



Indicator 5

Percentage of disabled staff compared to non-disabled staff believing that the Organisation provides equal opportunities for career progression or promotion.



Indicator 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.



Indicator 7

Percentage of disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.



Indicator 8

Percentage of disabled staff saying that their employer has made reasonable adjustment(s) to enable them to carry out their work.



Indicator 9

NHS Staff Survey and the engagement of disabled staff

- The staff engagement score for Disabled staff, compared to nondisabled staff.
- Have you taken action to facilitate the voices of disabled staff in your organisation to be heard (Yes or No)?



Indicator 10

NHS Staff Survey and the engagement of disabled staff.

- The staff engagement score for Disabled staff, compared to nondisabled staff.
- Have you taken action to facilitate the voices of disabled staff in your organisation to be heard (Yes or No)?

Data Limitations

A significant portion of the workforce may not declare their disability status, potentially leading to an underestimation of the disabled workforce and its representation in various roles. Data for WDES is ESR which may not have complete records of disability status, particularly among colleagues who may not have voluntarily declared it or whose Disability & LTC may have changed during their employment cycle and they may not have updated ESR records either by choice/inadvertently omitted

Workforce indicators for each of the four workforce indicators, compare the data for disabled and non-disabled staff -

Indicator 1 : the definitions for these categories are based on Electronic Staff Record (ESR) occupation codes except for medical and dental staff, which are based upon grade codes.

Indicator 2: refers to 'Relative likelihood of staff being appointed from shortlisting across all posts', it must be noted that this refers to both external and internal posts through the Trac system linking into ESR.

Indicator 3: Relative likelihood of staff entering the formal capability process, as measured by entry into a formal capability procedure, this indicator is based on data from a 12month/24 month rolling average of the current year and the previous year.

Four of the WRES indicators (5 to 8) are drawn from questions in the National NHS staff survey. The reliability of the data drawn from those indicators is dependent upon the overall size of the sample that have responded to the Staff Survey, the response rates to the survey questions, and whether the numbers of BME staff are large enough to not undermine confidence in the data. It should be noted that in the most recent staff survey (2024) only 54% of the total UHN workforce population took part in the survey.

Workforce Disability Equality Standard 2024/25

Total Workforce Population based on Disability

Disabled: 389
Non-Disabled: 5,689
Unknown: 287
Total Workforce: 6,617

1

6%

Percentage of disabled staff



2

1.25

Relative likelihood of non-disabled applicants being appointed from shortlisting across all posts compared to disabled applicants



4b

48%

Percentage of disabled staff who reported harrassment, bullying and abuse



Relative likelihood of disabled staff entering the formal capability process compared to non-disabled staff

0



3



5

49%

Percentage of disabled staff believing the trust provides equal opportunities for career progression or promotion



Percentage of disabled staff saying they felt pressure from their manager to come to work when unwell

28%



6

Percentage of staff with a long term condition saying their employer has made adequate adjustments

76%



8

Percentage of disabled staff satisfied with the extent to which the organisation values their work

33%



7

Disabled staff engagement score

6.25



9

10

Disabled Board Membership difference

-6%



Percentage of disabled staff experiencing harrassment, bullying or abuse from:

Staff: 28%



Manager/Team Lead: 15%



Patients & Relatives: 32%


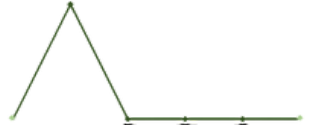
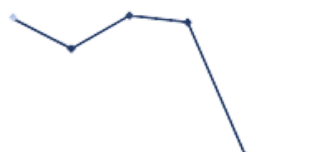




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Yearly Comparison

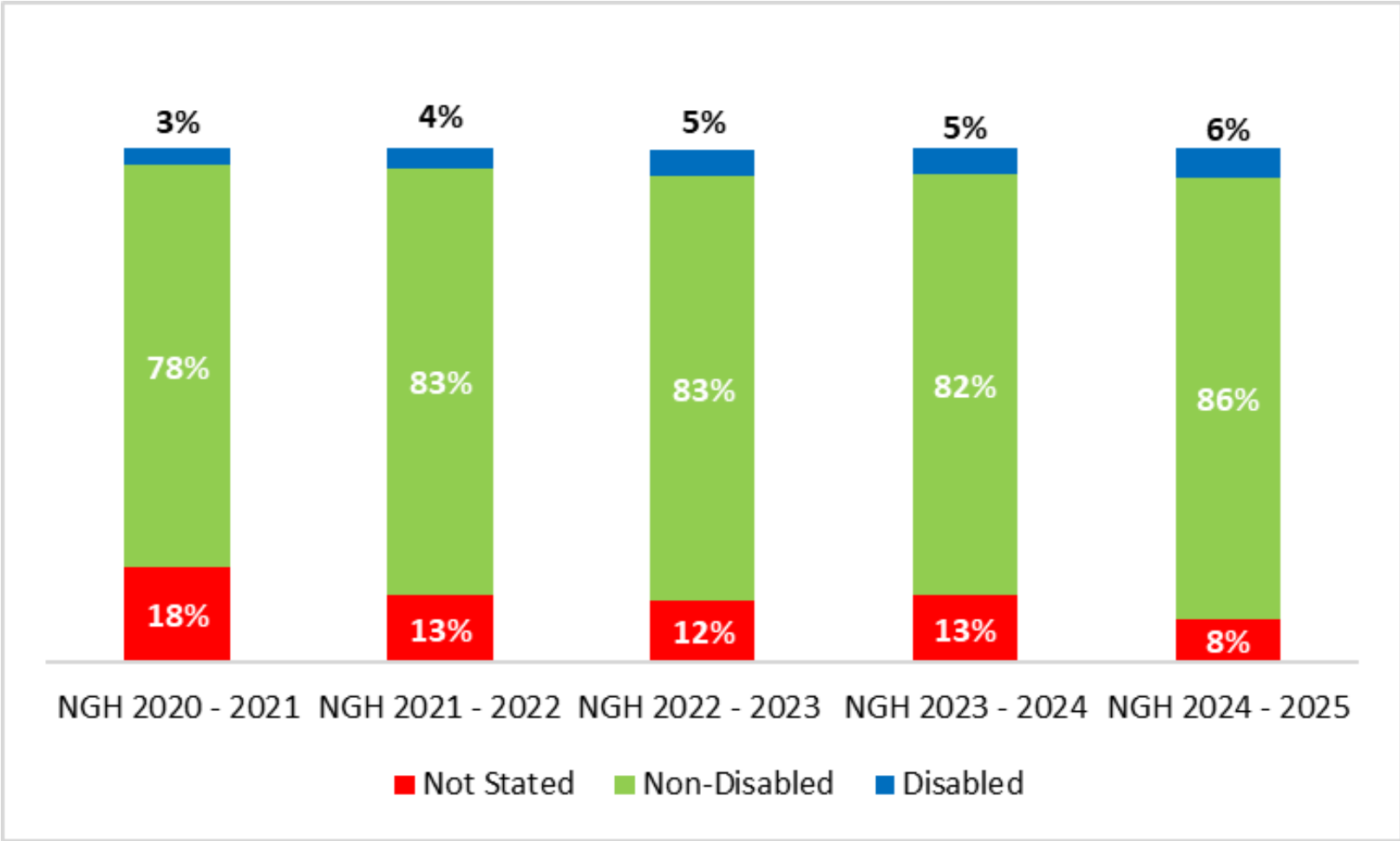
	WRES Indicator	NGH 2020-2021	NGH 2021-2022	NGH 2022-2023	NGH 2023-2024	NGH 2024 - 2025	Trend	Difference between 23/24 & 24/25
1	Percentage of Disabled staff	5%	4%	5%	5%	6%		+1% 
2	Likelihood of Non-Disabled applicants being appointed from shortlisting across all posts compared to Disabled applicants	1.12	1.24	1.27	0.82	1.25		+0.36 
3	Likelihood of Disabled staff entering formal capability process compared to Non-Disabled staff	5.85	0.00	0.00	0.00	0.00		= 
4a	Percentage of disabled staff experiencing harassment, bullying or abuse from Patients/Service users, their relatives or other members of the public in last 12 months	35%	33%	38%	32%	32%		= 
4b	Percentage of disabled staff experiencing harassment, bullying or abuse from managers in last 12 months	21%	23%	23%	15%	15%		= 
4c	Percentage of disabled staff experiencing harassment, bullying or abuse from other colleagues in last 12 months	31%	33%	32%	29%	28%		-0.44% 
4d	Percentage of disabled staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it in the last 12 months	50%	45%	53%	53%	48%		-5.27% 

Yearly Comparison

	WRES Indicator	NGH 2020-2021	NGH 2021-2022	NGH 2022-2023	NGH 2023-2024	NGH 2024 - 2025	Trend	Difference between 23/24 & 24/25
5	Percentage of disabled staff believing that trust provides equal opportunities for career progression or promotion	50%	51%	51%	51%	49%		-1.78% 
6	Percentage of disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties	35%	33%	34%	29%	28%		-1.86 
7	Percentage of disabled staff satisfied with the extent to which their organisation values their work	36%	33%	33%	37%	33%		3.75% 
8	Percentage of staff with a long lasting health condition or illness saying their employer has made adequate adjustments to enable them to carry on working	79%	72%	70%	75%	76%		+1.15% 
9	Staff engagement score for disabled staff	6.66	6.39	6.19	6.49	6.25		-0.25 
10	Percentage difference between the organisation's Board membership and its organisation's overall workforce (disabled)	-5%	-4%	-5%	-5%	-6%		-1% 

WDES Indicator 1

Percentage of staff in each of the AfC Bands 1-9 or Medical and Dental subgroups and VSM (including executive Board members) compared with the percentage of staff in the overall workforce



The overall headcount for the Trust is 6,617. This has increased from previous years with the number of staff declaring as a disability increasing to 389 (5.88%), an additional 62 people.

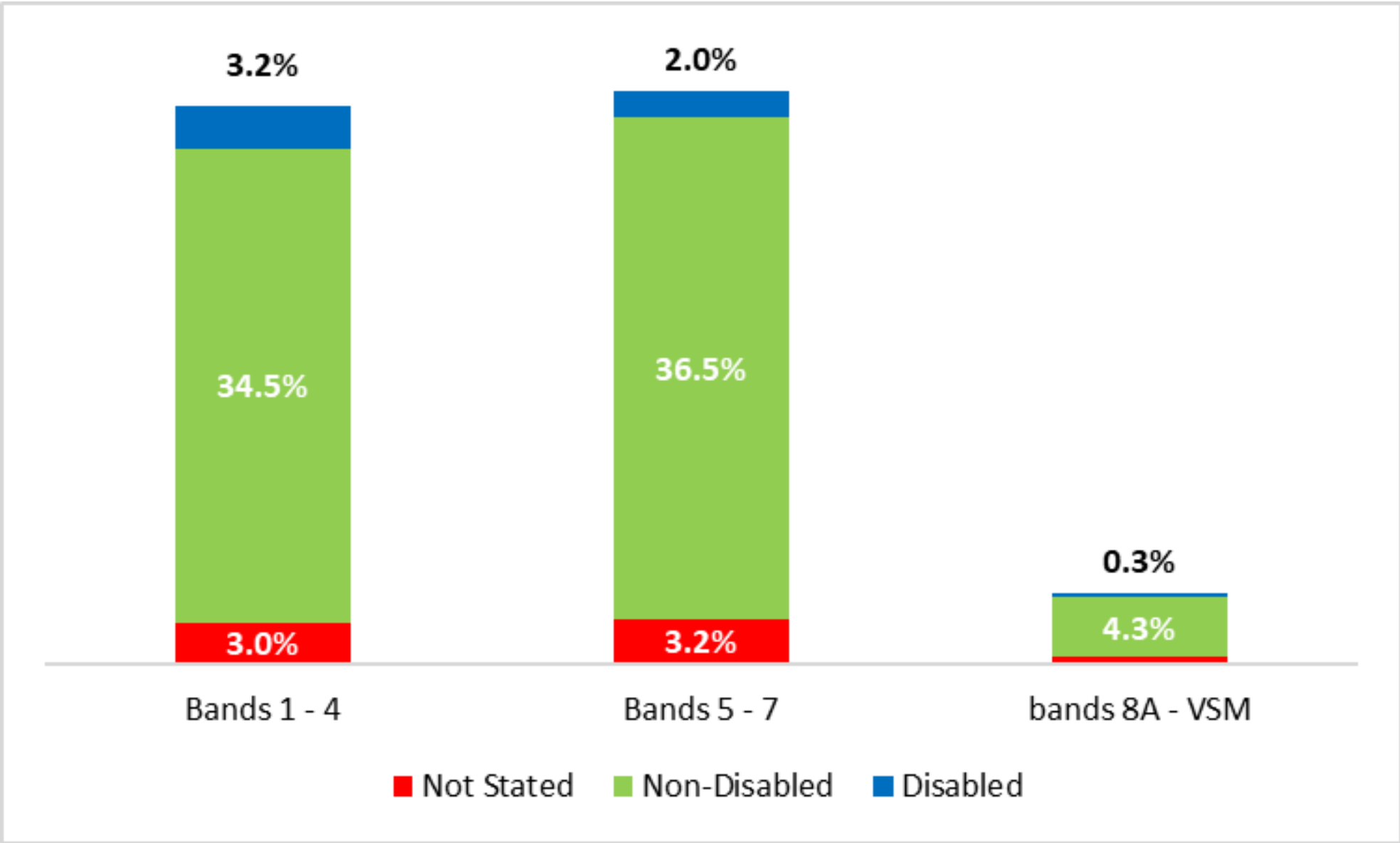
The Data shows that the percentage of colleagues with a disability at the Trust continues to increase, growing by 1% in the last year. The number of colleagues who have not completed their disability reporting on ESR has decreased by 5%. There has been an emphasis on the updating of ethnicity information on ESR (Electronic Staff Record)

Overall Workforce Headcount at NGH

2020 - 2021	2020 - 2021	2021 - 2022	2022 - 2023	2023 - 2024	2024 - 2025
5,457	5,973	5,805	5,913	6,158	6,617

WDES Indicator 1

Percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members) compared with the percentage of staff in the overall workforce

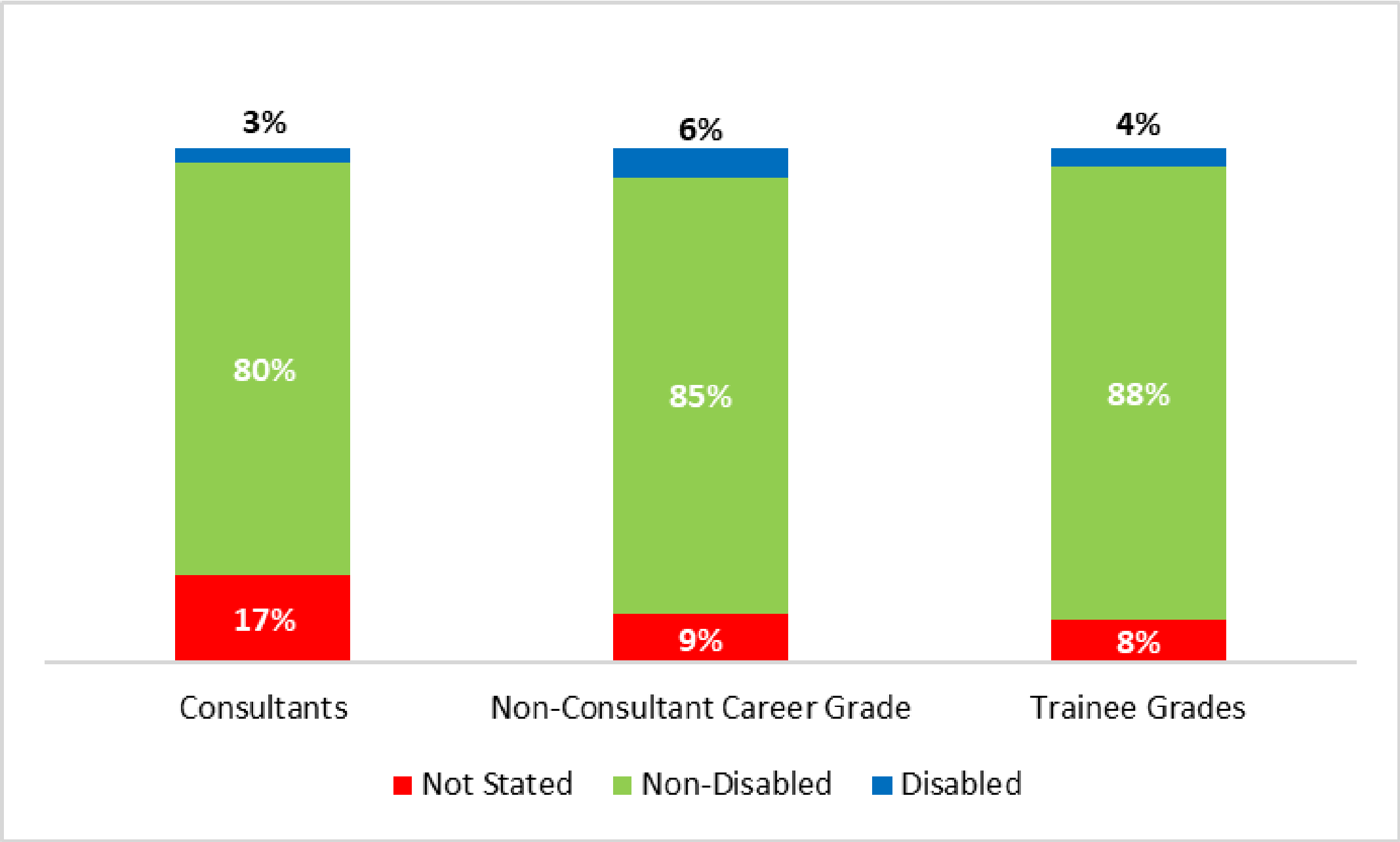


Position	Disabled	Non-Disabled
Band 1 - 4	209	2,283
Band 5 - 7	132	2,412
Band 8a - VSM	19	287

- Across all bands our Disability representation remains below the national average of disabled colleagues within NHSE, which was 4.9% in 2023.
- Within Bands 1 - 4, NGH sees the highest representation figure for disabled colleagues employed showing 3.2%.
- Bands 8A - VSM show a lower representation than the national average.

WDES Indicator 1

Percentage of staff in each of the Medical and Dental subgroups compared with the percentage of staff in the overall workforce



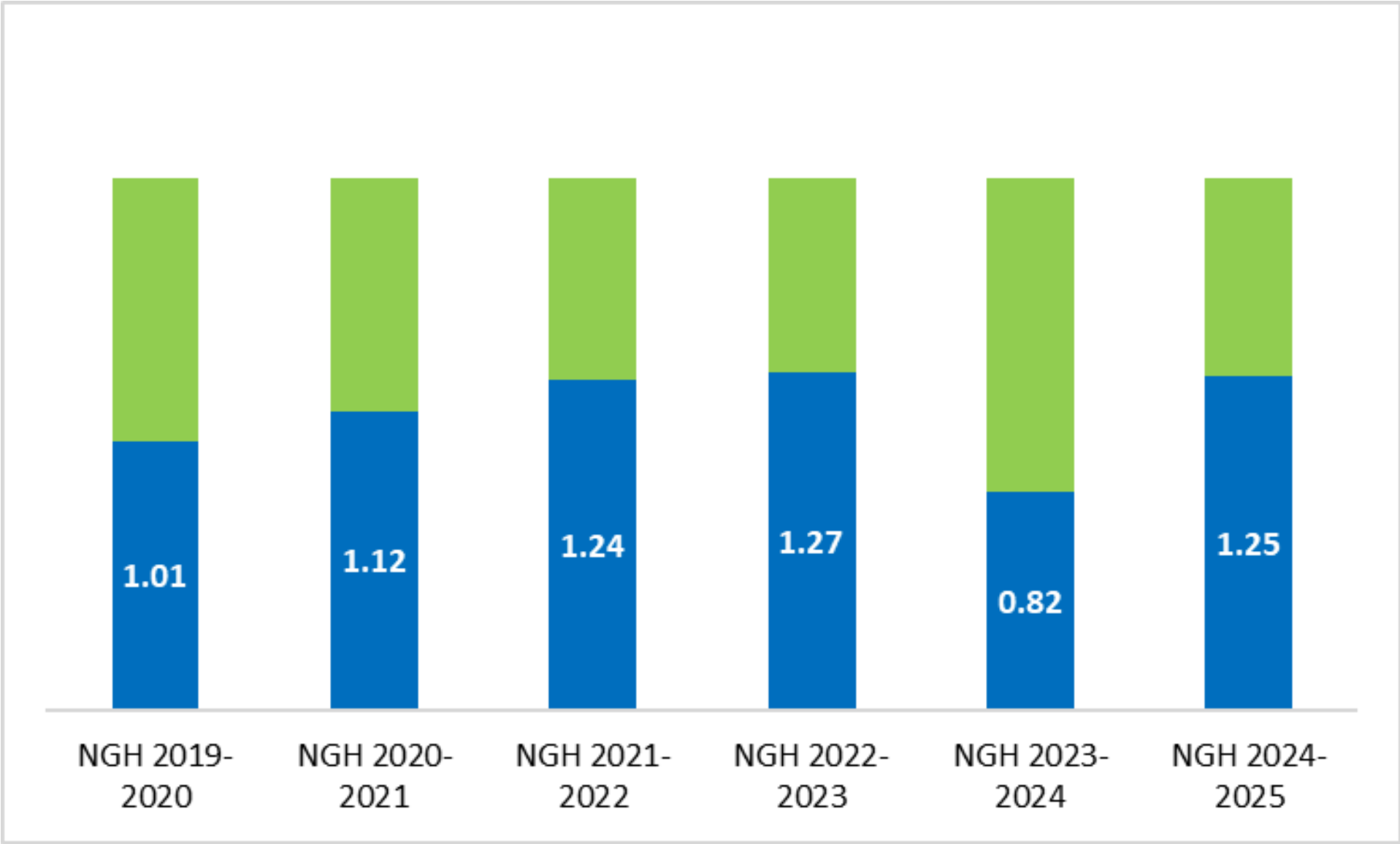
Position	Disabled	Non-Disabled
Consultants	9	246
Non - Consultant Career Grade	3	45
Trainee Grades	17	416

- Across all Medical & Dental roles, colleagues with a disability remain close to the national average for overall NHSE workforce, which is 4.9%
- Disabled colleagues working within Non- Consultant Career Grades roles have the highest representation across NGH with 6% of colleagues having a disability
- Work needs to be done to reduce the amount of Medical & Dental colleagues who have not declared their disability reporting


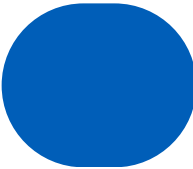
WDES Indicator 2

2019 - 2020	2020 - 2021	2021 - 2022	2022 - 2023	2023 - 2024	2024 - 2025
1.01	1.12	1.24	1.27	0.82	1.25

Relative likelihood of Non-Disabled applicants being appointed from shortlisting across all posts compared to Disabled applicants



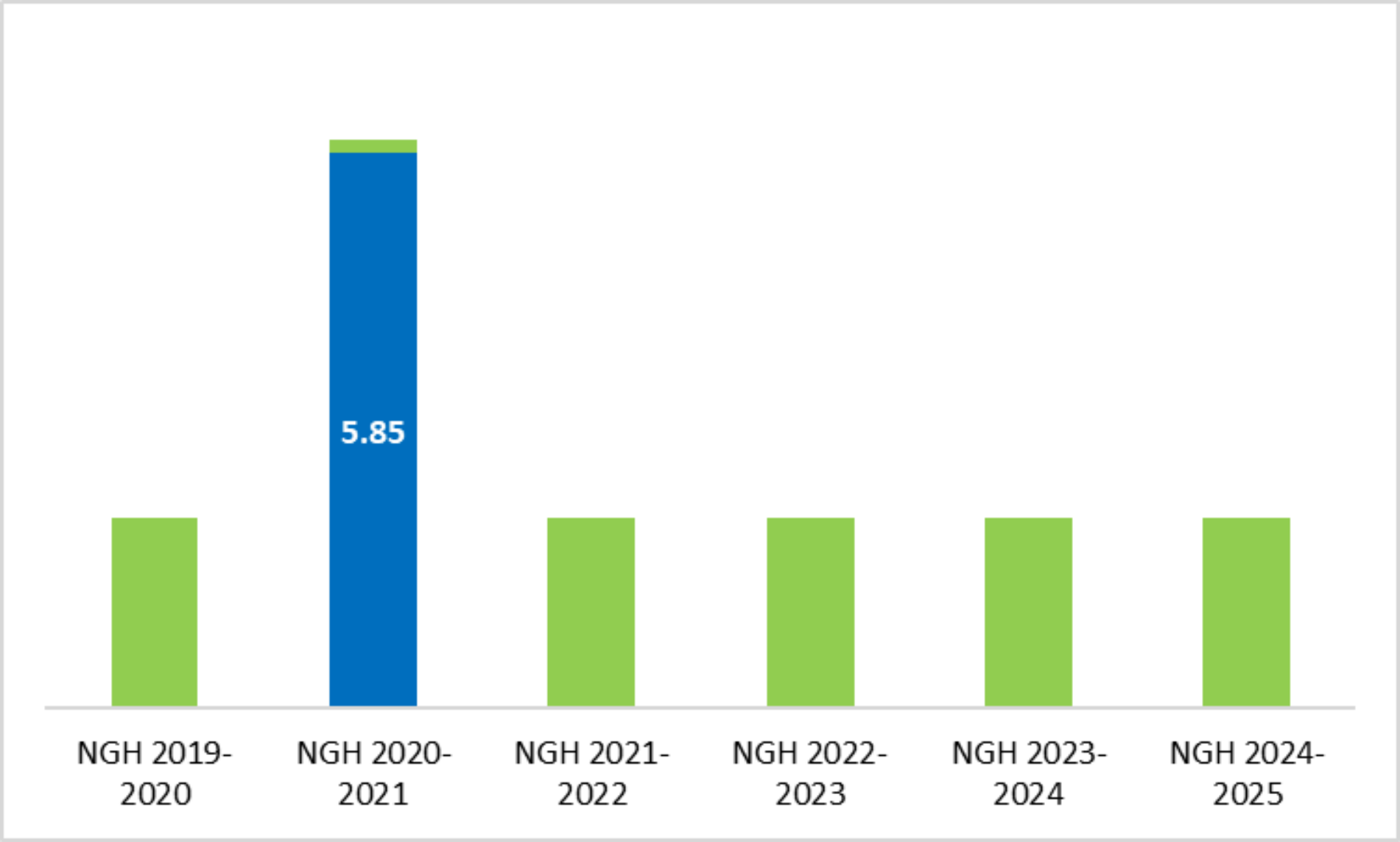
A relative likelihood of 1 means that there is no difference and non-disabled applicants are just as likely to be appointed compared to disabled applicants.

-  A relative likelihood below 1 indicates that non-disabled applicants are less likely to be appointed from shortlisting compared to Disabled applicants
-  A relative likelihood above 1 means that non-disabled applicants are more likely to be appointed compared to Disabled applicants.

WDES Indicator 3

2019 - 2020	2020 - 2021	2021 - 2022	2022 - 2023	2023 - 2024	2024 - 2025
0.00	5.85	0.00	0.00	0.00	0.00

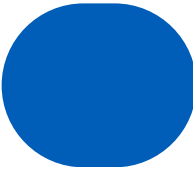
Relative likelihood of Disabled staff entering formal capability process compared to Non-Disabled staff



A relative likelihood of 1 means that there is no difference and non-disabled colleagues are just as likely to enter the formal disciplinary process compared to disabled applicants.



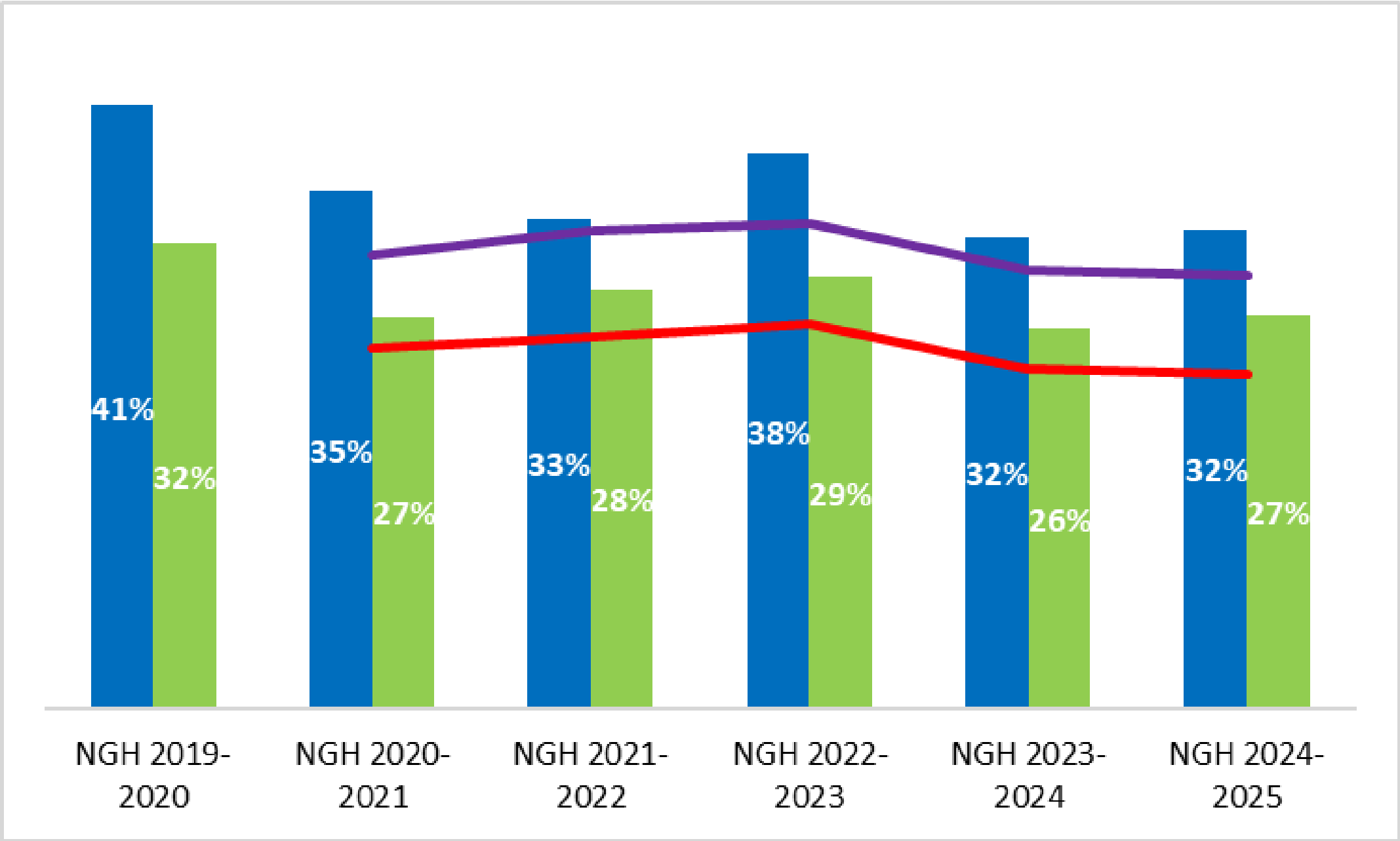
A relative likelihood below 1 indicates that disabled staff are less likely to enter the formal capability process compared to non-disabled applicants.



A relative likelihood above 1 means that disabled staff are more likely to enter the formal capability process compared to non-disabled applicants

WDES Indicator 4a

Percentage of disabled staff experiencing harassment, bullying or abuse from Patients/Service users, their relatives or other members of the public in last 12 months



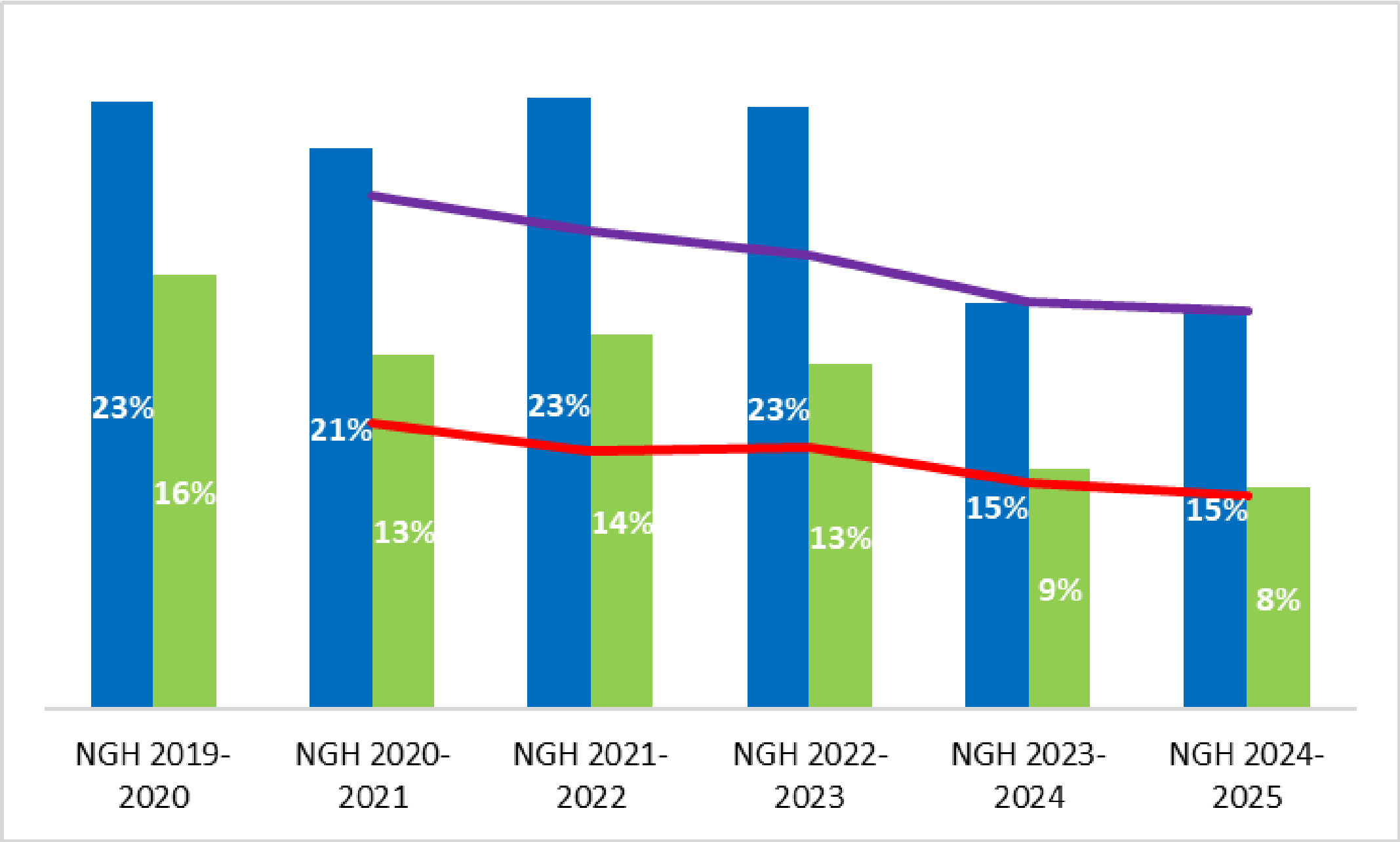
	Non-Disabled	Disabled
Overall UHN Workforce:	Overall: 5,689	Overall: 389
	NSS: 2,593	NSS: 938

- National Average for Disabled Colleagues
- National Average for Non-Disabled Colleagues

- Nearly a third of disabled colleagues within NGH have experienced harassment, bullying or abuse from patients, relatives or the public in the last 12 months.
- There has been an increase of 0.46% of disabled colleagues experiencing harassment from patients, relatives and the public from 32.01% to 32.47% in 2024

WDES Indicator 4b

Percentage of disabled staff experiencing harassment, bullying or abuse from managers in last 12 months



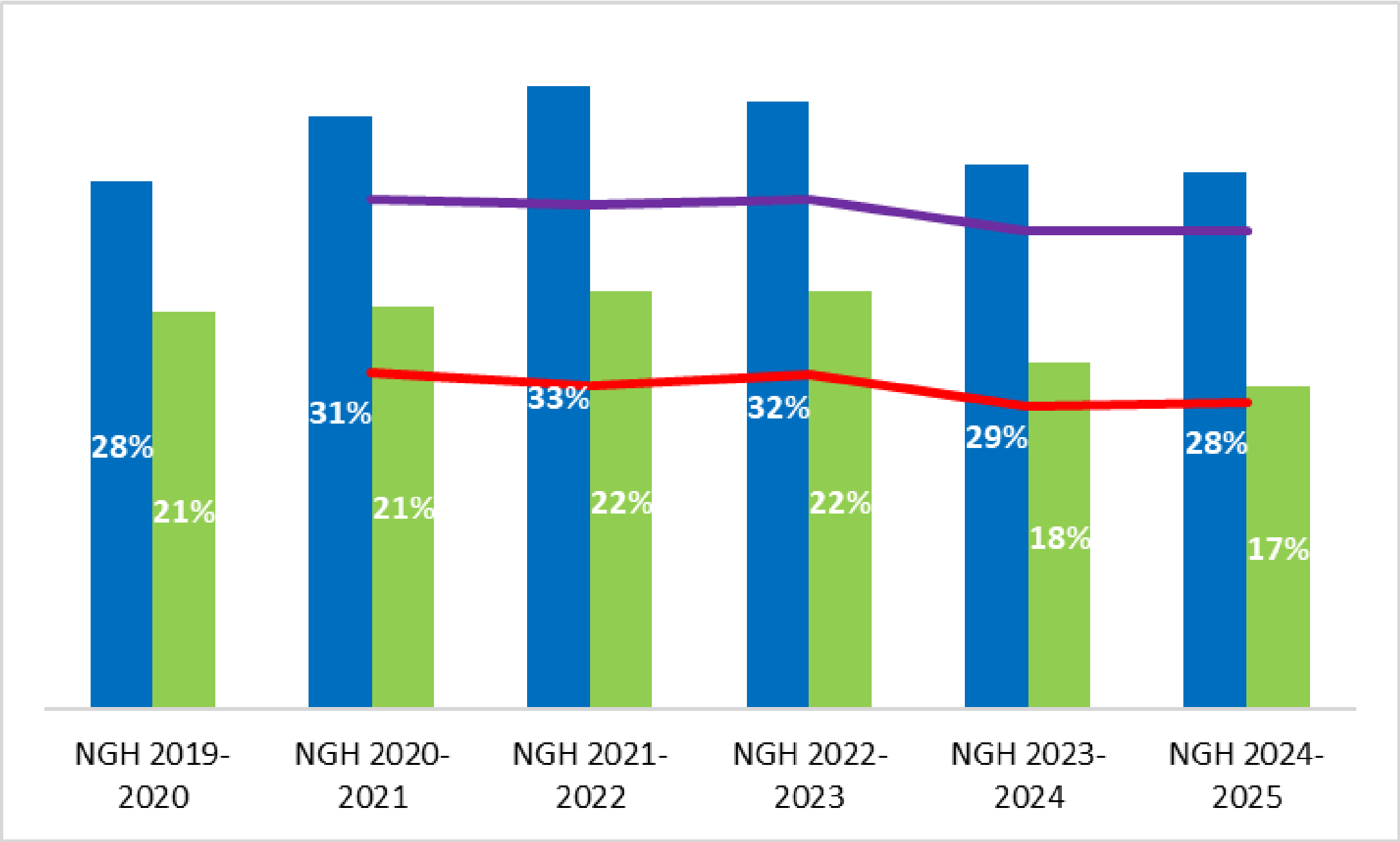
	Non-Disabled	Disabled
Overall UHN Workforce:	Overall: 5,689	Overall: 389
	NSS: 2,593	NSS: 938

-  National Average for Disabled Colleagues
-  National Average for Non-Disabled Colleagues

- Less than a fifth of disabled colleagues within NGH have experienced harassment, bullying or abuse from managers in the last 12 months.
- There has been a decrease of 0.23% of disabled colleagues experiencing harassment from managers from 15.30% to 15.07% in 2024

WDES Indicator 4c

Percentage of disabled staff experiencing harassment, bullying or abuse from other colleagues in last 12 months



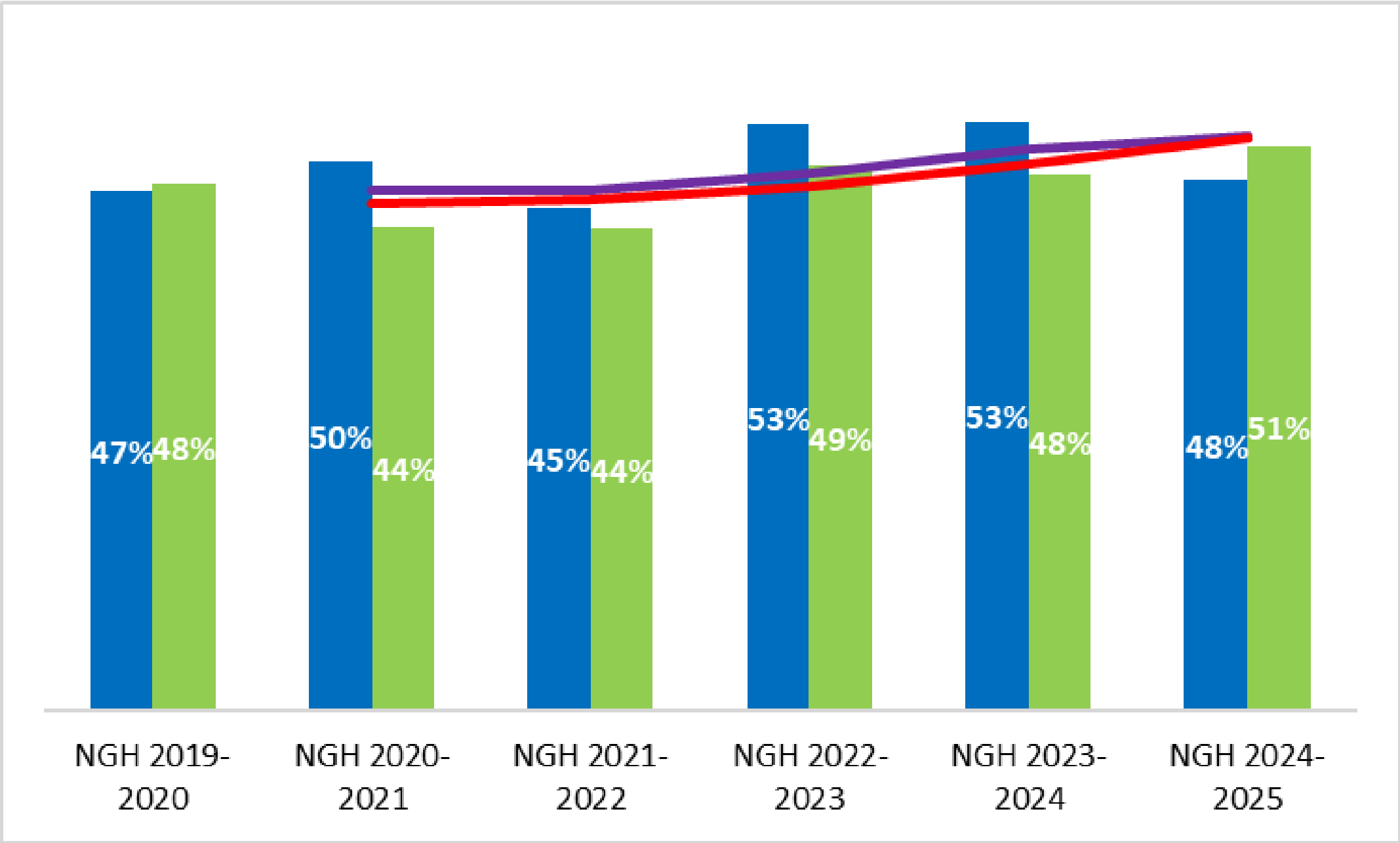
	Non-Disabled	Disabled
Overall UHN Workforce:	Overall: 5,689	Overall: 389
	NSS: 2,593	NSS: 938

- National Average for Disabled Colleagues
- National Average for Non-Disabled Colleagues

- Over a quarter of disabled colleagues within NGH have experienced harassment, bullying or abuse from other colleagues, in the last 12 months.
- There has been a decrease of 0.44% of disabled colleagues experiencing harassment from other colleagues from 28.77% to 28.33% in 2024

WDES Indicator 4d

Percentage of disabled staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it in the last 12 months



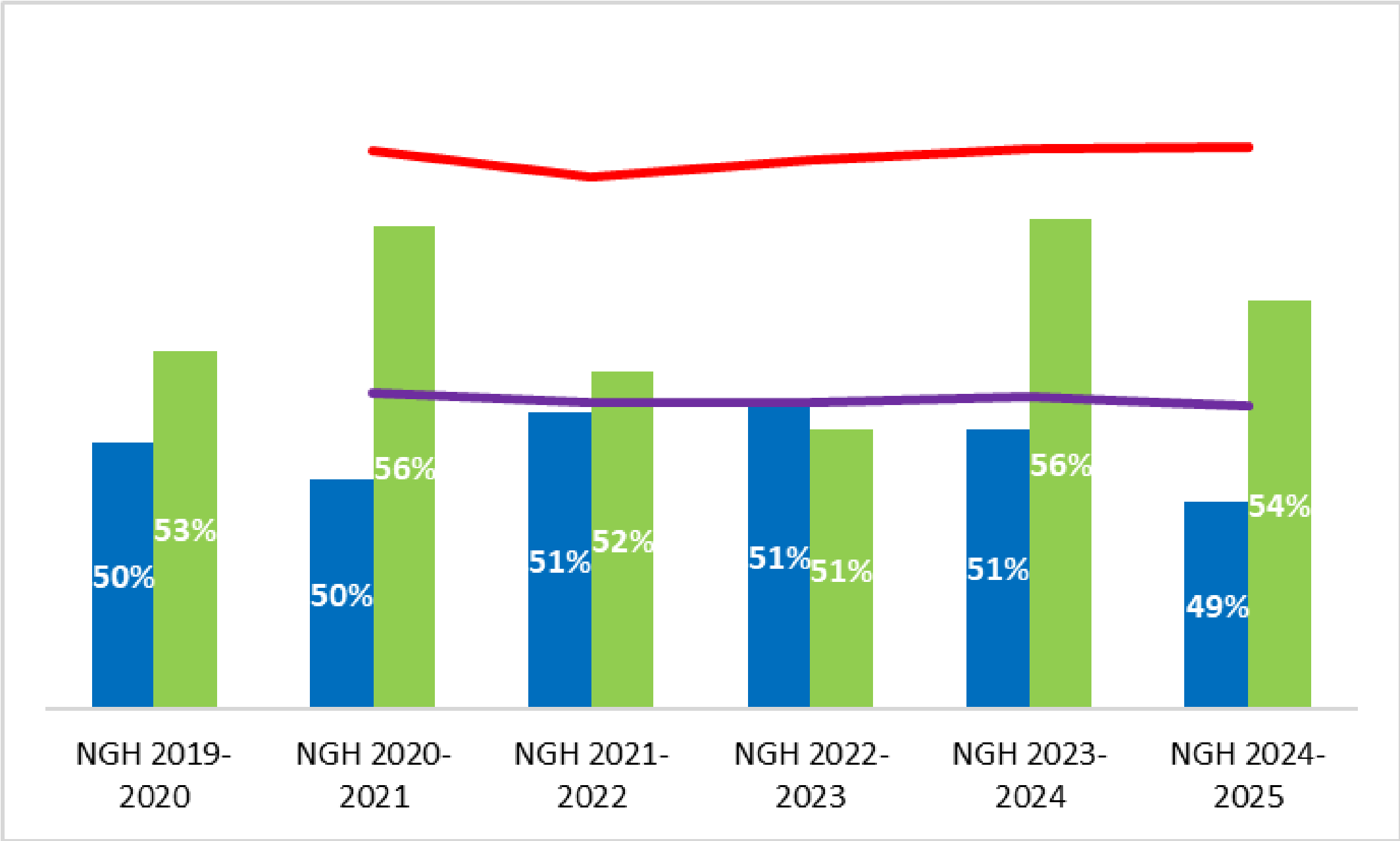
	Non-Disabled	Disabled
Overall UHN Workforce:	Overall: 5,689	Overall: 389
	NSS: 2,593	NSS: 938

- National Average for Disabled Colleagues
- National Average for Non-Disabled Colleagues

- Nearly half of disabled colleagues within NGH say that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it in the last 12 months.
- There has been a decrease of 5.27% of disabled colleagues that say say the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it from 53.10% to 47.83% in 2024

WDES Indicator 5

Percentage of disabled staff believing that trust provides equal opportunities for career progression or promotion



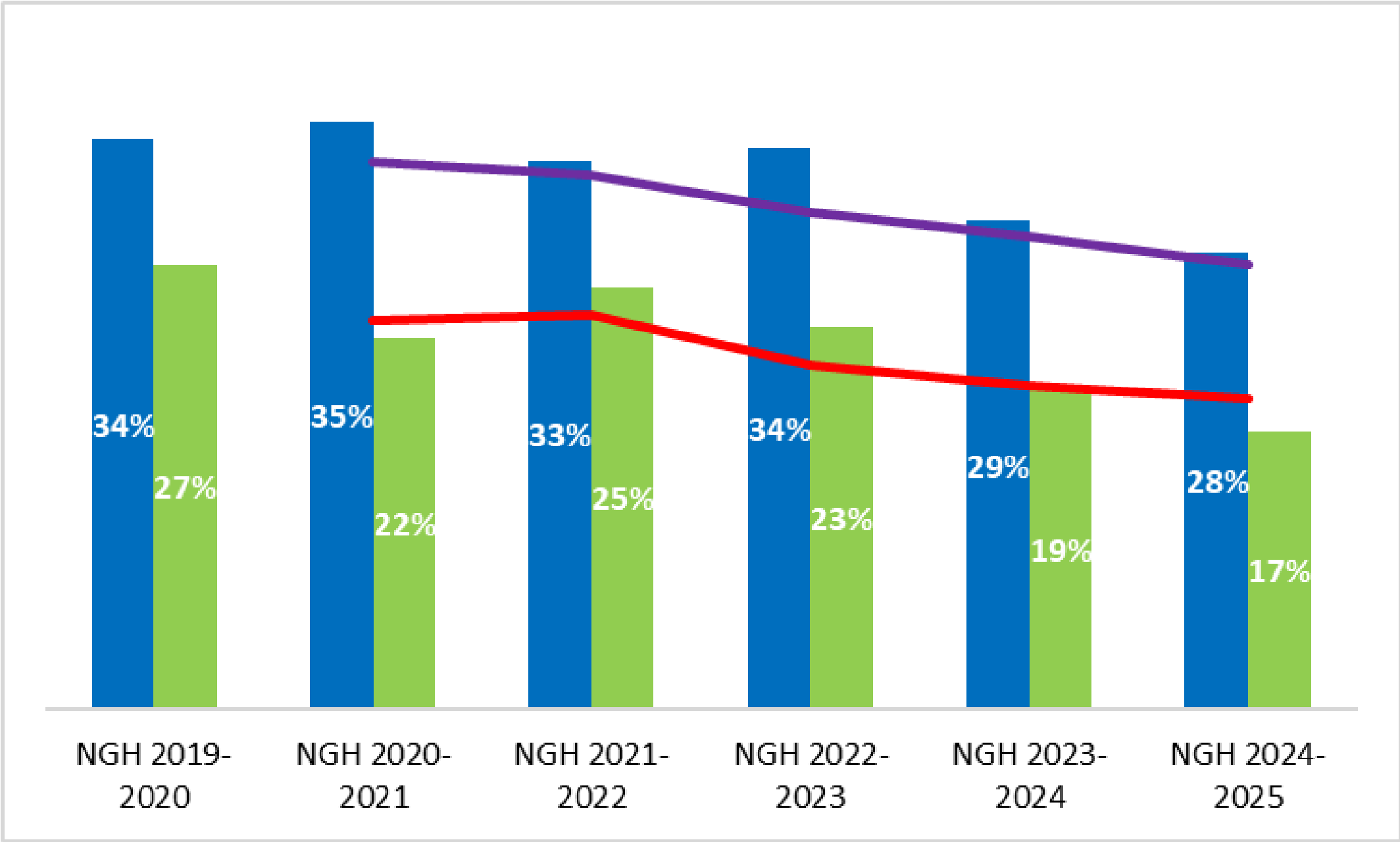
	Non-Disabled	Disabled
Overall UHN Workforce:	Overall: 5,689	Overall: 389
	NSS: 2,593	NSS: 938

- National Average for Disabled Colleagues
- National Average for Non-Disabled Colleagues

- Nearly half of disabled colleagues within NGH believe that the trust provides equal opportunities for career progression or promotion
- There has been a decrease of 1.78% of disabled colleagues who believe that the trust provides equal opportunities for career progression or promotion from 50.76% to 48.98% in 2024

WDES Indicator 6

Percentage of disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties



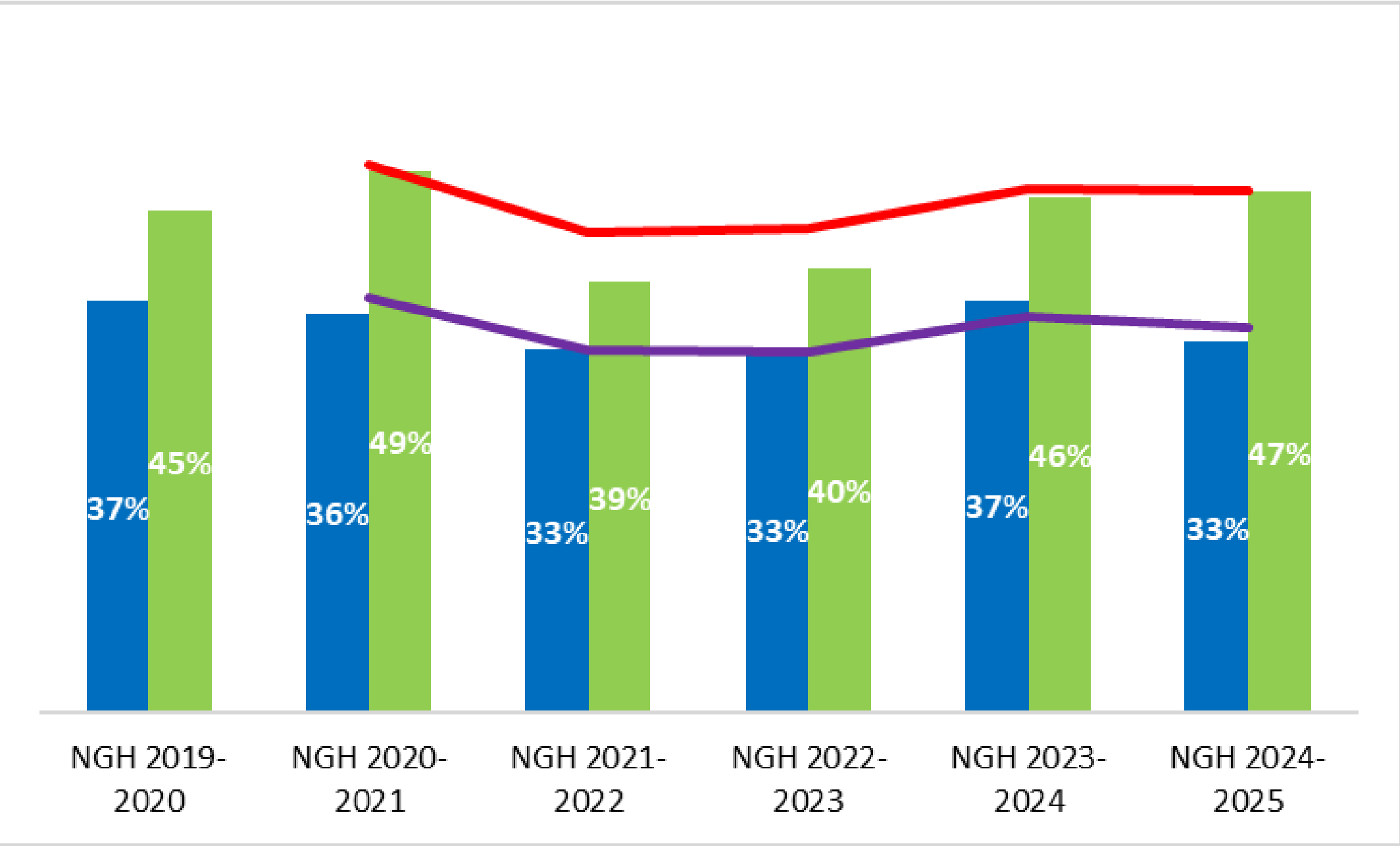
	Non-Disabled	Disabled
Overall UHN Workforce:	Overall: 5,689	Overall: 389
	NSS: 2,593	NSS: 938

- National Average for Disabled Colleagues
- National Average for Non-Disabled Colleagues

- Less than a third of disabled colleagues within NGH say that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.
- There has been a decrease of 1.86% of disabled colleagues say that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties from 29.45% to 27.59% in 2024

WDES Indicator 7

Percentage of disabled staff satisfied with the extent to which their organisation values their work



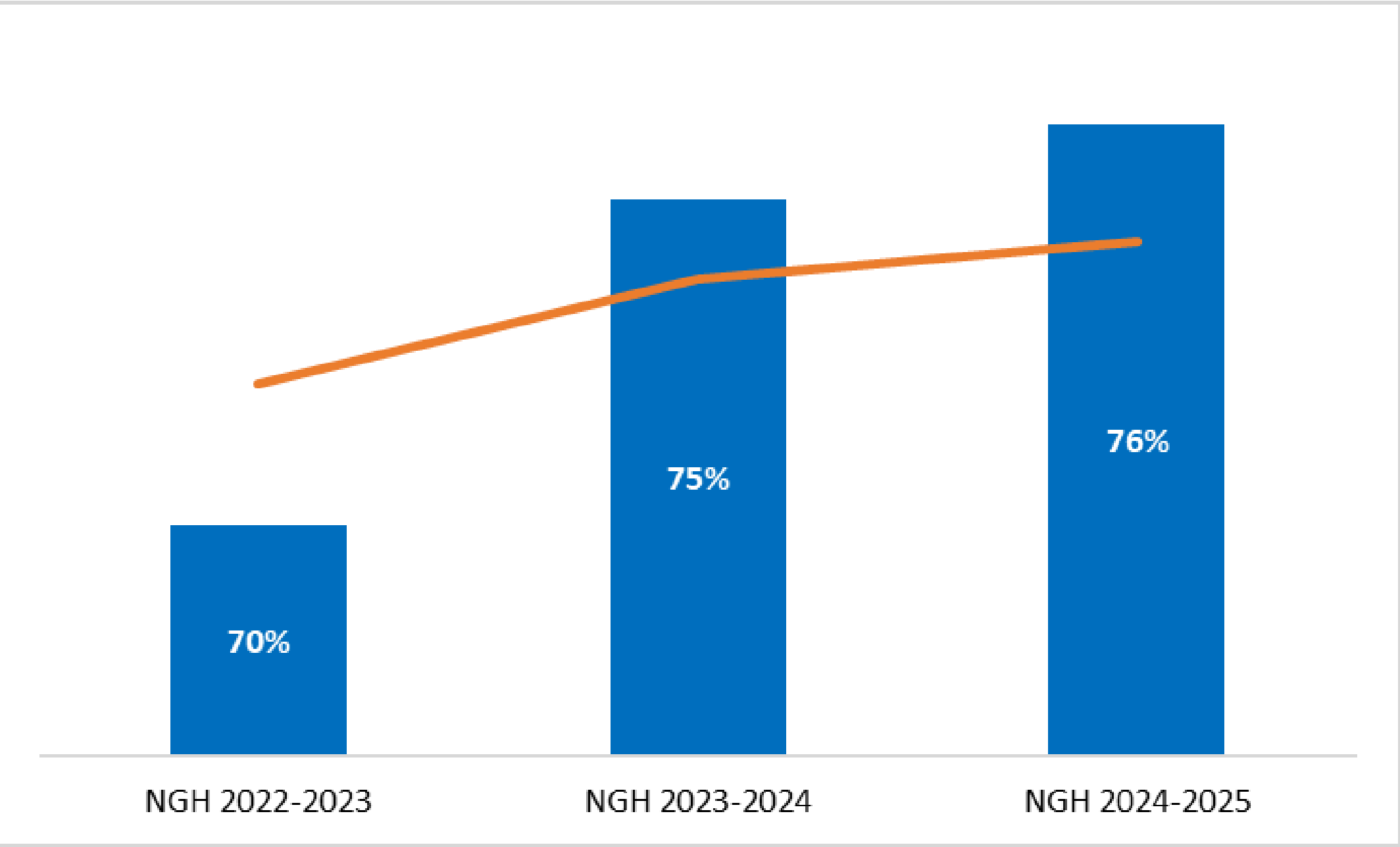
	Non-Disabled	Disabled
Overall UHN Workforce:	Overall: 5,689	Overall: 389
	NSS: 2,593	NSS: 938

- National Average for Disabled Colleagues
- National Average for Non-Disabled Colleagues

- A third of disabled colleagues within NGH are satisfied with the extent to which their organisation values their work
- There has been a decrease of 3.75% of disabled colleagues that are satisfied with the extent to which their organisation values their work from 37.15% to 33.40% in 2024

WDES Indicator 8

Percentage of staff with a long lasting health condition or illness saying their employer has made adequate adjustments to enable them to carry on working



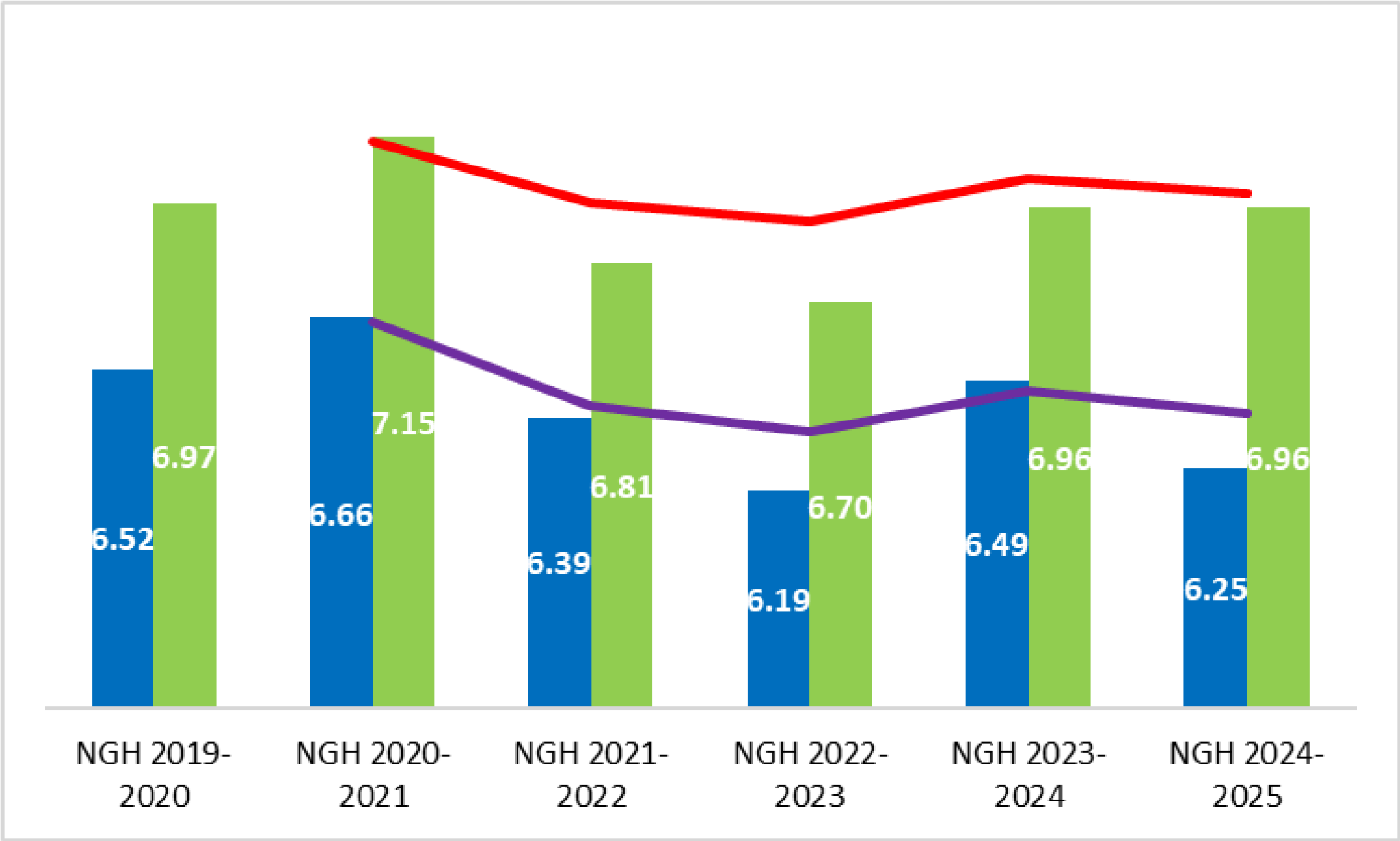
	Non-Disabled	Disabled
Overall UHN Workforce:	Overall: 5,689	Overall: 389
	NSS: 2,593	NSS: 938

 National Average for Colleagues with a long lasting health condition or illness

- Over two - thirds of colleagues within NGH with a long lasting health condition or illness saying their employer has made adequate adjustments to enable them to carry on working.
- There has been an increase of 1.15% of colleagues with a long lasting health condition or illness saying their employer has made adequate adjustments to enable them to carry on working from 29.52% to 29.66% in 2024

WDES Indicator 9

Staff engagement score for disabled staff from 0 - 10

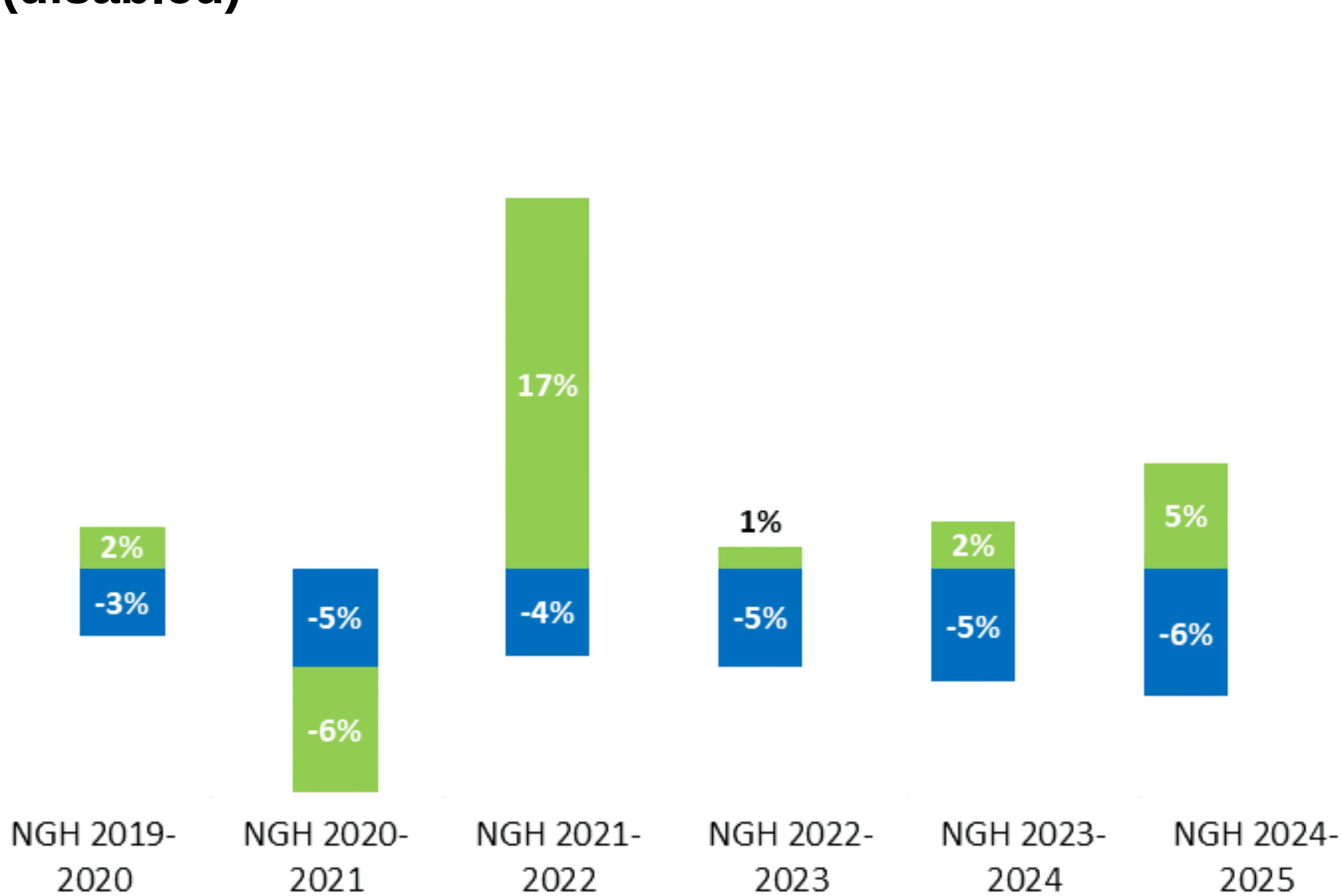


	Non-Disabled	Disabled
Overall UHN Workforce:	Overall: 5,689	Overall: 389
	NSS: 2,593	NSS: 938

- National Average for Disabled Colleagues
- National Average for Non-Disabled Colleagues
- On average colleagues with a disability of long term condition have given NGH a score of 6.25 for engagement
 - There has been an engagement score decrease of 0.24 from colleagues with a disability or long term condition compared to 2024.
 - For both colleagues with and without a disability of long term condition, NGH’s engagement scores remain below the national average.

WDES Indicator 10

Percentage difference between the organisation’s Board membership and its organisation’s overall workforce (disabled)



Year	Position	Non-Disabled	Disabled
2024	Exec	13	0
	Non Exec	7	0

- All board members have voting membership.
- The number of disabled voting board members has decreased by 1%.
- In the last four years there has been a decrease of 2% in terms of disabled representation on the board.
- Out of 22 board members none have declared that they have a disability
- The percentage of disabled members on the board of directors is lower than in the workforce.

Key Areas of Progress – Actions from WDES 2023/24

Work with disabled staff and the Disability and Wellbeing Network (DAWN) to better understand the reasons why colleagues may not have declared a disability on ESR, with a view to closing the gap between ESR and National Staff Survey declaration rates	<p><i>Our Equality, Diversity, and Inclusion (EDI) and Electronic Staff Record (ESR) teams have diligently worked to create psychologically safe spaces for colleagues to explore their reluctance to declare disabilities or long-term conditions. These initiatives have provided opportunities to educate colleagues on the importance of data collection, its usage, and the assurance that their personal data is securely maintained and remains confidential.</i></p> <p><i>The Disability, Accessibility, Wellbeing and Neurodiversity (DAWN) Network has proven to be the most effective forum for discussing EDI data reporting. As a group network, DAWN has significantly expanded our resources to better support colleagues in this area. Through DAWN, colleagues have had the opportunity to hear directly from disabled peers about the importance of self-declaration on their ESR.</i></p> <p><i>Additionally, our Human Resources (HR) teams have begun advocating for more accurate data reporting on ESR during University Hospitals of Northamptonshire (UHN) inductions. It has been noted that new staff members are more likely to complete their onboarding when provided with reminders. This proactive approach has resulted in a reduction in the "not stated" category in this year's Workforce Disability Equality Standard (WDES) results.</i></p>
Reduce the number of disabled colleagues experiencing harassment, bullying and abuse from patients/public and staff.	<p><i>In collaboration with our Unions, Freedom to Speak Up Guardians, Equality, Diversity, and Inclusion (EDI) Staff Networks, and People Partnering teams, we have undertaken a comprehensive review and enhancement of support mechanisms for disabled colleagues experiencing harassment. This initiative has also extended to other protected characteristics, ensuring tailored support for disabled colleagues.</i></p> <p><i>Key improvements include the implementation of enhanced security protocols for managing violent patients at UHN. Our EDI teams have actively engaged with the broader workforce to foster a learning environment that empowers colleagues to challenge unprofessional behaviours. This effort encompasses initiatives such as Fireside Chats, guided by the experiences of disabled colleagues, the development of a neurodiversity toolkit, and amplifying the voices of disabled colleagues to ensure they feel heard by the Trust.</i></p> <p><i>We have observed an increase in managerial support for disabled colleagues, with managers providing informal coaching. Additionally, colleagues with lived experiences of discrimination have participated in Board meetings, advocating for procedural changes.</i></p>

Key Areas of Progress – Actions from WDES 2023/24

Work with disabled staff and other partners to improve the management of workplace adjustments	<p>Over the past year, our Equality, Diversity, and Inclusion (EDI), Occupational Health, and Health & Wellbeing teams have undertaken a thorough review of our processes for reasonable adjustments, with a particular focus on enhancing support for colleagues with neurodiverse conditions. As part of their 2024 initiatives, the Health & Wellbeing Team has reviewed and published the new UHN Wellbeing at Work policy. This policy harmonizes support across UHN and provides comprehensive guidance on the use of Health Passports.</p> <p>Health Passports have proven instrumental in helping disabled colleagues and managers better understand workplace adjustments, ensuring that colleagues' health is respected by UHN as an employer. Currently, efforts are underway to explore the establishment of a central funding budget accessible to all managers for implementing reasonable adjustments.</p>
Deliver the 'Dedicated to Excellence' Culture and Leadership Programme, ensuring diverse representation from across the Group to build psychological safety and ensure all staff voices are heard	<p>Colleagues have been encouraged to take part in our Aspiring, Emerging and Established Leadership programmes at UHN.</p>

Action Plan for WDES 2024/25

1 Continue to work with disabled colleagues and the Disability, Accessibility, Wellbeing and Neuroinclusion Network (DAWN) to better understand the reasons why colleagues may not have declared a disability on ESR, with a view to closing the gap between ESR and National Staff Survey declaration rates.

2 Reduce the number of disabled colleagues experiencing harassment, bullying and abuse from patients/public and staff:
Working with disabled colleagues and DAWN Network members, we will:

- a) Continue to discuss experiences of harassment, bullying or abuse with disabled colleagues, ensuring that there is a safe person/space for any discussions
- b) Launch a communications campaign focussed on reducing harassment, bullying and abuse
- c) In conjunction with unions, freedom to speak up guardians, and staff networks, review and improve support for staff who experience bullying, harassment or abuse. This will include access to specialist support for staff
- d) Working with system colleagues and DAWN members, review NHS England's Civility and Respect toolkit and adopt identified practices set out

Action Plan for WDES 2024/25

- 3** Continue to work with disabled colleagues and other partners to improve the management of workplace adjustments:
- a) Review the reasonable adjustments good practice published by NHS Employers and share to be able to support and guide managers on reasonable adjustments.
 - b) Encourage the uptake and use of established Health Passports, which enable disabled colleagues to record and share the details of the reasonable adjustments they need at work.
 - c) With system partners, review reasonable adjustments practices to ensure Group and system-alignment with national good practice examples.
 - d) Explore a pilot of a centrally funded budget for reasonable adjustments.

4 Work with the Trust Board and DAWN Network Board Sponsors to produce a Board Charter alongside the DAWN Network.



Accountability

We take responsibility for our decisions, our actions and our behaviours. We do what we say we will do, when we say we will do it. We acknowledge our mistakes and we learn.



Respect

We value each other, embrace diversity and make sure everyone feels included. We take the time to listen to, appreciate and understand the thoughts, beliefs and feelings of others



Courage

We dare to take on difficult challenges and try out new things. We find the strength to speak up when it matters and we see potential failure as an opportunity to learn and improve.



Compassion

We care about our patients and each other. We consistently show kindness and empathy and take the time to imagine ourselves in other people's shoes.



Integrity

We are consistently open, honest and trustworthy. We can be relied upon, we stand by our values and we always strive to do the right thing.