Workforce Disability Equality Standard Report

2024-25

1.0 Introduction

The Workforce Disability Equality Standard (WDES) Report for 2024–25 sets out Dorset County Hospital's progress and priorities in building a truly inclusive and equitable workplace for colleagues with disabilities. It reflects our ongoing commitment to transparency, accountability, and meaningful action, in line with the WDES framework mandated by the NHS Standard Contract.

The WDES provides a clear structure for understanding and improving the workplace experiences and career prospects of disabled staff across the NHS. Its ten metrics draw on a range of sources, including recruitment and HR data, Electronic Staff Record (ESR) workforce information, and the annual NHS Staff Survey. In addition, metric 9b captures the narrative actions taken by the Trust to strengthen the voice and representation of disabled colleagues. Together, these measures enable us to track progress, identify challenges, and take targeted, evidence-based action.

This year's data, covering the period from 1 April 2024 to 31 March 2025, offers valuable insight into both where we have made gains and where further work is required. We have approached this analysis with a clear aim: to ensure every member of our workforce, regardless of disability status, feels supported, valued, and able to thrive. The findings and actions set out in this report will be published alongside our action plan on the Trust's public website, in line with our statutory obligations and our wider commitment to openness.

The ten WDES metrics comprise workforce metrics (1-3), Staff Survey metrics (4-9a) and a metric based on Board representation (10).

1	Percentage of staff in each of the AfC Bands 1-9 or Medical & Dental subgroups and VSM (including Executive Board members) compared with the % of staff in the overall workforce
2	Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts
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.
4	Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse *I. From patients/service users, their relatives or other members of the public* II. *From Managers* III. *From other colleagues*
5	Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression and promotion
6	Percentage of Disabled staff compared to non-disabled staff saying they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties
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
8	Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work
9	NHS Staff Survey and the engagement of Disabled staff *Part (a): The engagement score for Disabled staff, compared to non-disabled staff* *Part (b): Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard?*
10	Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated: *(a) By Voting Membership of the Board* (b) *By Executive membership of the Board*

The 2024–25 WDES data for Dorset County Hospital is drawn from disability information recorded in the Trust's Electronic Staff Record (ESR), supported by HR and Staff Survey data. This year, **6.56%** of our workforce have disclosed a disability—continuing the steady upward trend in declaration rates from previous years. While this is encouraging, we recognise that disclosure remains below the true prevalence. Increasing

confidence in, and understanding of, self-declaration will remain a focus, so that we can build the clearest possible picture of our workforce and target our actions where they will have the greatest impact.

- **Indicator 1** is based on ESR data as at 31 March 2025.
- **Indicator 2** is based on TRAC recruitment data as at 31 March 2025.
- **Indicator 3** draws on HR records from 1 April 2024 to 31 March 2025.
- **Indicators 4 to 9** are based on the NHS Staff Survey, conducted from early October to November 2024, with results published in March 2025.
- **Indicator 10** is drawn from ESR data as at 31 March 2025.

2.0 Overview of changes since 2023/24 data

Creating an inclusive culture at Dorset County Hospital (DCH) remains central to our joint Inclusion and Belonging Strategy with Dorset HealthCare, developed under our federated alliance. Over the past year, we have seen tangible progress, driven in large part by the work of our *Without Limits* disability staff support network. The network has been instrumental in raising awareness of disability inclusion, shaping and launching the Health Passport and Reasonable Adjustment Policy, and supporting targeted training for line managers, including autism awareness.

3.0 Summary of Results

The data submitted to the national WDES team is included in Annex A.

Metric 1: *Percentage of staff in each of the AfC Bands 1-9 or Medical & Dental subgroups and VSM (including Executive Board members) compared with the % of staff in the overall workforce*

The proportion of staff identifying as having a disability has **risen** from 4.88% in 2023/24 to 6.56% in 2024/25, marking an increase of 1.68 percentage points. Among clinical staff, the percentage identifying as having a disability has increased from 5.2% in 2023/24 to 7.2% in 2024/25. For non-clinical staff, the figure is now 7.3%, and for Medical & Dental staff, 2.06% have disclosed a disability. These figures reflect a steady improvement in disclosure rates, although they remain below the estimated prevalence of disability in the wider NHS workforce.

Metric 2: *Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts*

The relative likelihood ratio of non-disabled staff being appointed from shortlisting compared to disabled staff has **decreased** further from 0.56 in 2023/24 to 0.41 in 2024/25. This means that disabled applicants are now, on average, more likely to be appointed than their non-disabled counterparts when shortlisted.

Metric 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.*

The relative likelihood of disabled staff entering the formal capability process has **decreased** from 2.83 in 2023/24 to 0.00 in 2024/25. This means there were no recorded cases during the reporting year involving a member of staff who had disclosed a disability—an encouraging development that suggests improvements in early intervention, support, and performance management processes.

It is important to note that in previous years, high relative likelihoods could be influenced by the small proportion of the workforce who have declared a disability. With very low case numbers, percentage changes can appear large and may not indicate systemic issues.

Note on Metrics 4a- 9a

While ESR records show that **6.56%** of staff have disclosed a disability, Metrics 4–9a are derived from our 2024 NHS Staff Survey, where **30.44%** of respondents identified themselves as disabled or having a long-term condition. These figures represent a significant portion of our staff who took part in the 2024 survey.

Metric 4a: *Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse*

(i) From patients/service users, their relatives or other members of the public

The data shows **a reduction** in the percentage of disabled staff reporting harassment, bullying, or abuse from patients, their relatives, or the public, with 20.5% affected in 2024/25 compared to the previous year's figure. However, the disparity between disabled and non-disabled staff has **increased** slightly, standing at 6.1 percentage points (14.4% for non-disabled staff). This remains a key area of concern, as both staff groups continue to experience unacceptable levels of such behaviour.

(ii) From Managers

The data shows **a reduction** in staff reported experiencing harassment, bullying, or abuse from managers, and **a reduction** in disparity between disabled and non-disabled staff. While the overall proportion of disabled staff affected has decreased compared to the previous year, the gap between disabled and non-disabled colleagues remains significant and warrants continued focus.

(iii) From other colleagues

In 2024/25, 20.7% of disabled staff reported experiencing harassment, bullying, or abuse from other colleagues — **down** from 24.2% in 2023/24. Among non-disabled staff, the figure was 13.9% (previously 14.3%), resulting in a **disparity of 6.8** percentage points between the two groups (slightly higher than the 6.2 percentage points recorded last year). While the reduction in reports among disabled staff is encouraging, the persistence — and slight widening — of the gap, alongside the still considerable proportion of staff affected, indicates that workplace culture, peer-to-peer respect, and early intervention remain key priorities for the Trust.

Metric 4b: *Percentage of Disabled staff compared to non-disabled staff saying the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it*

In 2024/25, 54.1% of disabled staff said that they or a colleague reported the last incident of harassment, bullying, or abuse at work — **an increase** on the 53.6% recorded in 2023/24, marking the third consecutive year of stable or improving results. Among non-disabled staff, the figure was 58.8% (previously 50.0%), resulting in a disparity of 4.7 percentage points, indicating that disabled staff are less likely to report such incidents than their non-disabled colleagues.

While the stability in reporting rates among disabled staff is positive, the renewed widening of the disparity highlights the need for targeted action to ensure all staff feel equally empowered and supported to raise concerns about inappropriate behaviour.

Metric 5: *Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression and promotion*

In 2024/25, 54.0% of disabled staff said they believe the Trust provides equal opportunities for career progression and promotion — a slight **decrease** from 55.3% in 2023/24. Among non-disabled staff, the figure was 59.1% (previously 59.3%), resulting in a **disparity of 5.1** percentage points, compared with 4.0 percentage points last year.

While both figures remain above the national average for Acute Trusts, the widening gap signals a need for renewed focus on ensuring equitable access to career development, mentoring, and promotion pathways for disabled colleagues. Strengthening inclusive talent management and targeted leadership development opportunities will be key to closing this disparity.

Metric 6: *Percentage of Disabled staff compared to non-disabled staff saying they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties*

In 2024/25, 21% of disabled staff said they had felt pressure from their manager to come to work despite not feeling well enough — **down** from 24.5% in 2023/24. Among non-disabled staff, the figure was 15.8% (previously 14.0%), resulting in a **disparity of 5.2** percentage points (down from 6.5 percentage points last year).

The reduction in both the absolute percentage and the disparity is encouraging, suggesting some improvement in sickness management practices. However, continued emphasis on supportive line management, proactive wellbeing conversations, and a culture that prioritises staff health will be essential to sustain and build on this progress.

Metric 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*

In 2024/25, 37.0% of disabled staff said they were satisfied with the extent to which their organisation values their work — **up** slightly from 36.8% in 2023/24. However, among non-disabled staff, the figure was 49.9% (previously 48.4%), resulting in a **disparity of 12.9** percentage points (up from 11.6 percentage points last year).

While satisfaction among disabled staff has improved marginally, the widening gap compared to non-disabled colleagues underscores the importance of targeted initiatives to ensure all staff feel equally valued and recognised for their contributions. Enhancing visibility of achievements, creating inclusive recognition programmes, and strengthening staff engagement activities will be key to closing this gap.

Metric 8: *Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work*

In 2024/25, 73.7% of disabled staff said that their employer had made adequate adjustments to enable them to carry out their work — **an increase** from 71.4% in 2023/24. This represents an improvement of 2.3 percentage points, in line with the national average for Acute Trusts, which stands at 74%.

The continued upward trend locally is encouraging and reflects the impact of initiatives such as the Health Passport, Reasonable Adjustment Policy, and targeted line manager training. To sustain this progress, we will continue to focus on the timely provision, consistency, and quality of workplace adjustments, alongside improving awareness among managers and staff of available support.

Metric 9: *NHS Staff Survey and the engagement of Disabled staff*

Part (a): The engagement score for Disabled staff, compared to non-disabled staff

In 2024/25, the engagement score for disabled staff was **6.77**, **up** slightly from 6.71 in 2023/24. For non-disabled staff, the score was **7.25** (previously 7.19), resulting in a disparity of **0.48 points**, unchanged from last year.

While the stability in the engagement gap is positive in the sense that it has not widened, the fact that it has not narrowed highlights the need for continued, targeted action to ensure that disabled staff feel equally connected, supported, and involved in organisational life.

Part (b): Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard?

Yes. The *Without Limits* Staff Support Network continues to play a pivotal role in advocating for disabled colleagues, promoting awareness, and ensuring members receive the necessary workplace adjustments and a supportive environment. The network chair holds a standing agenda item on the Equality, Diversity, Inclusion and Belonging (EDIB) Steering Group, enabling direct influence on organisational decision-making.

In 2024/25, the network has also contributed to the development and rollout of the Health Passport, Reasonable Adjustment Policy, and targeted manager training, further strengthening its role as a key voice for disabled staff across the Trust.

Metric 10: *Percentage difference between the organisation's Board voting membership and its organisation's overall workforce.*

The national team has advised that we are only permitted to report on Board members who are directly employed by us. As a result, joint roles and Board members employed via Dorset HealthCare are excluded, which limits the completeness of the data. A complete overview of this element will be provided in the joint annual EDIB Report.

4.0 Conclusion and Actions

The data tells a clear story of improvement in several key areas: the proportion of staff declaring a disability has risen from 4.88% to 6.56%; disabled applicants are now slightly more likely to be appointed from shortlisting than non-disabled applicants; and, for the first time, there were no recorded cases of disabled staff entering the formal capability process. Satisfaction with workplace adjustments has also increased to 73.7%, and the engagement score gap between disabled and non-disabled colleagues has narrowed.

However, progress is not uniform. The disparity in career progression opportunities has widened to 5.1 percentage points, and a gap of 12.9 percentage points remains in how valued disabled and non-disabled colleagues feel. While some harassment and bullying disparities have reduced, these experiences remain too frequent. Board-level representation of disabled colleagues continues to be absent, underlining the need for targeted leadership development and succession planning.

This actions below respond directly to the 2024/25 WDES findings, aligning with our Joint Inclusion and Belonging Strategy and supporting delivery against the NHS Long-Term Workforce Plan. Each action is linked to specific WDES metrics and will be added to the Inclusion and Belonging Strategy Action Plan to ensure measurable progress.

1. Centralised Reasonable Adjustment Process *(Metrics 8, 5)*

Progress the proposal for a centralised Trust-wide process for workplace adjustments to remove local funding barriers and ensure timely, consistent, and equitable provision. The pilot will run from April 2026 to April 2027 and will include KPIs relating to delivery times, colleague satisfaction, and Access to Work reclaim rates.

2. Reasonable Adjustment Policy & Health Passport *(Metrics 8, 5, 6)*

Continue embedding the Health Passport and Reasonable Adjustment Policy across all divisions. Include mandatory awareness for all new line managers as part of induction and refresher sessions for existing managers as highlighted in the Inclusion and Belonging Strategy Action Plan.

3. Disability Confident Scheme – Leader Status *(Metrics 5, 10)*

Advance from Level 2 to Level 3 accreditation to signal sector leadership in disability inclusion, including a focus on representation in leadership roles and succession planning for Board diversity. We are aiming to achieve this by the end of 2026.

4. Tackling Harassment, Bullying & Abuse *(Metrics 4a, 4b)*

Expand early intervention and bystander training, with targeted action on patient/public-related incidents and peer-to-peer respect. Promote reporting channels and close feedback loops to sustain the rise in reporting confidence. DHC has already designed a suitable e-learning package and we intend to introduce it at DCH by the end of the year.

Annex A

Detailed below is the organisation's WDES data which was submitted in May 2025 covering the period 1 April 2024 – 31 March 2025. Where data is available, year-on-year comparisons have been made.

Metric 1: Percentage of staff in AfC pay bands or medical and dental subgroups and very senior managers (including Executive Board members) compared with the percentage of staff in the overall workforce.

NON-CLINICAL				
	DISABLED	NON-DISABLED	UNSPECIFIED	TOTAL
Below Band 1	0	0	0	0
Band 1	0	2	3	5
Band 2	14	181	27	222
Band 3	15	169	12	196
Band 4	14	115	18	147
Band 5	6	81	9	96
Band 6	4	58	7	69
Band 7	6	48	5	59
Band 8 - Range A	1	44	3	48
Band 8 - Range B	1	18	2	21
Band 8 - Range C	1	9	1	11
Band 8 - Range D	0	1	0	1
Band 9	2	6	1	9
VSM	0	3	0	3
All other	2	5	5	12
Total	66	740	93	899

CLINICAL				
	DISABLED	NON-DISABLED	UNSPECIFIED	TOTAL
Below Band 1	0	0	0	0
Band 1	0	0	0	0
Band 2	26	142	10	178
Band 3	40	509	33	582
Band 4	10	101	8	119
Band 5	35	558	29	622
Band 6	41	419	41	501
Band 7	18	274	27	319
Band 8 - Range A	3	68	10	81
Band 8 - Range B	0	18	1	19
Band 8 - Range C	1	6	1	8
Band 8 - Range D	0	1	0	1
Band 9	0	3	0	3
VSM	0	2	0	2
All other	1	4	0	5
Total	175	2105	160	2440

CLINICAL				
	DISABLED	NON-DISABLED	UNSPECIFIED	TOTAL
Consultant	3	149	35	187
Non-Consultant Career Grade	2	51	4	57
Trainee Grade	5	218	18	241
Total	10	418	57	485

WORKFORCE TOTAL	251	3263	310	3824

Metric 2: Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts

Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting	**Relative likelihood in 2023-24**	**Relative likelihood in 2024-25**	A figure below 1.00 indicates that Disabled staff are more likely than non-disabled staff to be appointed from shortlisting
	0.56	**0.41**	

Metric 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.

Relative likelihood of Disabled staff compared to non-disabled staff entering	**Relative likelihood in 2023-24**	**Relative likelihood in 2024-25**	A figure above 1.00 indicates that Disabled staff are more likely than non-disabled staff to enter the formal capability process
	2.83	**0.00**	

Metric 4: Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse

4a: % of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:	**2022**			**2023**			**2024**		
	Disabled staff	Non-disabled staff	% points difference (+/-)	Disabled staff	Non-disabled staff	% points difference (+/-)	Disabled staff	Non-disabled staff	% points difference (+/-)
(i) Patients/service users, their relatives or other members of the public	28.8	24.5	-4.3	22.8	17.1	-5.7	20.5	14.4	-6.1
(ii) Managers	16.0	9.9	-6.1	14.5	7.5	-7	12.3	6.5	-5.8
(iii) Other colleagues	28.8	18.9	-9.9	24.2	18.0	-6.1	20.7	13.9	-6.8
4b: % of Disabled staff compared to non-disabled staff saying the last time they experienced harassment,	52.0	42.0	-10.0	53.6	51.6	-2	54.1	58.8	-4.7

bullying or abuse at work, they or a colleague reported it									

Metric 5: Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression and promotion.

2022			2023				2024	
Disabled staff	**Non-disabled staff**	**Difference (+/-)**	**Disabled staff**	**Non-disabled staff**	**Difference (+/-)**	**Disabled staff**	**Non-disabled staff**	**Difference (+/-)**
59.1	58.6	0.5	55.3	59.3	-4	54.0	59.1	-5.1

Metric 6: Percentage of Disabled staff compared to non-disabled staff saying they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.

2022			2023				2024	
Disabled staff	**Non-disabled staff**	**Difference (+/-)**	**Disabled staff**	**Non-disabled staff**	**Difference (+/-)**	**Disabled staff**	**Non-disabled staff**	**Difference (+/-)**
28.6	18.0	-10.6	24.5	18.0	-6.5	21	15.8	-5.2

Metric 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.

2022			2023				2024	
Disabled staff	**Non-disabled staff**	**Difference (+/-)**	**Disabled staff**	**Non-disabled staff**	**Difference (+/-)**	**Disabled staff**	**Non-disabled staff**	**Difference (+/-)**
36.5	46.4	-9.9	36.8	48.4	-11.6	37	49.9	-12.9

Metric 8: Percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.

2022	2023	2024
71.9	70.3	73.7

Metric 9: NHS Staff Survey and the engagement of Disabled staff

Part (a): *The engagement score for Disabled staff, compared to non-disabled staff*

2022			2023				2024	
Disabled staff	**Non-disabled staff**	**Difference (+/-)**	**Disabled staff**	**Non-disabled staff**	**Difference (+/-)**	**Disabled staff**	**Non-disabled staff**	**Difference (+/-)**
6.6	7.1	-0.5	6.7	7.2	-0.5	6.77	7.25	-0.48

Part (b): Has your Trust taken action to facilitate the voices of Disabled staff in your organisation to be heard? **Yes.**

Yes – in 2024/25, the 'Without Limits' Staff Support Network continued to play a pivotal role in ensuring the voices of disabled colleagues are represented and acted upon. The network provides a safe and constructive space for discussion, advocacy, and peer support, and its Chair maintains a standing agenda item at the Equality, Diversity, Inclusion & Belonging (EDIB) Steering Group.

Over the past year, the network has contributed directly to policy development, including the Reasonable Adjustment Guidance and Health Passport, and has advised on practical improvements to workplace accessibility. Engagement between the network, senior leadership, and HR has strengthened, ensuring that issues raised by disabled colleagues are considered in decision-making and feed directly into the Trust's Inclusion & Belonging Action Plan.

Metric 10: Percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated).

The national team has advised that we are only permitted to report on Board members who are directly employed by us. As a result, joint roles and Board members employed via Dorset HealthCare are excluded, which limits the completeness of the data. A complete overview of this element will be provided in the joint annual EDIB Report.

Snapshot as at 31/3/25	Disabled	Non-disabled	Disability unknown
Total Board members	11,11%	88,89%	0,00%
By Voting Membership of the Board	25,00%	75,00%	0,00%
By Non-Voting Membership of the Board	0,00%	100,00%	0,00%
By Executive Membership of the Board	0,00%	100,00%	0,00%
By Non-Executive Membership of the Board	16,67%	83,33%	0,00%
Difference (Total Board – Overall Workforce)	5%	4%	-8%
Difference (Voting membership – Overall Workforce)	18%	-10%	-8%
Difference (Executive membership – Overall workforce)	-7%	15%	-8%