July 2026

WDES Report

NHS
East and North Hertfordshire Teaching NHS Trust

Workforce Disability Equality Standard (WDES) Report 2026



1. Introduction

In 2019 NHS England, with its partners, prioritised its commitment to tackling discrimination and the Workforce Disability Equality Standard (WDES) came into force. It contains 10 metrics to compare the experiences of Disabled and non-Disabled staff, which is then used to implement action plans. The Trust is required to submit the data set using the national format. In 2023/24 the Trust launched its EDI Strategy which was aligned to the NHS EDI Improvement Plan and the 6 high impact areas identified. An Inclusion / EDI Steering Group was established to oversee an organisational action plan and focus on areas of the organisation. The steering group reports int the People and Culture Committee. Actions underway are highlighted towards the end of this report.

2. Executive Summary

The Trust recognises that overall performance requires continued improvement despite progress in some areas.
The relaunch of the ENH ABLE Network refreshed network leadership and stronger EDI governance are intended to drive improvement.

Main Positives
Disabled staff representation has improved in 5 of the 7 workforce categories, suggesting increased confidence in declaring disabilities.
Recruitment outcomes improved, with Metric 2 reducing from 1.26 to 1.12, indicating less disparity between disabled and non-disabled applicants being appointed from shortlist.

Significant improvements in disability declaration rates were seen across:

- Bands 2-4
- Bands 5-7
- Bands 8a-8b
- Consultants
- Trainee grade doctors

Areas of Concern
Representation deteriorated in:

- Band 8c+ and Very Senior Manager posts.
- Non-consultant career grade medical staff.

For the first time, disabled staff were more likely than non-disabled staff to enter a formal capability process (Metric 3).
The report notes that small numbers may distort results.
Seven staff-survey related measures declined compared with the previous year and were below national averages.

Staff Experience Findings
Disabled staff (staff with long-term conditions) reported:

- Higher levels of bullying, harassment and abuse from patients, managers and colleagues than non-disabled staff.
- Less confidence that the Trust provides equal career progression opportunities (41.0% vs 52.9%).
- Greater pressure from managers to attend work when unwell (27.1% vs 17.0%).
- Lower satisfaction that their work is valued (28.2% vs 45.9%).
- Lower staff engagement scores (6.25 vs 6.99).
- Lower levels of reasonable adjustments being implemented compared with the previous year (71.1% vs 75.7% previously).

Board Representation

- Disability declaration among voting board members fell from 27% to 23%.
- Executive board declaration remained at 11%.

Overall board disability representation remains above the national average but deteriorated from the previous year.

The report presents a mixed picture. Representation and recruitment outcomes have improved, but disabled colleagues continue to report poorer workplace experiences than non-disabled colleagues across most staff-survey measures. The Trust acknowledges the gaps and has put in place a comprehensive improvement plan through the Inclusion and EDI Steering Group

3. WDES Metrics and context

The 10 metrics of the WDES are set out here for clarity and context of the report:

1. % of Disabled staff in the 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 on the grounds of performance
4. Relates to Q14a-d in the NHS Staff Survey) Questions are related to staff with Long Term Conditions (LTC): Percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse
5. (Relates to Q15 in the NHS Staff Survey) Questions are related to staff with Long Term Conditions (LTC): Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.
6. (Relates to Q11e in the NHS Staff Survey) Questions are related to staff with Long Term Conditions (LTC): 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.
7. (Relates to Q4b in the NHS 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.
8. (Relates to Q30b in the NHS Staff Survey); Questions are related to staff with Long Term Conditions (LTC): Percentage of Disabled staff saying that their employer has made reasonable adjustment(s) to enable them to carry out their work.
9. (Relates to the staff engagement theme of the NHS Staff Survey, made up from Q2a, Q2b, Q2c, Q3c, Q3d, Q3f, Q23a, Q23c and Q23d in the NHS Staff Survey); Questions are related to staff with Long Term Conditions (LTC), the staff engagement score for Disabled staff, compared to non-disabled staff.
10. The percentage of the board's membership who have declared a disability

4. WDES Metrics and performance

Our performance overall in our WDES metrics requires continued improvement and focus. In 2025 we refreshed our Staff Network chairs and executive sponsors. The launch of the ENH ABLE Network has resulted in renewed activity to improve the experience at ENH. An update on the activities across the inclusion portfolio will be presented to People and Culture Committee and Trust Board at the end of 2026.

The WDES metrics data below shows our performance since 2022/2023. Over the last 2 years a focus has been in place, encouraging staff to update their personal equality data. Representation has improved in 5 of the 7 categories this is likely linked to improved declarations as staff are feeling more secure in declaring a disability in the workplace. We recognise there is more work to do overall around inclusivity in our workforce.

Workforce Disability Equality Standard (WDES) Indicators	East & North Herts (ENHT) WDES Data	ENHT 2022/23	ENHT 2023/24	ENHT 2024/25	ENHT 2025/26	WDES Progress 25/26 v 24/25	National WDES 2025/26
Metric 1 – % of Disabled staff in the Workforce	**Cluster 1: AfC Bands 1 - 4**	Non-Clinical = 4.0% Clinical = 3.0%	Non-Clinical = 4.8% Clinical = 3.2%	Non-Clinical = 5.5% Clinical = 3.7%	Non-Clinical = 6.9% Clinical = 6.5%	Improvement	6.7%
	Cluster 2: AfC Bands 5 - 7	Non-Clinical = 4.1% Clinical = 2.0%	Non-Clinical = 4.9% Clinical = 2.8%	Non-Clinical = 4.9% Clinical = 3.2%	Non-Clinical = 7.2% Clinical = 4.6%	Improvement	
	Cluster 3: AfC Bands 8a and 8b	Non-Clinical = 2.2% Clinical = 1.0%	Non-Clinical = 3.0% Clinical = 1.9%	Non-Clinical = 5.7% Clinical = 1.8%	Non-Clinical = 10.9% Clinical = 1.9%	Improvement	
	Cluster 4: AfC Bands 8c, 8d, 9 and VSM	Non-Clinical = 0% Clinical = 0%	Non-Clinical = 1.4% Clinical = 3.0%	Non-Clinical = 7.4% Clinical = 3.2%	Non-Clinical = 2.7% Clinical = 2.6%	Deterioration	
	Cluster 5: Medical and Dental staff, consultants	Non-Clinical = n/a Clinical = 0.0%	Non-Clinical = n/a Clinical = 0.25%	Non-Clinical = n/a Clinical = 0.9%	Non-Clinical = n/a Clinical = 2.1%	Improvement	
	Cluster 6: Medical and Dental staff, non-consultant career grades	Non-Clinical = n/a Clinical = 0.48%	Non-Clinical = n/a Clinical = 1.52%	Non-Clinical = n/a Clinical = 3.5%	Non-Clinical = n/a Clinical = 3.1%	Deterioration	
	Cluster 7: Medical and Dental staff, trainee grades	Non-Clinical = n/a Clinical = 1.46%	Non-Clinical = n/a Clinical = 0.75%	Non-Clinical = n/a Clinical = 1.4%	Non-Clinical = n/a Clinical = 6.3%	Improvement	
Metric 2 - Relative likelihood of non-disabled staff compared to Disabled staff being appointed from shortlisting across all posts.		1.6	1.23	1.26	1.12	Improvement	0.95
Metric 3 - Relative likelihood of Disabled staff compared to non-disabled staff entering the formal capability process on the grounds of performance		0	0	0	2.55	Deterioration	n/a

The overall make-up of the workforce is outlined in Metric 1 above – this shows a continuing improving picture disabled staff representation in the workforce. Two areas show deterioration, Band 8c+ and Non-Consultant Career Grade medics.

Metric 2 demonstrates an improvement in the likelihood of disabled staff compared to non-disabled staff being appointed from shortlisting; a result of 1.00 indicates there is no bias/difference between appointment of disabled versus non-disabled staff.

For the first time, the Trust has data showing more disabled staff enter into formal capability performance processes than non-disabled staff (metric 3). However it is worth noting the numbers of staff in formal capability processes is small, therefore this can cause skewed results. The national WDES report for 2025 offers no data at a national level stating “This data is not published at Trust level due to volitivity and small numbers”.

The tables below shows the national data taken form the 2025 staff survey benchmark average. Compared to the 2024 results, all metrics have shown a deterioration, with 7 scores being lower than the national average too.

	East & North Herts (ENHT) WDES Data						
Workforce Disability Equality Standard (WDES) Indicators		**ENHT**	**ENHT**	**ENHT**	**ENHT**	**WDES Progress 25/26 v 24/25**	**National WDES 2025/26**
		2022/23	**2023/24**	**2024/25**	**2025/26**		
Metric 4 (Relates to Q14a-d in the NHS Staff Survey) Questions are related to staff with Long Term Conditions (LTC) 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	With LTC = 38.4% Without LTC = 30.5%	With LTC = 39% Without LTC = 30.4%	With LTC = 33.61% Without LTC = 25.11%	With LTC = 34.9% Without LTC = 26.0%	**Deterioration**	With = 29.7% Without = 23.4%
	Managers	With LTC = 21.6% Without LTC = 12.9%	With LTC = 22.3% Without LTC = 12.3%	With LTC = 16.48% Without LTC = 9.22%	With LTC = 16.8% Without LTC = 8.99%	**Deterioration**	With = 13.6% Without = 7.4%
	Other colleagues	With LTC = 32.4% Without LTC = 19.8%	With LTC = 32.6% Without LTC = 20.5%	With LTC = 25.73% Without LTC = 18.45%	With LTC = 28.6% Without LTC = 15.8%	**Deterioration**	With = 22.9% Without = 14.8%
	Percentage of Disabled staff saying they or a colleague reported the harassment/bullying or abuse.	With LTC = 47.2% Without LTC = 46.0%	With LTC = 49.7% Without LTC = 47.1%	With LTC = 52.66% Without LTC = 53.16%	With LTC = 52.2% Without LTC = 54.8%	**Deterioration**	With = 54.9% Without = 54.9%
Metric 5 (Relates to Q15 in the NHS Staff Survey) Questions are related to staff with Long Term Conditions (LTC) Percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.		With LTC = 42.1% Without LTC = 55.6%	With LTC = 46.7% Without LTC = 54.3%	With LTC = 46.9% Without LTC = 54.6%	With LTC = 40.98% Without LTC = 52.9%	**Deterioration**	With = 48.6% Without = 55.7%

	East & North Herts (ENHT) WDES Data						
Workforce Disability Equality Standard (WDES) Indicators		**ENHT**	**ENHT**	**ENHT**	**ENHT**	**WDES Progress 25/26 v 24/25**	**National WDES 2025/26**
		2022/23	**2023/24**	**2024/25**	**2025/26**		
Metric 6 (Relates to Q11e in the NHS Staff Survey) Questions are related to staff with Long Term Conditions (LTC) 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.		With LTC = 38.2% Without LTC = 26.2%	With LTC = 33.2% Without LTC = 22.3%	With LTC = 26.0% Without LTC = 18.6%	With LTC = 27.1% Without LTC = 16.99%	**Deterioration**	With = 25.6% Without = 17.5%
Metric 7 (Relates to Q4b in the NHS 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.		With LTC = 31.7% Without LTC = 45.7%	With LTC = 28.3% Without LTC = 43.0%	With LTC = 36.5% Without LTC = 46.4%	With LTC = 28.2% Without LTC = 45.9%	**Deterioration**	With = 34.4% Without = 46.1%
Metric 8 (Relates to Q30b in the NHS Staff Survey) Questions are related to staff with Long Term Conditions (LTC) Percentage of Disabled staff saying that their employer has made reasonable adjustment(s) to enable them to carry out their work.		71.75	73.7%	75.7%	71.1%	**Deterioration**	74.9%

	East & North Herts (ENHT) WDES Data						
Workforce Disability Equality Standard (WDES) Indicators		**ENHT**	**ENHT**	**ENHT**	**ENHT**	**WDES Progress 25/26 v 24/25**	**National WDES 2025/26**
		2022/23	**2023/24**	**2024/25**	**2025/26**		
Metric 9a (Relates to the staff engagement theme of the NHS Staff Survey, made up from Q2a, Q2b, Q2c, Q3c, Q3d, Q3f, Q23a, Q23c and Q23d in the NHS Staff Survey) Questions are related to staff with Long Term Conditions (LTC) The staff engagement score for Disabled staff, compared to non-disabled staff.		With LTC = 6.25 Without LTC = 6.84	With LTC = 6.40 Without LTC = 6.91	With LTC = 6.56 Without LTC =7.01	With LTC = 6.25 Without LTC = 6.99	**Deterioration**	With = 6.31 Without = 6.91
Metric 10 - The percentage of the board's membership who have declared a disability	**Voting Membership of the Board**	0%	0%	27%	23%	**Deterioration**	5.6%
	Non-Voting Membership of the Board	0%	0%	0%	0%		6.1%
	Executive Membership of the Board	0%	0%	11%	11%		5.4%
	Non-Exec Membership of the Board	0%	0%	29%	22%		6.0%

WDES action plan — aligned with the Inclusion and EDI Action Plan and governed by the Inclusion and EDI Steering Group

Objective	Action	Metric	Update (Summer 2026)	RAG Rating
Career progression for colleagues with disabilities Improve disabled colleagues' progression and representation across all Agenda for Change pay bands.	Develop and widely share "Share Your Story" case studies featuring disabled colleagues from a range of grades and professions. **Lead: Colleague Experience Specialist and ENH ABLE Network**	WDES 1: representation of disabled colleagues across pay bands, medical and dental subgroups, and very senior management, compared with the overall workforce. Feedback on the relevance and usefulness of shared stories, and the number of colleagues seeking career-progression support. WDES 5: disabled and non-disabled colleagues' views on equal opportunities for career progression or promotion. Progress will be monitored through Staff Survey data and the Inclusion/EDI Dashboard.	Colleague-experience stories are published throughout the year in Trust News and on the intranet, including features on specific conditions. In 2026, the People Team plans to launch a newsletter featuring colleagues' experiences and highlighting opportunities within the Trust. An Inclusion/EDI Dashboard was created in 2026 to inform the Inclusion/EDI Steering Group. Organisational and local actions are reviewed against Staff Survey findings and other available data.	Amber
Reasonable adjustments Achieve a year-on-year increase in the proportion of disabled colleagues who say that adequate adjustments have been made to enable them to carry out their work.	**Quality Line Management Programme (QLM)** The 2026 NHS Staff Standards identify line management as a priority. The QLM programme will define management expectations and	WDES 3: relative likelihood of disabled colleagues entering the formal capability process compared with non-disabled colleagues. WDES 6: disabled and non-disabled colleagues who report feeling pressure from their manager to work when they	QLM is scheduled to launch in late 2026 and is intended to strengthen line management throughout recruitment, onboarding and development. The Trust has joined NHS Elect, increasing the range of development support	Amber

	support effective workplace practice. **Lead: Colleague Development Lead** Other initiatives detailed are collaborations between the Health at Work Team and People Partnering Team	were not well enough to perform their duties. WDES 8: disabled colleagues who report that adequate workplace adjustments have been made. WDES 9: engagement scores for disabled colleagues, compared with non-disabled colleagues and the organisation overall.	available to colleagues and managers. The trust has introduced the shine bright initiative which provides an online mental wellness programme that gives NHS colleagues the power to take control of their wellbeing. The offer is 3 live sessions over three weeks: The first is 1.5 hours and the next two are 2 hours each (5,5 hours in total) . Between sessions you'll have some short, optional exercises and for two months afterwards you'll get gentle prompts to help your new habits stick. Staff Network ENH Able are running a project to bring in reasonable adjustments passport this has been drafted, case studies of colleagues that have had reasonable adjustments is planned for disability history month and linked project looking at pathways and cost of equipment is underway. We plan to develop guidance and a RA	

			‘passport’ before the end of the year. The Return Well project began in June 2026, this is a 6-month project where people partners, occupational health and wellbeing and managers work collaboratively to prevent and reduce sickness absence. The work of the return well project includes targeted support and guidance for managers on implementing reasonable adjustments.	
Appreciation and recognition Ensure that disabled colleagues feel recognised, valued and appreciated for their contribution.	**Benefits promotion** Deliver a Trust-wide campaign explaining the practical benefits of NHS employment, including discounts, pensions, and terms and conditions. **Targeted benefits focus** Use the autumn 2026 colleague-experience dashboard, Staff Survey evidence and colleague accounts to promote support for disabled colleagues, including reasonable adjustments and flexible working.	WDES 7: disabled and non-disabled colleagues who are satisfied with the extent to which the organisation values their work.	The benefits campaign is scheduled to begin in autumn 2026. Targeted activity will be informed by the 2026 Staff Survey and related datasets and surveys.	Amber

	Lead: Colleague Experience Specialist and ENH ABLE			
Dignity at work Improve colleagues' experience by preventing and responding effectively to bullying, harassment and abuse in the workplace.	From autumn 2026, the colleague-experience dashboard will consolidate data on the experiences of groups across the Trust. Evidence will include formal case data, Staff Survey findings and reports from the Freedom to Speak Up service. Resulting actions will be included in the Inclusion Action Plan and overseen by the Inclusion Steering Group. **Lead: Colleague Experience Specialist**	WDES 4a: disabled and non-disabled colleagues reporting harassment, bullying or abuse. WDES 4b: disabled and non-disabled colleagues who say that the most recent incident of harassment, bullying or abuse was reported by them or a colleague.	The colleague-experience dashboard and resulting Inclusion Action Plan are due to be refreshed through the relaunched Inclusion Steering Group in autumn 2026 The new Violence and Aggression Steering committee has network representation and intersectional voices.	Amber
Recruitment and Selection Ambassador (RSA) Programme	The RSA Programme provides real-time oversight of selection processes. Panels will be observed and assessed to promote consistent and equitable treatment of candidates. **Lead: Resourcing and Talent Lead**	Increase the proportion of candidates with protected characteristics who are successful during recruitment. Monitored through WDES 1, 2, 5 and 10.	Launched in January 2027	Amber
RISE	Provide unsuccessful candidates with clear, constructive feedback and, where appropriate, a development plan for future applications.	Monitor participation in the RISE process and the outcomes of candidates who make a subsequent application.	Launched in autumn 2026.	Amber

	Lead: Resourcing and Talent Lead			
Equality Impact Assessment (EQIA)	The EQIA process was reviewed in summer 2026. The revised approach and training programme are scheduled for autumn 2026. **Lead: People Partners and Inclusion and Change Lead**	Ongoing audit of EQIA processes, feedback from training, and evidence of improved organisational awareness.	The revised process is scheduled to launch in autumn 2026. It will strengthen the use of EQIA in organisational change and policy review, while considering how the principles can be applied more widely.	Amber
United Networks GEMBA	The Trust's staff networks raise awareness and address network-specific concerns. United Networks supports joint action through collaborative events. GEMBA applies the Trust's improvement methodology to work and colleague experience at the point of delivery. United Networks GEMBA enables networks to assess practice and lived experience jointly. **Lead: Colleague Experience Specialist and network members**	Record and escalate identified issues, with clear feedback to the relevant local areas.	Launched in summer 2026.	Amber
ENH ABLE	ENH ABLE is the Trust's staff network for disabled colleagues. Formerly the Disabled Members Network, it represents colleagues,	Network reports and monthly and annual Colleague Experience reports.	Ongoing. The network will share knowledge about physical and mental health and hidden disabilities with the wider Trust workforce,	Amber

	identifies barriers, raises awareness and informs change. The network provides peer support, guidance and practical input to strengthen inclusion across the Trust. **Lead: ENH ABLE and Colleague Experience Specialist**		and encourage every division to support disabled colleagues. A programme of topics is planned for the year, with meetings held every two months.	
ENH ABLE: coaching for neurodivergent colleagues	In autumn 2026, ENH ABLE began assessing the feasibility of a coaching faculty for neurodivergent colleagues. **Lead: ENH ABLE and Colleague Experience Specialist**	Creation of a coaching faculty; patterns of access and participation; and impact surveys.	A feasibility assessment and recommended next steps will be reported in autumn 2026.	Amber
Equitable representation in the capability process Work towards proportionate representation of disabled and non-disabled colleagues entering the formal capability process.	Undertake a detailed review of the data to identify themes that may contribute to poorer experiences or outcomes for disabled colleagues and use the findings to inform appropriate action. **Lead: People Partners**	WDES 3.	In 2026, employee relations moved to People Partners as part of the People Team restructure. This should improve analysis by linking case data with organisational knowledge; its impact will be monitored.	Amber

Summary

In 2026, the Trust reset its approach to inclusion and colleague experience. Leadership changes, inconsistent strategic focus and an overly broad portfolio had affected delivery. The team is now defining clearer priorities aligned with the Trust's Inclusion Strategy and the NHS EDI Improvement Plan, providing a stronger basis for meeting national standards.

The Trust acknowledges inconsistent progress and instances where colleague experience fell below the expected standard. These outcomes reflect wider system challenges, not a lack of colleague commitment. Governance is being strengthened. Although further improvement is required, available data shows progress in several areas.

The Trust will act on the findings, deliver the actions above and report openly on progress, challenges and further improvement.