NHS
University Hospitals Birmingham
NHS Foundation Trust

Workforce Disability Equality Standard Report 2025

University Hospitals Birmingham
NHS Foundation Trust

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Summary of Findings

Metric 1: Representation

5.60% of staff have shared their disability compared to 4.29% last year and increased for both clinical and non-clinical staff.

Metric 3: Capability

The relative likelihood of disabled staff entering the formal capability process remains at **0**.

Metric 4: Bullying and Harassment

Staff who have shared a disability have reported **less harassment from the public (26.83%), managers (16.43%) and colleagues (27.92%)**, and are more likely to report if it does occur **(53.45%)**.

Metric 5: Career Progression

44.23% of staff who shared a disability felt that the Trust offers equal access to career progression compared to **41.87%** last year.

Metric 6: Pressure at Work

28.25% of disabled staff reported pressure to work when not well enough to do so compared to **32.23%** last year.

Metric 7: Feeling Valued

30.79% of disabled staff reported feeling valued compared to 28.06% last year.

Metric 8: Adjustments

71.79% of staff reported having the adjustments in place they need to complete their roles, compared to **69.27%** last year.

Metric 9: Engagement

Engagement score has increased to **6.10** from **5.96** last year.

Metric 2: Shortlisting

The Trust is **1.17** times more likely to appoint a non-disabled candidate compared to 1.16 last year.

Metric 10: Board

8.00% of the overall Board shared a disability compared to 8.7% last year but remains higher than the overall Trust.

Introduction

NHS England oversees and maintains two national workforce equality data collections that promote equality of career opportunities and fairer treatment in the workplace. Providing an annual report for the Workforce Disability Equality Standard (WDES) and the Workforce Race Equality Standard (WRES) is a requirement for NHS commissioners and NHS healthcare providers through the NHS standard contract. The WDES is a collection of 10 metrics that aim to compare the workplace and career experiences of disabled and non-disabled staff. The WRES is a collection of 9 metrics that aim to ensure our ethnic minority staff have equal access to career opportunities and receive fair treatment in the workplace.

In addition to these mandated reports, University Hospitals Birmingham NHS Foundation Trust (UHB) has also produced a Workforce Women's Equality Standard (WWES) report for the first time in 2025. This explores the experiences of women and men across the Trust using similar metrics to the WDES and WRES reports.

This WDES Annual Report uses data from Electronic Staff Records (ESR), NHS Jobs and National Staff Survey (NSS) results, focusing on workforce representation and the lived experiences of disabled staff. Using data from different sources means some language differs in this report. For example, data taken from ESR uses the term "disabled", whereas NSS data uses "staff with a long-lasting health condition or illness". Throughout this report, the narrative refers to disabled staff, aligning our language to the social model of disability.

Baseline data and analysis serve as a measuring tool, enabling the Trust to identify areas of progress and areas requiring improvement. Where possible, the snapshot date for data is 31 March 2025. Data for the 2024 NSS is captured in October and November 2024 and reported to the Trust in March 2025. This year, the Trust has introduced WDES data on a local level through our site-led structure and collaborated with Hospital Executive Directors and their senior leadership teams. This approach aims to improve each site's performance against the WDES metrics, and in turn improve the overall Trust's performance.

This report provides an update on the WDES metrics as required by the NHS Standard Contract. It details the data the Trust is required to provide for each of the metrics, and shares analysis and actions to be taken. The report describes a targeted series of activities undertaken throughout the year aimed at improving performance against the metrics and sets out the Trust's plan to demonstrate continued commitment and progress throughout 2025 and 2026.

This report is focused on disability but recognises that we may face multiple and simultaneous forms of discrimination based on the multiple features that make up our unique identities and that this can intensify our workplace experiences. For this reason, we take an intersectional approach to the way we analyse and respond to the findings of the WDES, WRES and WWES. Some actions in response to harassment, bullying and abuse for example, which apply to disability, ethnicity, and sex, are duplicated in our action plans to encourage greater intersectional thinking and practice. For example, if a staff member is a woman of an ethnic minority background, with dyslexia, then their challenge in relation to career progression is likely to be multifaceted.

Findings by Metrics 1-10

The 2025 WDES has shown a consistent improvement in nearly all metrics. There have been no areas that fall under the 'requiring improvement' category included in previous reports. Where there has not been an improvement, such as metric 2 and 10, the results have remained broadly the same as last year. This marks a significant improvement, where we can report for the first time, either a stabilised or broadly improved experience for disabled staff.

When compared to the results of Trusts who are also within the Brimingham and Solihull Integrated Care System (ICS), UHB is the only organisation that reported improvements on all measures from the NSS, with many other Trusts reporting worse results when compared to last year. Furthermore, when compared to NHS England's review of 2024 reports from all NHS Trusts, UHB performs better than the national average with:

- less unknown data;
- a higher proportion of Board members sharing a disability;
- lower numbers of disabled staff in the formal capability process;
- less bullying, harassment or abuse from patients, their relatives or other members of the public;
- more staff reporting bullying or harassment when it does occur.

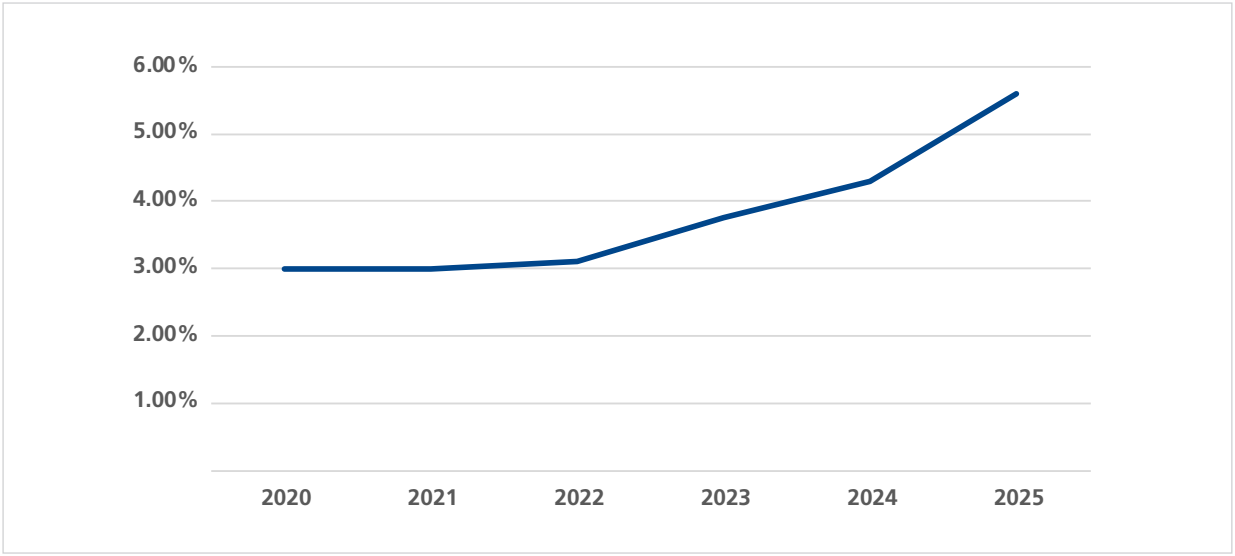
Progress made against aims set out in the 2024 WDES report:

- We have created stronger engagement mechanisms for our disabled staff;
- We have improved the disability declaration rate and reduced the amount of unknown data;
- The relative likelihood of disabled staff being appointed form shortlisting remains almost the same;
- We have reduced the number of staff reporting bullying, harassment and abuse from the public, managers and colleagues;
- We have reduced the percentage of disabled staff saying they experienced pressure to come to work despite not being well enough;
- We have improved the percentage of disabled staff compared to non-disabled staff believing the Trust provides equal opportunities to career progression.

There are still disparities between disabled and non-disabled staff, but these have reduced in all areas. The actions in this report aim to build on this progress across the next 12 months. The following analysis replaces previous years data, highlighting key findings for 2025. Full data sets from 2020 to 2025 are provided in Appendix 1.

Metric 1: Representation

Percentage of staff in Agenda for Change 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.



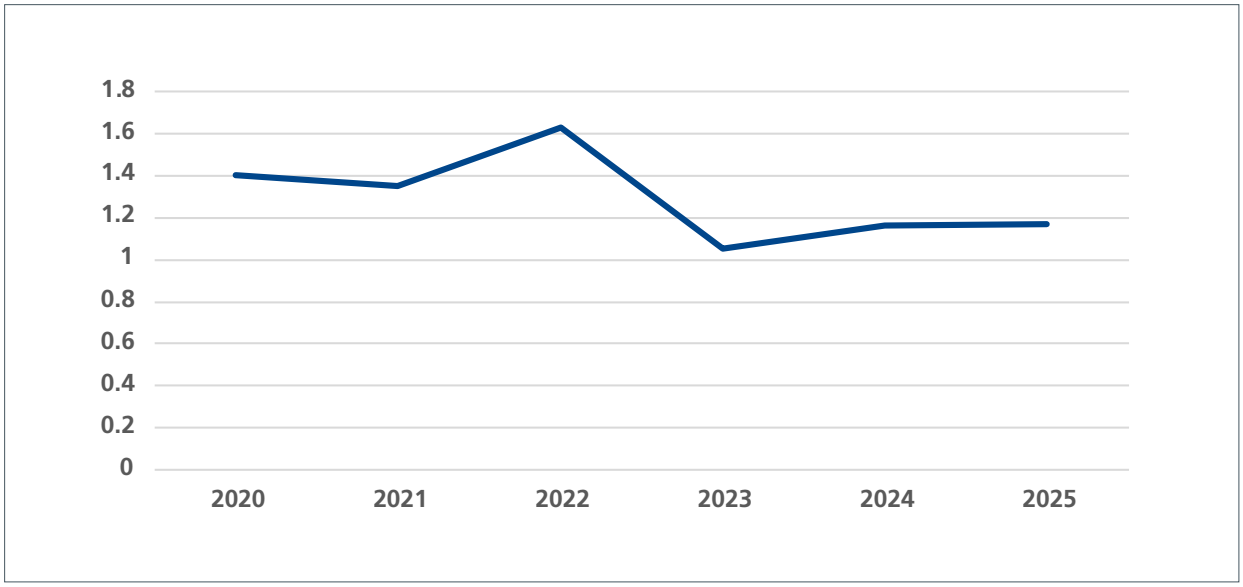
2020	2021	2022	2023	2024	2025
3.00%	3.00%	3.10%	3.76%	4.29%	5.60%

This metric shows the percentage of disabled staff taken from ESR, in each of the Agenda for Change bands 1 – 9, VSM (including executive board members), medical, dental and other staff where a higher number shows improvement. There has been consistent growth in the number of staff who have shared their disability via ESR since 2020, increasing to 5.60% in 2025 from 4.29% in 2024.

This has increased in both clinical (5.39% from 4.29%) and non-clinical (7.97% from 6.07%) staff groups. The Disability Declaration rate on 1st July 2025 has increased to 6.06%. Our aim remains to increase to 10% by the end of 2025

Metric 2: Shortlisting

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



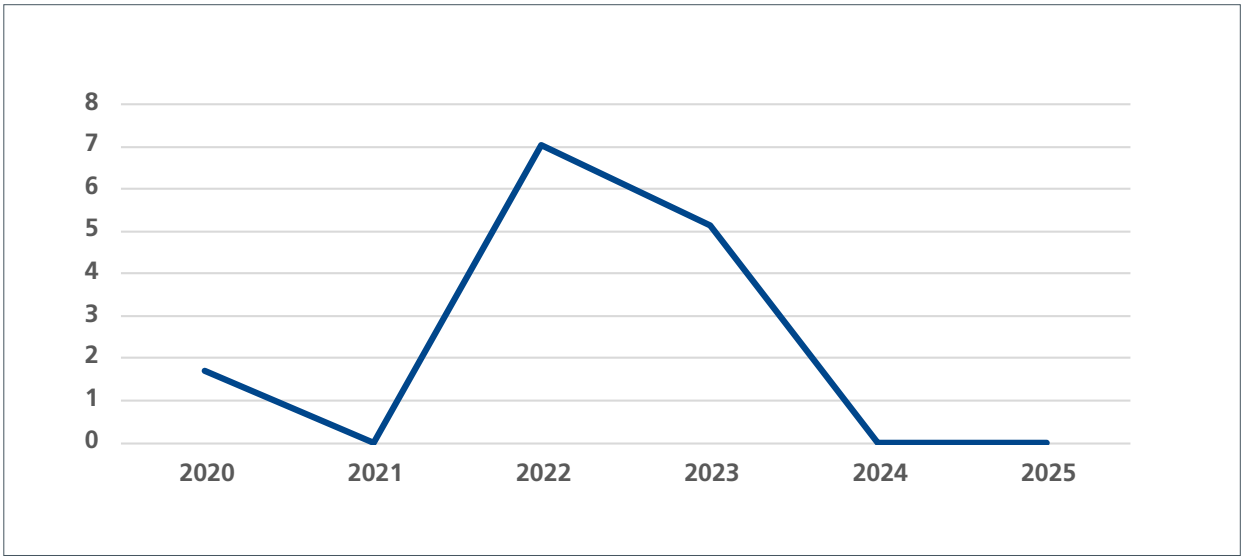
2020	2021	2022	2023	2024	2025
1.40	1.35	1.63	1.05	1.16	1.17

This metric uses data taken from NHS Jobs showing the relative likelihood of non-disabled staff compared to disabled staff appointed from shortlisting across all posts. A figure of 1 would indicate that the Trust is just as likely to appoint disabled and non-disabled candidates.

28,550 candidates were shortlisted across all roles at UHB from April 2024 to March 2025, of which 1,730 candidates had shared their disability on application. 270 of those that shared a disability were appointed. An analysis indicates that the data has remained stable, moving to 1.17 from 1.16 times more likely to appoint the non-disabled candidate

Metric 3: Capability

Relative likelihood of disabled staff compared to non-disabled staff entering the formal capability process on the grounds of performance, as measured by entry into the formal capability procedure.



2020	2021	2022	2023	2024	2025
1.70	0	7.04	5.15	0	0

This metric shows the relative likelihood of disabled staff compared to non-disabled staff entering the formal capability process and is based on data from a two-year rolling average. A figure above 1 indicates that disabled staff members are more likely than non-disabled staff to enter the formal capability process. This year, the relative likelihood of disabled colleagues entering this process remains at 0.

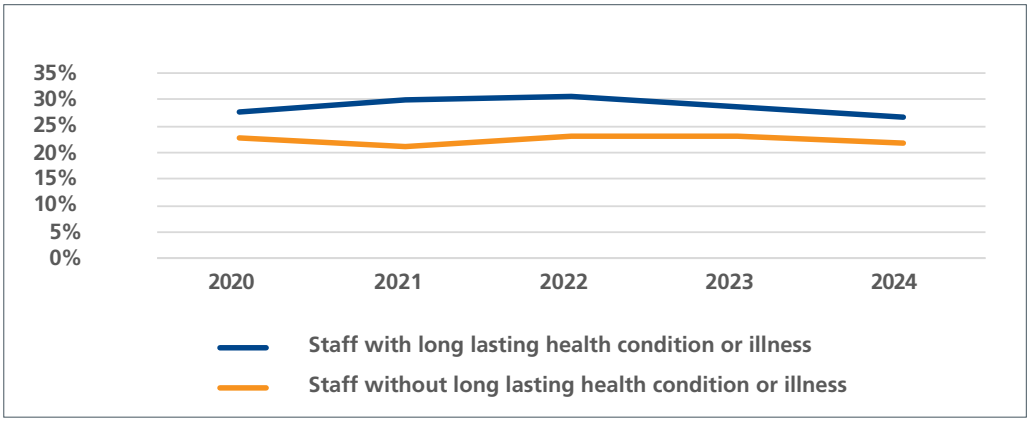
Of the 20 colleagues in the process, 3 had shared a disability and 17 were recorded as disability unknown. The high levels of unknown data and the fact this metric is a 2-year rolling average has meant that the relative likelihood remains at 0. Further work will be undertaken to understand and address the high levels of unknown data for staff in this process.

Metric 4: Harassment and bullying

Percentage of disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:

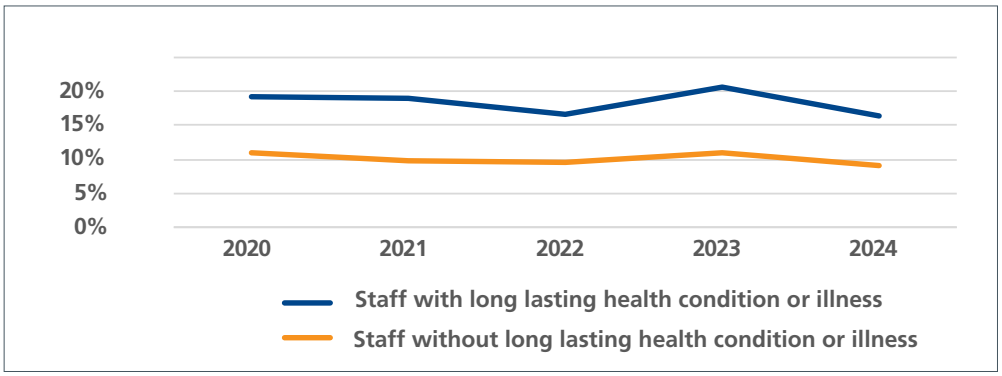
1 Patients/Service users, their relatives or other members of the public
2 Managers
3 Other colleagues
4 Percentage of disabled staff compared to non-disabled staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it.

1. Harassment, bullying or abuse from patients, service users or the public



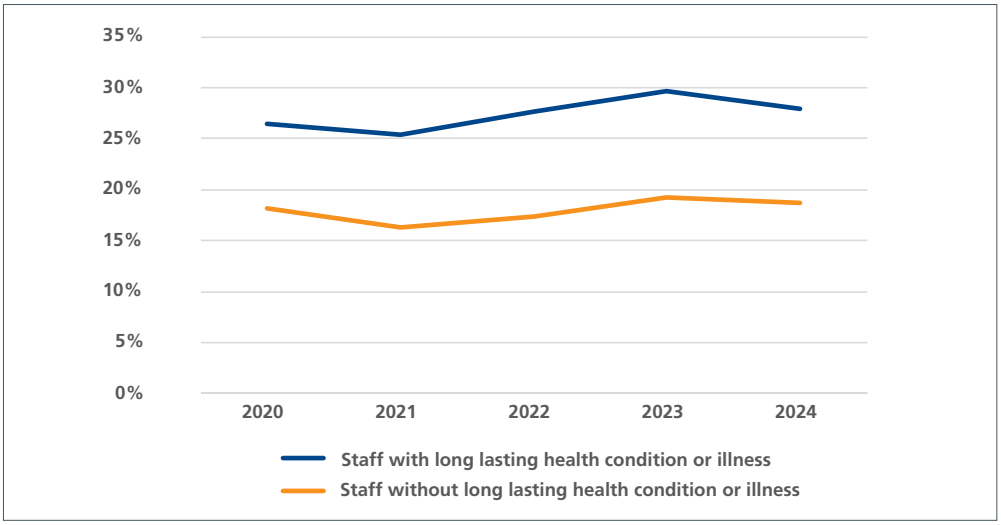
	2020	2021	2022	2023	2024
Disabled	27.70%	29.85%	30.59%	28.72%	26.83%
Non-Disabled	22.88%	21.25%	23.10%	23.00%	21.92%

2. Harassment, bullying or abuse from a line manager



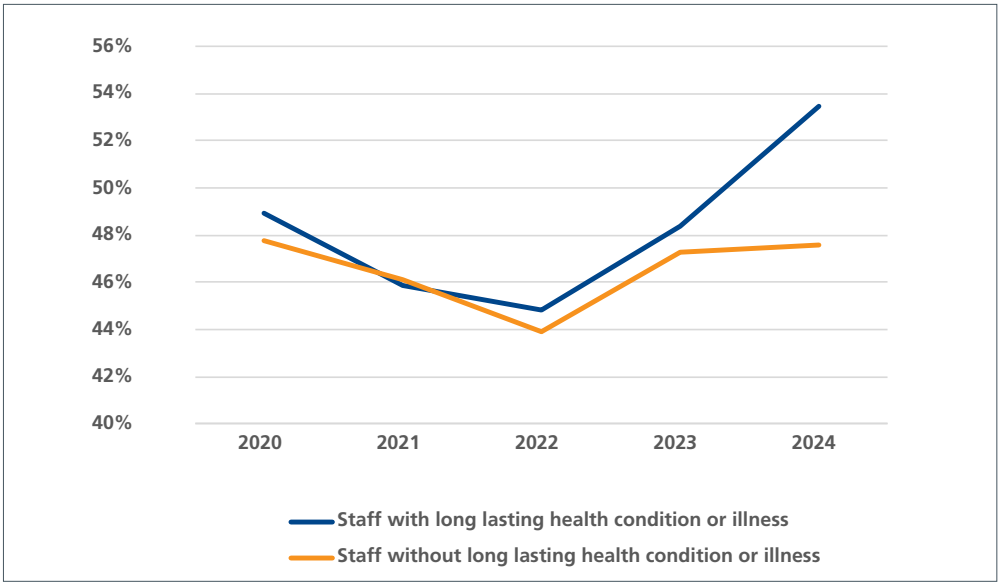
	2020	2021	2022	2023	2024
Disabled	19.11%	18.99%	16.60%	20.68%	16.43%
Non-Disabled	10.95%	9.81%	9.61%	11.02%	9.19%

3. Harassment, bullying or abuse from other colleagues



	2020	2021	2022	2023	2024
Disabled	26.40%	25.42%	27.71%	29.60%	27.92%
Non-Disabled	18.17%	16.24%	17.35%	19.19%	18.68%

4. Percentage of staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it.

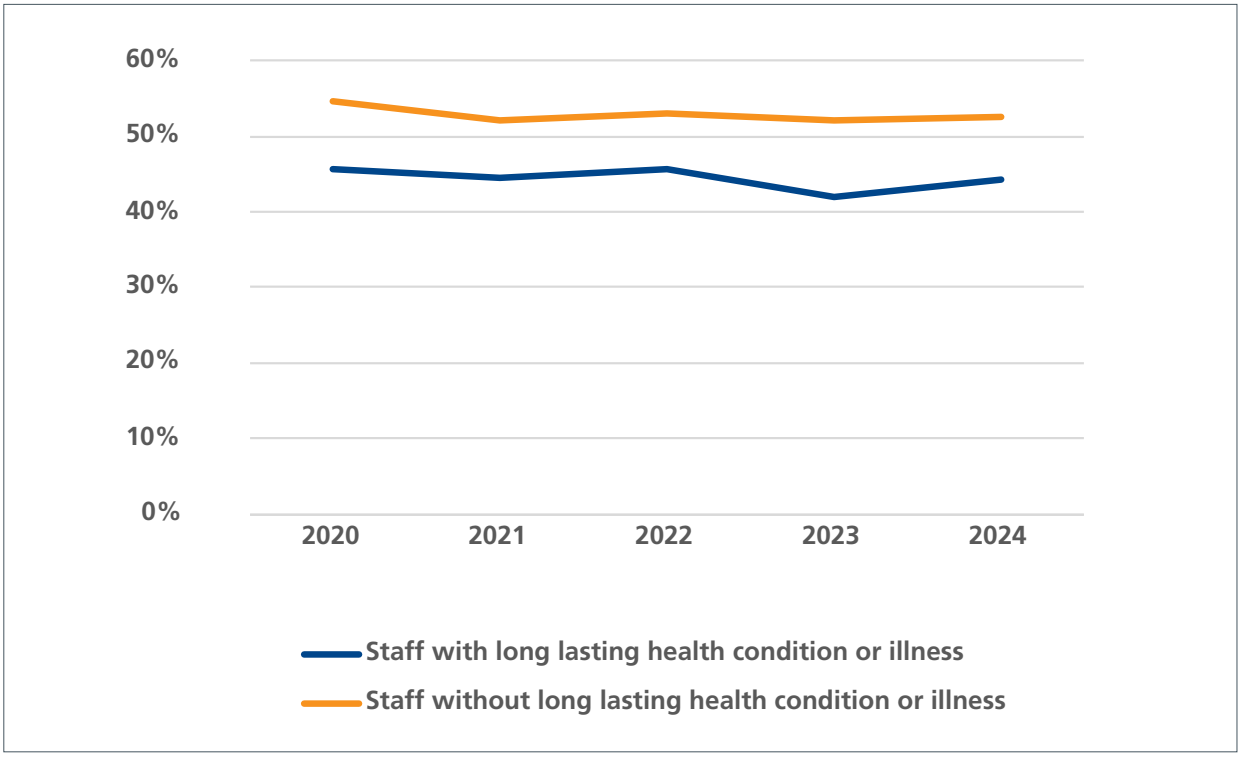


	2020	2021	2022	2023	2024
Disabled	48.95%	45.85%	44.81%	48.35%	53.45%
Non-Disabled	47.74%	46.09%	43.92%	47.25%	47.59%

We are pleased that disabled staff reported less bullying, harassment or abuse from patients or services users, managers and colleagues over the last 12 months. Though we acknowledge that the rates at which disabled staff report these instances is still higher than non-disabled staff and further work is required to ensure this downward trend continues. Additionally, the percentage of disabled staff who reported incidents when they experienced it, has increased by 5% to 53.45% and remains higher than non-disabled staff.

Metric 5: Career progression

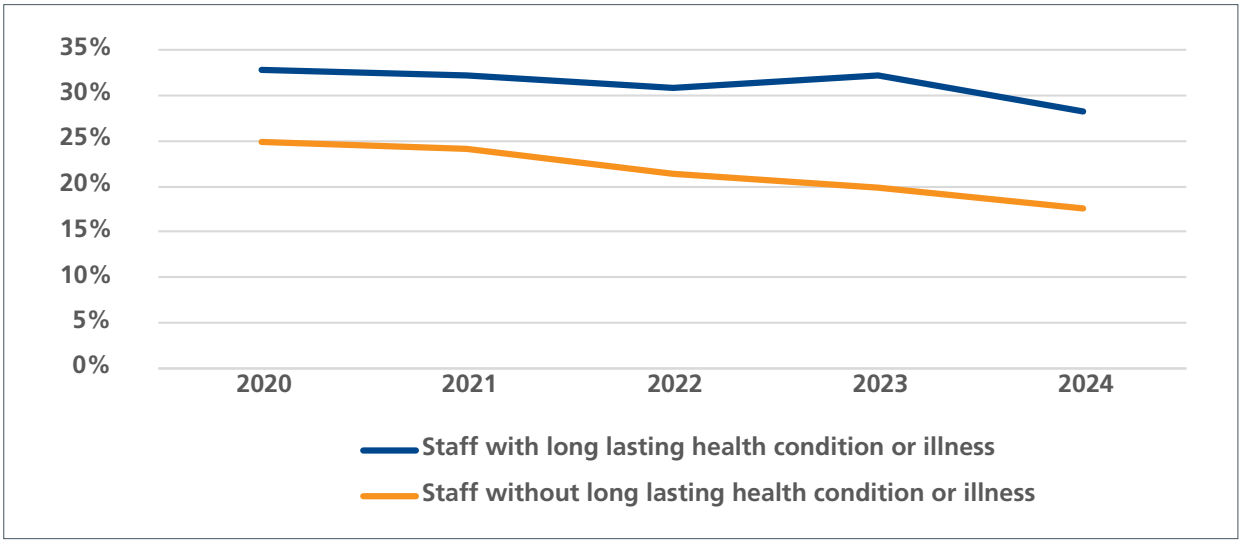
Percentage of disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.



	2020	2021	2022	2023	2024
Disabled	45.63%	44.49%	45.71%	41.87%	44.23%
Non-Disabled	54.71%	51.87%	52.96%	52.17%	52.60%

This metric is focused on the percentage of disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion, where a higher number demonstrates improvement. This percentage has increased to 44.23% from 41.87%, reducing the gap between disabled and non-disabled staff to 8.37%.

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.

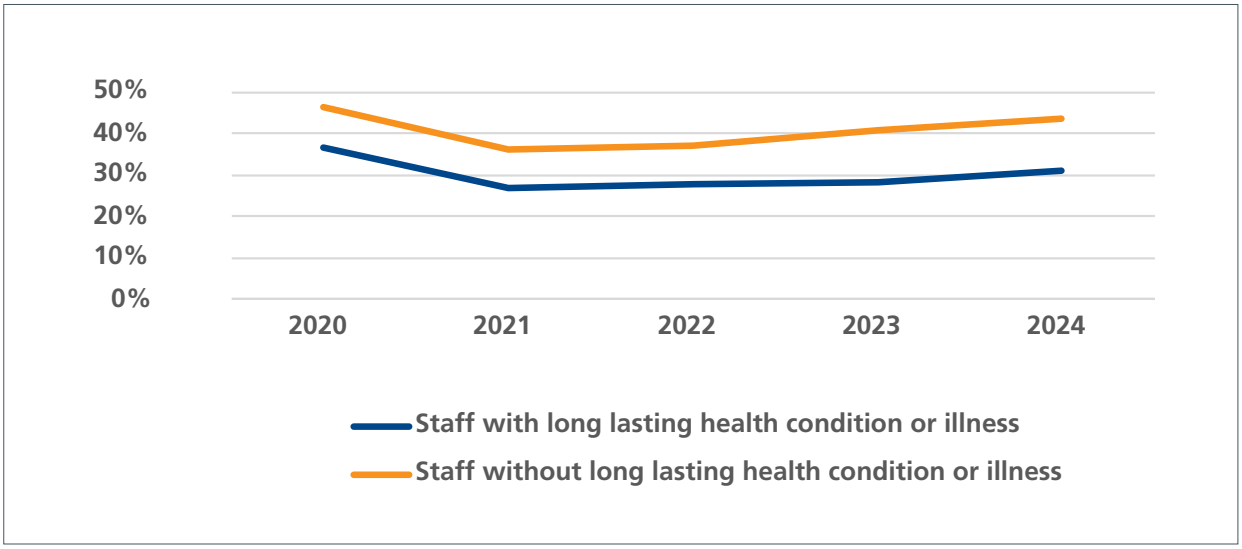


	2020	2021	2022	2023	2024
Disabled	32.76%	32.27%	30.89%	32.23%	28.25%
Non-Disabled	24.91%	24.18%	21.31%	19.89%	17.62%

This metric is focused on the 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 (presenteeism). A lower number demonstrates improvement. Disabled staff reported at lower levels in 2024, 28.25% down from 32.23%, which continues an overall positive downward trend on this metric since 2020. This does, though, remain higher than the 17.62% of non-disabled staff which has reduced at a faster rate over the same time period.

Metric 7: Feeling valued

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

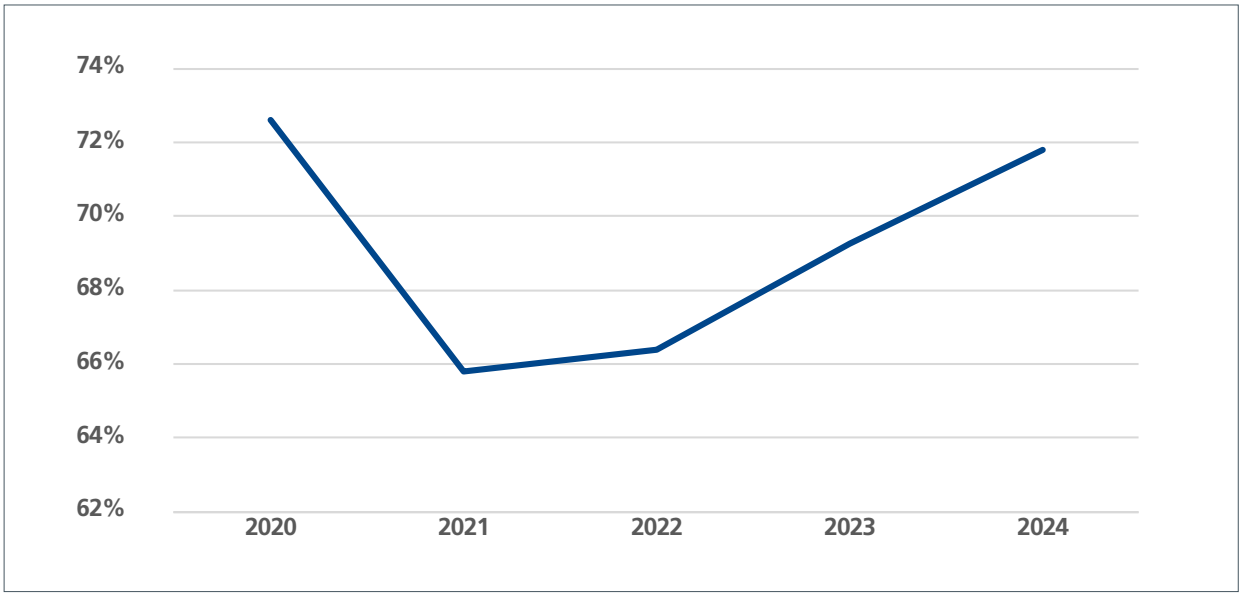


	2020	2021	2022	2023	2024
Disabled	36.66%	26.80%	27.73%	28.06%	30.79%
Non-Disabled	46.53%	36.00%	37.15%	40.82%	43.42%

This metric is focused on the percentage of disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work, where a higher number demonstrates improvement. 30.79% of disabled staff reported feeling their work was valued, a positive increase from 28.06% last year. However, this is still lower than non-disabled staff who reported 43.42%, though the steady year on year increase is getting closer to the high of 36.66% reported in 2020.

Metric 8: Adjustments

Percentage of disabled staff saying that their employer has made reasonable adjustments to enable them to carry out their work.



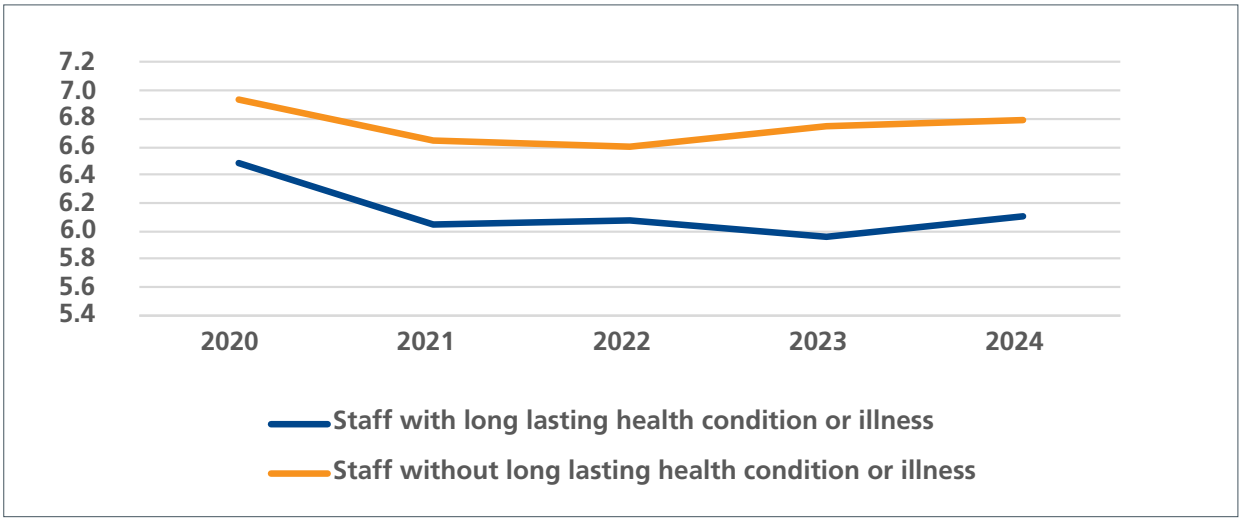
2020	2021	2022	2023	2024
72.60%	65.80%	66.37%	69.27%	71.79%

This metric is focused on the percentage of disabled staff saying that their employer has made adequate adjustments to enable them to carry out their work, where a higher number demonstrates improvement. 71.79% of disabled staff reported having the adjustments in place that they need to undertake their roles, an increase from 69.27% last year and from 65.80% in 2021. Whilst this is an improvement, there is still work to be done in this area through our continuous improvement to workplace adjustments processes and procedures.*

*Prior to 2022, the term "adequate adjustments" was used.

Metric 9: Engagement

Staff engagement score for disabled staff compared to non-disabled staff

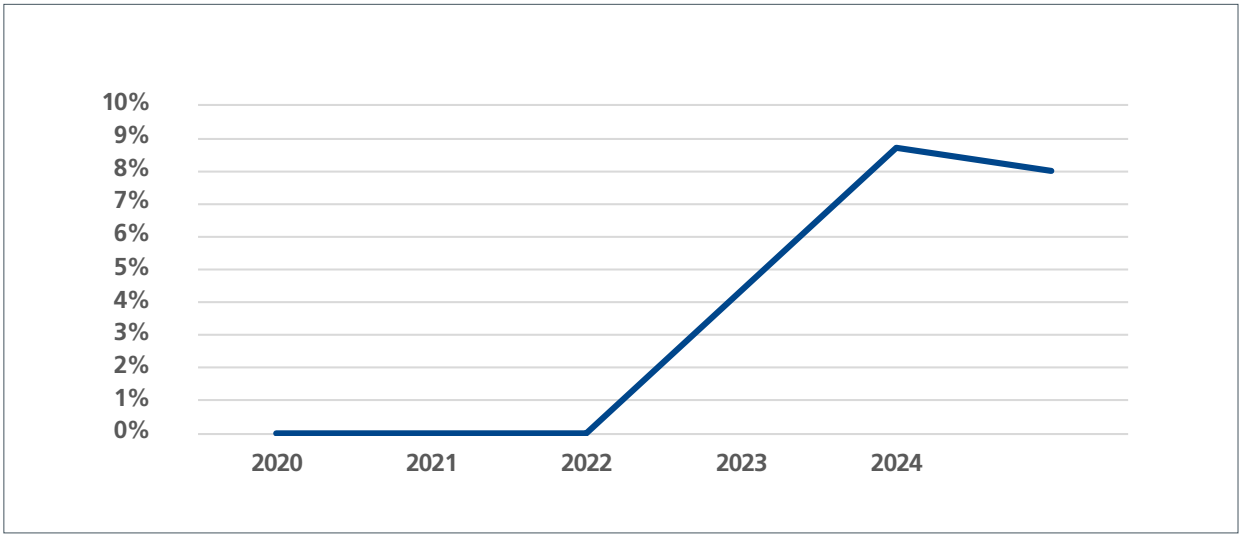


	2020	2021	2022	2023	2024
Disabled	6.49	6.04	6.08	5.96	6.10
Non-Disabled	6.93	6.65	6.60	6.74	6.79

This metric relates to the staff engagement theme of the NHS Staff Survey, made up from Questions: 2a, 2b, 2c, 3c, 3d, 3f, 23a, 23c and 23d in the NHS Staff Survey, and a higher number demonstrates improvement. The engagement score for disabled staff has increased to 6.10 from 5.96. This is a small improvement but could indicate a reversal of the downward trend that started in 2021. We recognise the low engagement and overall satisfaction of staff with a disability is a priority and may reflect experiences in relation to the set of metrics captured within this report.

Metric 10: Board representation

Percentage of board sharing a disability[1]



2020	2021	2022	2023	2024	2025
0.00%	0.00%	0.00%	4.35%	8.70%	8.00%

The percentage of Board members sharing a disability has decreased slightly to 8.00% in 2025 from 8.70% in 2024. However, for the first time, a higher percentage of the overall, voting and Executive Board have shared their disability than the overall Trust. There has been a marked increase in the percentage of the Board sharing that they have a disability since 2023. This is important because when our leaders share and talk openly about disability it encourages staff across the Trust to do the same.

[1]Percentage difference between the organisation's board voting membership and its organisation's overall workforce, disaggregated by voting and non-voting membership of the board by executive and non-exec membership of the board. This metric compares the difference for Disabled and non-disabled staff.

Metrics 1-10 in Summary

The 2025 WDES data illustrates both encouraging progress and consistency in all areas. Reports of bullying, harassment and abuse from all sources have reduced. Numbers of disabled staff reporting instances when they do occur has increased, and remains higher than non-disabled staff. Disabled staff reporting that they feel valued and that there are equal opportunities for career progression has increased, and staff feeling pressure to work when not well enough to do so has decreased. Representation of disabled staff has continued to increase across the Trust, and Board representation remains higher than the overall workforce. More disabled staff also say that they have the adjustments they need to do their role.

The relative likelihood of disabled candidates being shortlisted compared to non-disabled candidates has changed by 0.01 and remains much the same. The engagement score for disabled staff has increased slightly.

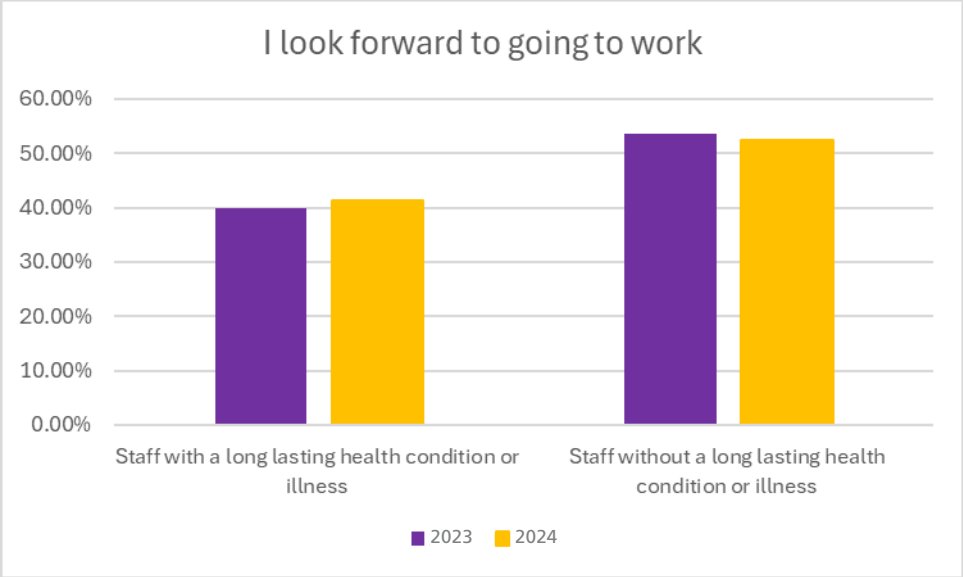
This report shows an improving experience for disabled staff in nearly all areas of the Trust. Closing the gaps between disabled and non-disabled staff will move the Trust closer to an inclusive culture where everyone feels like they belong, can thrive, knows that they add value and feels valued.

These metrics also demonstrate that there are still disparities in the experiences of disabled and non-disabled staff, such as experiences of bullying, harassment and abuse, pressure to work when not well enough to do so, and belief that the Trust provides equal opportunities to career progression. In these areas, disabled staff are reporting poor experiences at higher levels than non-disabled staff.

Mental Health and Wellbeing

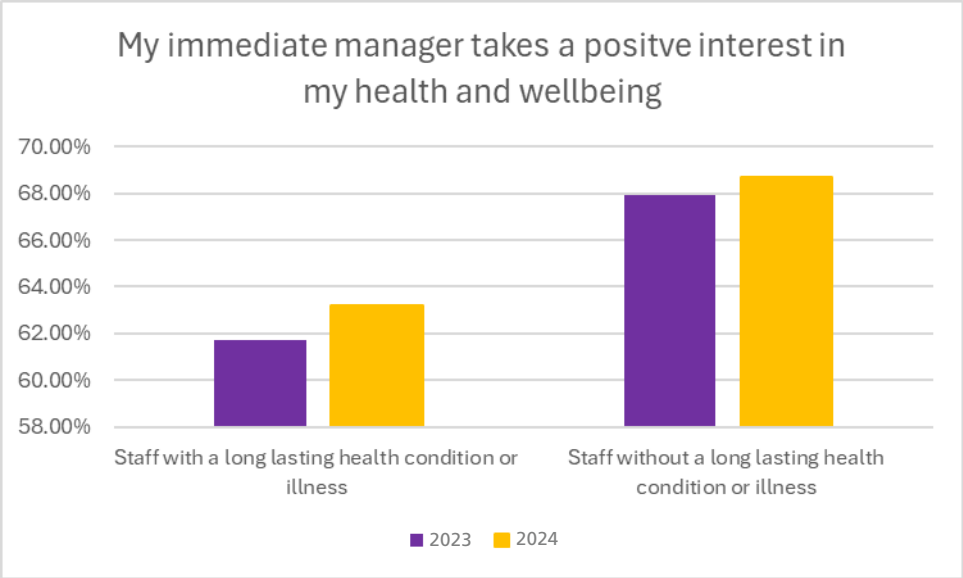
In April 2025, UHB achieved Disability Confident Leader status as part of the Disability Confident scheme. This achievement reflects the culmination of significant work to ensure the Trust met the high standards expected of a Disability Confident Leader organisation. Several teams have contributed to this accreditation including Healthcare Careers and Development, Human Resources, Inclusion Team, Occupational Health, Procurement and Recruitment. This collaborative approach demonstrates that creating an inclusive culture is the responsibility of everyone at UHB. As part of this accreditation, UHB has committed to publishing additional data on mental health and wellbeing within our WDES report. This is the first year that we have published this, and data taken from ESR will be compared year on year moving forward. Data taken from the 2024 National Staff Survey allows us to compare with previous years.

I look forward to going to work



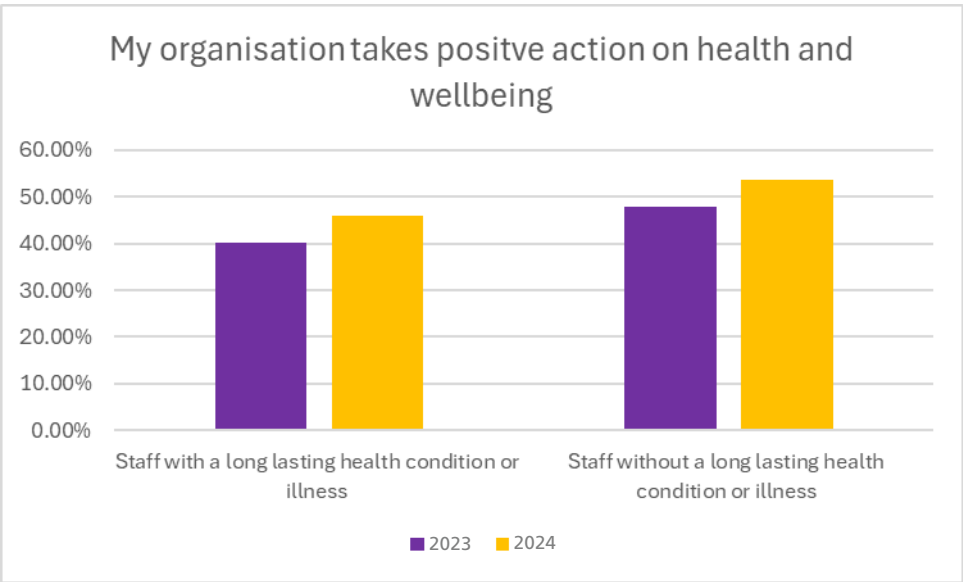
Staff reporting that they look forward to going to work, as taken from the NSS, has reduced slightly for the overall Trust to 49.67% from 50.27%. In the last 12 months, this metric has improved for disabled staff to 41.29% from 39.79% which compares to 52.34% of non-disabled staff.

My immediate manager takes a positive interest in my health and wellbeing



All staff agreeing that their manager takes a positive interest in their health and wellbeing, as taken from the NSS, has increased to 67.37% from 65.77%. Disabled staff reporting this same metric has increased to 63.19% from 61.72% compared to 68.71% of non-disabled staff.

My organisation takes positive action on health and wellbeing



Staff reporting that the Trust takes positive action on health and wellbeing, as taken from the NSS, has increased to 51.25% from 45.26% last year, which is the first time more than 50% of the Trust has agreed with this statement since the question was introduced in 2021. Disabled staff report this at a reduced rate but has increased to 46.00% from 40.31% and compares to 53.60% of non-disabled staff.

I would recommend my organisation as a place to work

The number of overall staff stating that they would recommend UHB as a place to work, as taken from NSS, has increased to 53.16% from 49.51% and for disabled staff this has increased to 42.97% from 40.79%

As taken from ESR, the overall disability declaration rate is 5.60% (1422), of which 13.01% (197) of those that have shared their disability have stated mental health as their specific disability.

Our in-house Occupational Health and Wellbeing Team includes a counselling service and Psychiatrist. Between April 2024 and April 2025, 88 staff attended appointments with our Psychiatrist of which 50 were new referrals. Our counselling service saw 562 new referrals and completed 1770 review appointments. In addition to solution-focused therapy as the primary modality, the service has expanded the range of therapy types offered, including menopause-CBT as a specialised intervention for menopause-related psychological difficulties. The service is developing an integrated step-up/step-down model where trained wellbeing officers will support colleagues at work and upon their return to work after a period of absence.

The Wellbeing Hubs on our four hospital sites receive on average almost 7000 visits per month and wellbeing staff speak to over 1200 staff per month on wards and departments. These conversations ensure that staff receive the right support and signposting around topics such as mental health, domestic abuse, bereavement and family issues.

Additionally, the Occupational Health and Wellbeing Teams are piloting a one-hour training session for managers titled Psychological Wellbeing: Supporting Your Team. This session is designed to raise awareness of psychological wellbeing in the workplace and equip managers with practical strategies to support their teams. It covers key topics such as emotional support, stigma reduction, emotional first aid, and creating safe spaces for wellbeing conversations. The training also introduces tools and techniques to help managers engage effectively with staff, promote open dialogue, and respond appropriately to wellbeing concerns. The session is being refined through initial team trials and HR support, with plans to roll it out Trust-wide from August 2025. It will be accompanied by a practical handout with tips, signposting to resources, and referral pathways. The training will also align with the new sickness policy, contribute to the actions in response to the Trust's Learning from Suicide Review, and form part of the Management Essentials Toolkit. Overall, it aims to embed a culture of psychological safety and proactive wellbeing support across all teams.

There have been significant improvements in nearly all of our wellbeing measures compared to last year and none that have worsened by more than 1%. To continue to support the mental health and wellbeing of staff, the Occupational Health and Wellbeing Teams have committed to completing the below actions by August 2026:

- Roll out Psychological Wellbeing: Supporting your Team training for managers;
- Review the Trust-wide wellbeing offers alongside Wise Council members to ensure it meets the needs of staff;
- Develop a network of peer-to-peer wellbeing champions to enhance the wellbeing offer and support colleagues;
- Better understand how health inequalities affect our different groups of staff, including disabled staff, and focus on health promotion and prevention to address these issues.

Work We Have Delivered

The 2025 WDES report shows consistent progress, continuing positive trends from previous years. These improvements demonstrate the impact of targeted interventions and actions that were set out in the 2024 WDES. Updates on these actions are below.

Disability Declaration

ESR Access

Disability data is recorded on ESR, however we know that we have a large group of staff who are not regularly accessing ESR, or do not have a private location to update their disability status. To support these staff, we have created a new stand-alone online form that staff can use to share their disability status. This can be accessed via a link or QR code from any device, and once completed automatically updates ESR. The QR code has been shared virtually and added to posters. This makes the process of sharing a disability more accessible and has contributed to our increase in the overall disability declaration rate. Between the launch in March 2025 and the end of June 2025, 221 staff have updated their disability status using this method.

Unknown Data

We have also worked to reduce the level of 'unknown' data we hold for staff on disability. The unknown data is:

- where we hold no data;
- where staff have not answered, 'yes', 'no' or 'prefer not to say', when asked if they have a disability.

In April 2024 this accounted for 17.79% of the workforce. Although we ask staff about their disability status as part of the annual appraisal we have only imported 'yes' answers into ESR previously.

We retrospectively added over 9000 data points from appraisals, where staff had answered 'no' or 'prefer not to say' to reduce the amount of unknown data. The Recruitment Team performed an audit of new starter paperwork to ensure all data had been input, which added an additional 1000 entries. This has successfully reduced the amount of unknown data from 17.79% down to 8.89% as of May 2025 which is a significant reduction and has improved the quality of our overall reporting on disability.

This activity may have inadvertently overwritten some instances where staff shared they had a disability on ESR, but said they did not have a disability during their appraisal, reducing the disability declaration rate. In response, this additional data is no longer being imported and may account for the slightly slower than expected growth in our overall disability declaration rate.

We have identified the teams with the lowest disability declaration rates and proactively contacted them, sharing resources and asking them to focus on disability declaration and data collection. This has seen an increase in declaration rates and a decrease in unknown data in some of our lower performing specialities.

These proactive actions ensure that we have good quality data when reporting on disability, that we are focusing additional efforts in the areas with the lowest data and are seeing the disability declaration rate increase consistently. This links to Metric 1 – Representation.

Recruitment

Disability Confident scheme

Achieving Disability Confident Leader status provides external validation that our practices and processes are inclusive. As part of the feedback from our assessor, the Business Disability Forum, several areas of best practice were highlighted including:

- Our comprehensive WDES action plan;
- Our workplace adjustment guidance document;
- That we have been reviewing internal recruitment data;
- The work being done within procurement and especially the supplier review meetings;
- Our staff networks, noting the clear role descriptions for disability and neurodiversity network chairs;
- The way that we discuss disability and offer workplace adjustments throughout our recruitment and onboarding process.

Few public sector organisations have achieved this status, and it reflects the work that has been completed to improve the experience for disabled staff at UHB.

Workplace adjustments

We have reviewed how workplace adjustments are managed within the recruitment and interview processes, with the following improvements being made:

- We have a new and updated statement on NHS Jobs about disability support within the Trust;
- We have refined and made consistent the definition of disability throughout the recruitment process, including mental health and neurodiversity, making it clear that a formal diagnosis or to be "registered" disabled is not required;
- We have updated our recruitment intranet and internet pages to display our new Disability Confident Leader logo and with details of support available to disabled colleagues and applicants;
- All candidates are encouraged to share their disability and request workplace adjustments if required multiple times when contacted by recruitment and their hiring manager throughout the onboarding process;
- The Inclusion Team continues to provide guidance to our recruitment colleagues on workplace adjustments for disabled applicants and recruiting line managers;

- Managers are clearly advised and encouraged to use the onboarding process as a key opportunity to discuss disability with candidates and to understand if adjustments are required;

- Where new starters are asked to attend a site, e.g. ID checks, we proactively address access issues making it clear that candidates can request alternative, accessible locations if required;

- Workplace adjustments and disability declaration support form part of the questions in our 100-day feedback survey sent to all new starters.

We have received feedback from disabled new starters within the Trust that they chose to work at UHB due their positive experience of the recruitment process.

Training courses

Increased knowledge about disability, workplace adjustments and bias for all our staff is one way to ensure that our disabled staff have a positive experience at UHB. To achieve this, we have several training courses available.

- In May 2025, updated inclusion training went live and is mandatory for all new starters and staff who have been with the Trust for more than three years. Prior to this the only mandated inclusion training was as part of corporate induction. This new, 3 yearly refresher training, ensures that staff receive up to date inclusion training on a regular basis, including key information about disability. This has been communicated via an all-staff email and is seen as an alert via easy learning. Staff will receive email alerts from August to complete and the Trust will report on this alongside other mandatory training from September 2025. The Inclusion Team are planning to deliver bespoke sessions to those teams without regular computer access in 2025. This forms part of our strategic approach to sustaining cultural change by ensuring continued awareness, reflection, and accountability across the workforce.

- Having successfully written and launched this updated training, we are now able to move forward with an updated inclusion recruitment training package for all recruiting managers to complete. The current training is being reviewed, and additional content being identified. This will now be completed by December 2025.

- "How We Behave Matters" is part of our 2025 Year of Leadership and focuses on inclusive behaviour, workplace culture and psychological safety. Our ambition is to train all 4,000 people managers across UHB. Since Phase 2 began in April 2025, 1,016 leaders have completed the training, with seven more in-person workshops scheduled across our sites between now and September to support inclusive leadership and embed the Behavioural Framework in everyday practice.

- The Change Maker programme, co-designed with Wise Council members and piloted in August 2024, supports staff in identifying and challenging bias, recognising privilege, and building allyship across the Trust. To date, 107 Wise Council members have completed the programme.

- Our successful Disability Champion Training which supported over 600-line managers to become disability champions, has been developed into an online course, ensuring it is accessible to all staff, with 138-line managers enrolling between October 2024 and July 2025.

Fair Recruitment Experts (FRE)

Fair Recruitment Experts (FREs) are a specially trained group who support recruitment panels to ensure fairness and consistency in decision-making. As part of a joint initiative with the wider People Directorate, one-to-one conversations were held with all previous FREs to understand their capacity and interest in continuing. This has resulted in a highly skilled and focused cohort, positioned to help maintain momentum as this important programme evolves.

The FRE process is currently being redesigned, including the development of dedicated web pages and automated functionality to match FREs with suitable recruitment panels. These enhancements will support a more seamless and consistent experience as the programme scales.

From July 2025, FREs will be appointed to all Band 8A and above recruitment panels, supported by new training currently in development. Additional cohorts will be recruited throughout the year, with the aim of expanding the FRE pool to 100 experts by 2026.

Central pathway for the implementation of workplace adjustments

Our central pathway for the implementation of workplace adjustments, including our dedicated Workplace Adjustments Officer, continues to support disabled staff across the Trust. This includes a significant amount of support for staff and line managers, signposting and advising on relevant processes. In October 2024 we expanded the pathway to be able to provide recommendations from our Occupational Health and Ergonomics teams. Between October 2024 and April 2025, the central pathway supported 36 disabled colleagues with Access to Work reports and an additional 34 disabled colleagues receiving Ergonomics recommendations. This has included accessible software such as ‘Dragon Medical One’, ‘Text Help Read and Write’ and ‘Grammarly’, as well as physical items such a ‘loop’ earplugs, ergonomics chairs and ‘remarkable pads’. Colleagues have started a pilot study, exploring if the implementation of universal adjustments for all candidates alongside workplace adjustments for disabled candidates to the interview process has a positive impact on the outcomes for disabled candidates. This is being trialled within the therapy department at the Queen Elizabeth Hospital and is due to report on its findings by the end of 2025.

The metric looking at the relative likelihood of disabled staff being appointed, remains the same which is our aim when reporting on the recruitment experiences of disabled candidates. Successfully attracting and recruiting disabled talent demonstrates that we have a fair and accessible recruitment process, that our inclusion training for line managers is having the desired impact and that where used, our centralised workplace adjustment process is effective. This in turn has been reflected in more disabled staff reporting equal opportunities to career progression and feeling valued. The actions and updates above, ensure a continued focus on the recruitment experiences of disabled candidates (metric 2) throughout 2025, which in turn contributes to the improved experience for disabled staff at UHB.

Bullying, Harassment and Abuse

Reports of bullying, harassment and abuse

Working with the Disability and Long-Term Health Condition and Neurodiversity staff networks, we asked colleagues to review our bullying, harassment and abuse reporting mechanisms for accessibility. This was discussed at multiple staff network meetings, emailed as a request to staff network members and shared in our internal staff notification 'In The Loop', and via an all-staff email. We received feedback from several staff who generally reported positively, with a few practical suggestions to improve accessibility, and further signpost to more information about workplace adjustments and wellbeing support. Suggested improvements were made, and we now have assurance that the reporting mechanisms are more accessible for all our staff.

Staff Experiences

The National Staff Survey provides annual data about experiences of bullying, harassment and abuse, but does not provide additional insight into these experiences. To better understand this data, we launched a survey which asked staff to discuss their experiences of bullying, harassment and abuse to enable us to proactively put interventions in place to address emerging themes. We received 19 responses, all of which provided a good level of insight into each specific experience. When combined, these reports demonstrated concerns with the response that disabled staff would receive if they reported issues. In response to this, comprehensive content has been included within the newly launched Management Essentials Toolkit, providing line managers with key information about disability, reporting of concerns and how to effectively respond to these.

Employee Relations (ER) Development Programme

As part of our culture and inclusion improvement programme on transformative practice, a series of focussed development days were arranged for the Employee Relations Team to support with the challenging case work they manage. The Chief People Officer agreed with the Hospital Executive Teams and the Board to withdraw all casework practitioners from practice for one day per month, for a 6-month focused development programme including a mix of training and case de-briefs. These sessions which took place between October 2024 and March 2025, covered key themes including empathy, race equity, sexual safety, and medical workforce challenges. Following positive feedback, the Trust is exploring how this offer can be developed into a regular part of the ER training programme, supporting more inclusive and informed decision-making across casework. By increasing the knowledge and understanding of our ER practitioners on disability, the Trust will be able to better respond to and support disabled staff across the Trust. A full day training session was delivered to the ER practitioners in March 2025 and was focused on the lived experiences of disabled colleagues, supported by our staff networks. There was a focus on neurodiversity, including bespoke training on Autism and how to support neurodiverse colleagues in the workplace. Attendees were asked to review policies and procedures through activities aimed at increasing the accessibility of these processes and improving the experiences of our disabled colleagues. Given the high operational pressures faced by the team, the programme aimed to create space for reflection and to reinforce the importance of inclusive, person-centred outcomes. Content also addressed nuanced issues such as discrimination, workplace adjustments, and the role of Chaplaincy and Inclusion in supporting fair and compassionate ER practices. Feedback was excellent and has highlighted the need for this to be a regular training session to ensure the

Employee Relations practitioners are supported with up-to-date inclusion information throughout the year.

Staff Networks

Our staff networks provide excellent support to staff and offer advice on bullying, harassment and abuse. Ensuring our staff networks and chairs are as effective as possible, can improve early intervention and resolution. A draft CPD planner has been written which aligns with the staff network chairs 2-year term, exploring key skills such as leading meetings and supporting staff. It also connects chairs with a national network of chairs and encourages staff networks to set robust actions and formalise succession planning.

Violence Prevention and Reduction Standard

The Trust continues to prioritise a safe and respectful working environment through its commitment to the national Violence Prevention and Reduction Standard. This includes a specific focus on harassment, abuse, and aggression experienced by staff, with attention given to the disproportionate impact on disabled colleagues, as highlighted in WDES indicators.

An integrated, intersectional action plan has been developed to bring together workstreams that address violence, harassment, and discrimination. This includes alignment to the WRES, WDES, and WWES. The plan is informed by a range of internal data sources, such as RADAR reports and the National Staff Survey, and shaped through engagement with staff networks, including the Disability or Long Term Health Condition and Neurodiversity Networks. Key priorities include improving local reporting pathways, strengthening support for managers, and providing accessible training resources. This includes mandatory DEI training introduced in 2025, which must be completed every three years.

The action plan is overseen by a dedicated steering group that meets regularly to review progress and identify areas for improvement. Site-level People and Culture groups are also supporting implementation by developing localised responses based on specific needs and feedback. This work forms part of a wider effort to embed preventative and inclusive practice across the Trust and responds directly to the experiences of disabled staff.

Equal Opportunities

There has been a difference between disabled and non-disabled staff reporting equal opportunities to career progression since UHB started reporting an annual WDES. This perception also feeds into the lower engagement score for disabled staff. Addressing these perceptions through initiatives such as, additional pay gap reporting, accessing talent management programmes for underrepresented groups and Trust-wide pay gap data, ensures a targeted approach to reducing these disparities and has already seen improvements in this year's data.

Possibilities Beyond Limits (PBL)

The UHB talent management framework is supplemented by the PBL Programme and Managers Handbook. PBL is a development programme designed by the Integrated Care System (ICS) and is open to colleagues at bands 6 and 7 who wish to progress to more senior roles. We have

specifically advertised this program to our disabled colleagues who we know are less represented at senior roles. Seven members of UHB staff have enrolled across 2 cohorts, with 3 sharing that they have a disability, initial feedback has been very positive. The first cohort are currently working on their stretch assignments, which includes an assignment exploring how we can make it safe and meaningful for staff to speak up and raise concerns.

Management Essentials Toolkit

The Management Essentials Toolkit was launched in April 2025. As part of our Culture and Inclusion Improvement work and valuable insights from the Wise Council, it is clear that strong, supportive management is essential to enhancing staff experience and fostering a positive working environment. The toolkit includes bespoke content to support disabled colleagues, including information about disability leave, workplace adjustments and staff networks, ensuring that our managers have quick access to the tools and processes they need to support our disabled staff.

Recruitment

Following a review of our internal recruitment figures, we discovered for internal vacancies, our disabled colleagues are just as likely to be successful as our non-disabled colleagues and that 80% of colleagues who apply for internal vacancies are successful. This suggested that when disabled colleagues applied, they were very likely to be successful and therefore a skills profile was not required. Instead, we want to encourage more disabled staff to apply for roles and monitor the recruitment data to sustain high levels of success. This data is now provided on a quarterly basis to the Inclusion Team and reported to site and clinical delivery group level People and Culture meetings. To encourage disabled colleagues to apply for roles, the Inclusion and Recruitment Teams have co-produced a disability recruitment pack which is attached to all job adverts giving clear guidance on workplace adjustments during the recruitment process, encouraging disabled applicants to apply for roles. We will monitor the number of applications from disabled colleagues and the overall success rate.

Pay Gaps

This year, the Trust is broadening its pay gap reporting to include ethnicity and disability alongside gender, reinforcing our commitment to an intersectional approach to equity. In response, a dedicated Pay Gap Steering Group was established to analyse the latest data (from May 2025) and to lead coordinated actions. This group plays a pivotal role to ensure that appropriate interventions are shaped by meaningful insights and align with our People objectives. By incorporating actions from pay gap plans into our governance, we will enhance transparency, strengthen accountability, and deliver measurable progress to closing our pay gaps.

Inclusive Access Steering group

We have created an Inclusive Access Steering group which focuses on accessibility across the Trust aligned with Inclusion Objective 3 – Improving Access. This group provides a space to resolve access concerns raised by staff and continue to improve accessibility at UHB.

Engagement

Wise Council

We regularly review the membership of the Wise Council, which acts as an advisory group to the Culture and Inclusion Delivery Group. Our latest data showed that 14.41% of the Wise Council had shared that they have a disability, which is significantly higher than the declaration rate shared within this report from ESR (5.6%). This suggests a good number of disabled staff are joining the Wise Council, in higher numbers than disabled staff are represented in the wider workforce and have an opportunity to contribute to the inclusion and culture work at UHB.

Disability or long-Term Health Condition and Neurodiversity Staff Networks

Our Disability or long-Term Health Condition and Neurodiversity Staff Networks contribute significantly to all of our work recorded in this report. Some of their recent activity includes:

- Recruiting Identity Representatives;
- Highlighting key concerns and successes at the Trust's Culture and Inclusion Delivery Group chaired by our CEO;
- Marking Neurodiversity Celebration Week with stands containing information about different neurodiverse conditions;
- Celebrating Dyspraxia Awareness Week in October 2024 with a talk from an external expert with lived experience;
- Holding the first Neurodiversity Conference, with a range of internal and external speakers. The event was attended by 180 colleagues and evaluated well, with all session being recorded and shared with colleagues who could not attend on the day;
- Celebrating International Day of Person's with a Disability by speaking to the Trust at CEO Connected, and organising stands on all of our sites, speaking to staff about disability and the support available through the network and wider Trust;
- Championing and testing accessible software to make it available to all staff. For example, recently, Colour Veil software has been made available to all staff, which adds a colour filter over a screen. It helps with eye strain, Dyslexia, Scotopic Sensitivity Syndrome, or Visual Stress.

Partnerships

As part of our ambition to become a centre of excellence, UHB is increasingly being approached by other Trusts for guidance and to support the sharing and adoption of best practice. We are actively engaged in the Birmingham and Solihull Integrated Care System (BSOL ICS), aligning with regional priorities to advance workforce disability equality and inclusion. Our contributions to system-

wide initiatives focus on improving recruitment, career progression, and the overall experience of disabled staff.

In addition, through our membership in the Shelford Group, UHB collaborates with other leading NHS providers to exchange insights and innovative approaches. This engagement helps shape our local strategies by connecting national equity discussions to our organisational context

Equality Impact Assessment process and toolkit

The Trust's new Equality Impact Assessment procedure and toolkit was launched in May 2025, and includes a health inequalities assessment. This ensures that any changes to policy or process that impacts our staff, patients of visitors are considered through an inclusion lens, and we will be able to clearly demonstrate that we have considered the impact on all groups, including those with a disability. This new process will help us to make more inclusive decisions as a Trust. The governance of this new process allows regular reviews, quality assurance and site-based reports to be produced.

It is essential that disabled staff are key stakeholders in the work outlined in this report and are able to co-produce the approaches that we are taking, ensuring these interventions have the intended impact. This links to metric 9 – engagement. A strengthened governance model is in place to monitor the quality and consistency of EIAs through site-level reporting and quarterly review. This process supports the Trust's commitment to equity and inclusion and ensures disability equity considerations are embedded into leadership decision-making. It also contributes to delivery of the WDES, particularly indicators focused on organisational culture and leadership accountability.

Work We Will Deliver

The Trust has set its Inclusion objectives with clear milestones and measures which align to the priority ambition and strategic objectives of its People Priorities within the Trust strategy. The Trust's Inclusion objectives are aligned to the People Promise, The Trusts Behavioural Framework, Anti-Racist Organisation Statement, Sexual Safety Charter; WRES, WDES, WWES and the High Impact Areas of the NHS EDI Improvement Plan.

WDES Action Plan

The table below outlines a set of interdependent actions the Trust will implement as part of a collaborative and inclusive approach. These actions have been co-produced through meaningful engagement with our Disability or Long-Term Health Condition and Neurodiversity staff networks, the Wise Council, Staff Side representatives, and colleagues from across the wider Trust. Each action will be regularly reviewed and adapted in response to real-time data and evolving needs.

Disabled staff remain at the heart of this work, actively shaping the design and delivery of interventions to ensure they are relevant, practical, and sustainable.

Theme (Metric)	Aim	Action	Teams Responsible	Why are we doing this?	Timescale
Accessibility **(1 / 7 / 8)**	We will ensure that UHB is an accessible employer where disabled staff can access their place of work easily and receive workplace adjustments quickly. We will increase the disability declaration rate to 10% and the number of staff saying they have the workplace adjustments they need to 80%.	We will continue to improve our disability declaration rate to 10% by working with specialities with the lowest disability declarations rates and highest levels of 'unknown' data.	All teams with support from Inclusion.	Continuing to improve the declaration rate is a sign of a disability confident culture where disabled staff feel free to discuss their disability, its impact and any workplace adjustments.	December 2025
		We will ensure that UHB is accessible for staff, patients and visitors. An Inclusive Access Steering Group will continue to work towards an accessible UHB and address current access issues quickly. We will monitor the number of access issues reported to this group.	Estates, Health and Safety, Inclusion	Ensuring issues of physical accessibility are reduced and dealt with quickly when reported, will improve disabled staff feeling valued and help UHB to recruit and retain disabled talent.	December 2029

Recruitment **(2)**	We will ensure that our recruitment processes are fair and robust by moving metric 2, closer to a figure of 1.00.	We will review the inclusion component of the recruitment training to enable better decision-making and identify bias in the recruitment process.	Recruitment, Inclusion	Ensuring that recruiting managers are aware of how to talk about disability, implement workplace adjustment and signpost to support will increase the confidence of disabled candidates and new starters that UHB is a Disability Confident Employer.	December 2025
		As a joint Inclusion and Talent initiative, we will grow and enable the Fair Recruitment Experts (FRE) to identify and address biases in recruitment and promotion processes.	Talent, Inclusion	FREs add additional scrutiny to the recruitment process and provide assurance that our practices are fair.	April 2026

Career Progression **(5 / 7)**	We will increase the number of disabled staff reporting equal access to career progression from 44% to 50% and the number of disabled staff reporting that they feel valued by the organisation from 30% to 40%.	We will review the appraisal training for line managers and ensure it includes up to date disability information. We will ensure that more line managers at Band 8A and above attend this training.	Communications, Education, Inclusion.	Effective annual appraisals are a key way to ensure that disabled staff have clear opportunities to develop new skills and look to progress their career in a structured way. Supporting disabled staff with their career goals will increase reports of feeling valued by the Trust. Updated training for line managers, will improve the quality of appraisals for disabled staff. We also know that we are less diverse at more senior bands, and that fewer line managers at Band 8A and above attend appraisals training.	April 2027
		We will create our first Disability Pay Gap reports, alongside our Gender and Ethnicity Pay Gap reports.	Inclusion	Understanding and reporting on our disability pay gap will allow us to take identify any levels of disparity.	September 2025
		We will reduce the high number of "unknown" data held by the ER teams for staff going through the capability process by improving the data recording process.	Employee Relations, Inclusion	Where we have high number of "unknown" staff in the capability processes, it reduces the overall quality of our data and restricts our ability to support disabled staff.	December 2025
		We will review how bank staff are given the opportunity to discuss their disability and workplace adjustments, to give assurance that disabled staff are not disadvantaged when working on the bank.	Temporary Staffing, Inclusion	Many substantive staff also work for the bank. Feedback from staff network members has been that bank shifts allow disabled staff to work more when able to do so, and that the processes to support disabled staff working for the bank could be improved.	December 2025

Targeted Intervention **(All)**	We will be data driven in creating bespoke interventions to improve the experience for our disabled staff. We will reduce the disparity in engagement score between our disabled and non-disabled staff.	We will look closer at the WDES metrics, by specialty. This will allow us to identify the best and worst performing teams and work with them to create targeted interventions to make improvements in the areas these are the most needed.	Inclusion	There will be specific challenges that specialities face when it comes to, for example, recruitment, representation or career opportunities. By better understanding these challenges we can provide support and by doing so improve the Trust wide WDES metrics.	December 2026
Continuous communication and engagement **(All)**	We will continue to communicate the resources that are available to support disabled staff and their line managers.	We will create a bespoke communication plan that ensures that our disabled staff are represented within UHB campaigns, and all staff are reminded and educated about disability related support.	Communications, Inclusion	Although there is a significant amount of support available to disabled staff, we know that some are not aware of this yet. By further communicating this to all staff, we can continue to build on the progress demonstrated in this report.	

Conclusion

To embed WDES, WRES and WWES across the Trust and to instil a sense of responsibility and accountability to all, the Trust is taking a business-led approach to delivery against these standards supported by the Inclusion Team and the wider People Directorate. In taking an evidence-led approach to our work, we have identified disability, race, and women as priority areas of work and a golden thread through delivery of our inclusion objectives. From the analysis and critical findings from the data, it is clear that more work must be undertaken to further improve our performance.

The Trust is continuously striving to improve the data set out by the WDES. The metrics outlined in this report cover all aspects and areas of the Trust, these latest findings show improvements, or stability in all areas, and outlines work that has contributed towards our progress. A key driver of this has been the restructure of the Inclusion Team to a Business Partner model that a aligns to the devolved site based operating model. We continue to embed this new model and work towards seeing these measures improve year on year.

Progress against our WDES metrics and performance against our strategic People objectives is overseen by the Chief People Officer, and reports into the Culture and Inclusion Delivery Group, chaired by the Chief Executive Officer, where initiatives and ideas to progress this agenda are continually discussed by its diverse membership. All of the progress against our cultural transformation programmes is then reported up by our Chief People Officer to the People and Culture Committee. The growing members of our Wise Council together with our staff networks, play a critical role in providing ongoing scrutiny and ideas for improvement.

Based on the innovative work to improve the experiences of disabled staff at UHB, the Trust has been recognised through national conferences and awards. Representatives of the Trust were asked to deliver the keynote speech at the annual NHS Employers Disability Summit. This talk explored our recent journey to improve the culture and experience of working at UHB, with a focus on our disabled colleagues. Additionally, we were part of a panel discussion exploring best practice around workplace adjustments and several of our staff members were filmed in advance talking about their positive experiences working at UHB. This is the first time that UHB has been asked to take a leading role in this summit, demonstrating our good standing as a Disability Confident Leader. Additionally, the Trust was delighted to be awarded a Highly Commended award in the Disability Confident, Public Sector category at the recent RIDI awards.

In pursuit of achieving our strategic ambition, we are striving to make the Trust a centre of national excellence for inclusion where our practices and behaviours are recognised as exemplary in healthcare. We have subscribed to Inclusive Companies in order to benchmark ourselves with organisations with a reputation for the highest standards in equality, diversity and inclusion and are working at pace to position our Trust within the Top 50 Inclusive Employers.

Appendix 1

The table below shows the year-on-year figures for all WDES metrics from 2020 to 2025. Metrics that use the National Staff Survey are only available up to 2024. The National Staff Survey results for 2025 will not be available until March 2026.

	WDES Metric		2020	2021	2022	2023	2024	2025
1	Percentage of disabled staff in the workforce.	Overall	3.00%	3.00%	3.10%	3.76%	4.29%	5.60%
		VSM	1.19%	3.23%	2.67%	2.99%	5.80%	3.39%
2	The relative likelihood of non-disabled staff being appointed from shortlisting compared to disabled staff	Relative likelihood	1.40	1.35	1.63	1.05	1.16	1.17
3	The relative likelihood of disabled staff entering the formal disciplinary process compared to non-disabled staff	Relative likelihood	1.70	0.00	7.04	5.15	0.00	0.00
4a	Percentage of staff experiencing bullying harassment or abuse from patients or service users.	Disabled	27.70%	29.85%	30.59%	28.72%	26.83%	n/a
		Non-Disabled	22.88%	21.25%	23.10%	23.00%	21.92%	n/a
4b	Percentage of staff experiencing bullying harassment or abuse from managers	Disabled	19.11%	18.99%	16.60%	20.68%	16.43%	n/a
		Non-Disabled	10.95%	9.81%	9.61%	11.02%	9.19%	n/a
4c	Percentage of staff experiencing bullying harassment or abuse from other colleagues	Disabled	26.40%	25.42%	27.71%	29.60%	27.92%	n/a
		Non-Disabled	18.17%	16.24%	17.35%	19.19%	18.68%	n/a

4d	Percentage of staff that reported bullying, harassment or abuse when they last experienced it.	Disabled	48.95%	45.85%	44.81%	48.35%	53.45%	n/a
		Non-Disabled	47.74%	46.09%	43.92%	47.25%	47.59%	n/a
5	Percentage staff believing the Trust provides equal opportunities for career progression.	Disabled	45.63%	44.49%	45.71%	41.87%	44.23%	n/a
		Non-Disabled	54.71%	51.87%	52.96%	52.17%	52.60%	n/a
6	Percentage of staff saying they have felt pressure to come to work when not well enough to do so.	Disabled	32.76%	32.27%	30.89%	32.23%	28.25%	n/a
		Non-Disabled	24.91%	24.18%	21.31%	19.89%	17.62%	n/a
7	Percentage of staff saying they are satisfied with the extend the organisation values their work.	Disabled	36.66%	26.80%	27.73%	28.06%	30.79%	n/a
		Non-Disabled	46.53%	36.00%	37.15%	40.82%	43.42%	n/a
8	Percentage of disabled staff saying their employers has made reasonable adjustments to enable them to carry out their role.	Disabled	72.60%	65.80%	66.37%	69.27%	71.79%	n/a
9	Staff engagement score.	Disabled	6.49	6.04	6.08	5.96	6.10	n/a
		Non-Disabled	6.93	6.65	6.60	6.74	6.79	n/a
10	Percentage difference between the Trust's Board Membership and overall disabled workforce.	Overall Board	-3%	-3%	-3.1%	+0.54%	-4.5%	+2.4
		Voting Board	-3%	-3%	-3.1%	-3.8%	+6.91%	+5.51
		Exec Board	-3%	-3%	-3.1%	-3.8%	-4.2%	+2.09