

Gender Pay Gap Reporting (GPG) for the year 2022-2023

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Purpose of Report	This report sets out an analysis of the Trust's Gender Pay Gap Report for 2022-2023
Executive Summary	
<ul style="list-style-type: none"> Gender Pay Gap reporting is a requirement under the Equality Act 2010 and is based on data from the previous year. The Gender Pay Gap is not the same as unequal pay. The Gender Pay Gap is the difference between the average pay of men and women in an organisation. BHFT's Median Gender Pay Gap in 2022-2023 was 16.46%. This represents a decrease of 0.55% from 17.01% from 2021-2022, moving in the right direction. BHFT's Mean Gender Pay Gap in 2022-23 is 16.96%, this represents a 3.49% decrease from 2021-2022 moving in the right direction. The Gender Pay Gap data will be published on the Trust's website. The information should remain on the Trust website for a period of at least three years, beginning with the date of publication. The reasons for the Gender Pay Gap can be varied and complex, some of which are within our control and some will be more systemic within society. One of the major reasons for the pay gap is that there is a higher proportion of males in more senior bands within the Trust. Females represent 83.25% of our workforce yet only represent 74.19% of the workforce in the upper quartile; males represent 16.75% of our workforce but are overrepresented in the upper quartile (25.81%). This means that females are underrepresented by 9.06% in the senior bands and males overrepresented by 9.06%. The proportion of females in the lowest quartile of pay (87.05%) represents a slight increase from 86.8% in the previous year: a higher figure than the proportion of females employed in the Trust (83.25%). The Trust is committed to continuously reviewing our systems, practices and processes to ensure we are reducing our Gender Pay Gap where practically possible and will work closely with our Diversity Steering Group, staff networks, Trade Unions and other stakeholders to develop an effective action plan. This action plan will sit within the Trust's overall EDI action plan and agreed priorities. Before we develop a more dedicated and detailed action plan in collaboration with our stakeholders, we would like to engage a statistician to enable the Trust to better understand the drivers for the pay gap so we can know what is within our control and what is systemic and what actions will be effective to reduce the pay gap. 	
Recommendation	The Board is asked to acknowledge the report and subsequent approach to develop actions.

1. Reporting Requirement

The gender pay gap audit obligations are outlined in The Equality Act 2010 (Gender Pay Gap Information) Regulations 2017. As an organisation that employs more than 250 people and listed in Schedule 2 to the Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017 we must publish and report specific information about our gender pay gap. The report is always retrospective based on the last financial year period.

- a) The gender pay gap can be defined as the **difference between the median hourly earnings of men and of women**. This is distinct from equal pay, which refers to men and women in the same job earning an equal wage.
- b) Median and mean is what we are required to report on. Median is the middle value of the arranged set of data. Mean is the total of the numbers divided by how many numbers there are.

From a purely statistical standpoint, the median is considered to be a more accurate measure as it is not skewed by very low hourly pay or very high hourly pay i.e. such as medical staff who are on much higher salaries than other professional groups. However, we know in the gender pay gap for example the very high paid people tend to be men, and the very low paid people tend to be women, and the mean paints an important picture of the pay gap because it reflects this issue. It is therefore good practice to use both the mean and the median when analysing or reporting on the pay gap.

2. Our Gender Pay Gap Report in BHFT

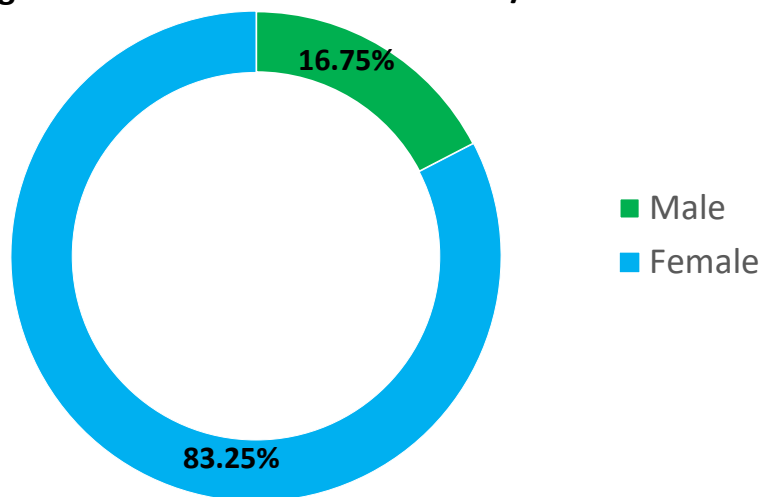
Our Gender Pay Gap report for 2022/2023 contains a number of elements:

- The specific information published on the government website for the snapshot date of 31st March 2022
- A comparison with the 2021/2022 data
- An analysis of the pay gap across specific staff bands and quartiles within BHFT
- Recommendation as to future action to support reducing the Gender Pay Gap where possible

3. Our Gender Profile in BHFT – 2022 / 2023

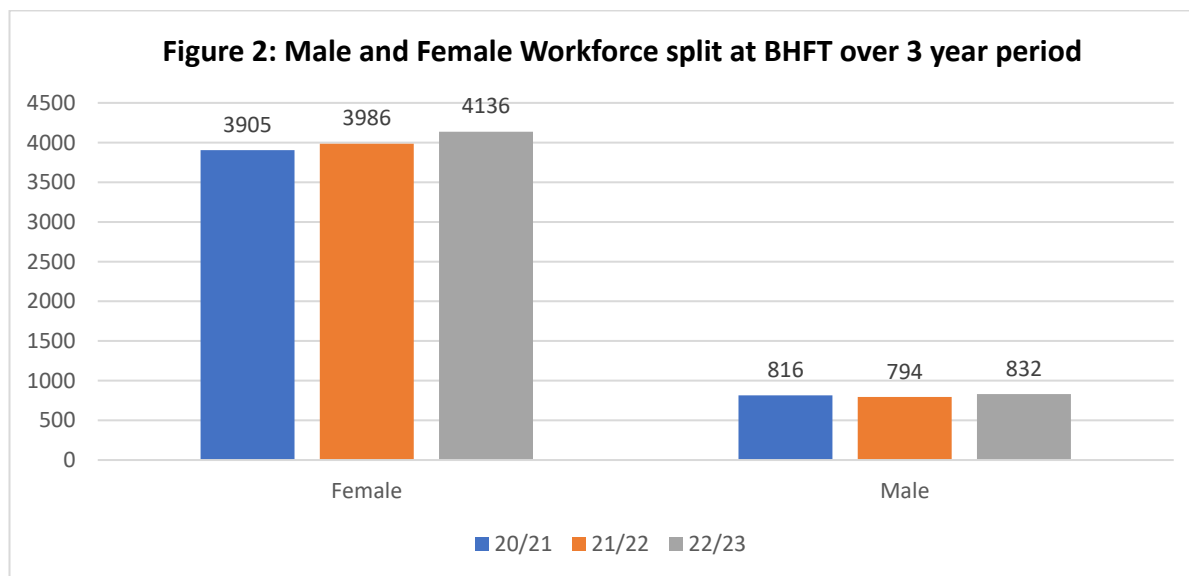
Data collected shows that our workforce consists of 4,789 people, 4,136 female and 832 male, Figure 1 below shows our gender profile.

Figure 1: BHFT Gender Profile 2022/23



BHFT have 231 more females in our workforce since 2020, and 16 more males in our workforce since 2020.

Figure 2 below shows there has been an increase in the number of staff over 3 years since 2020/2021, with females increasing at a steady level and males fluctuating around the same.



4. Median and Mean data for BHFT

Figure 3: Median and Mean Hourly Rate in BHFT over the last 3 years

Mandatory Reporting Area	Data for 2020-21 period				Data for 2021-22				Data for 2022-23			
Mean gender pay gap in hourly pay	19.14%				20.45 %				16.96%			
Median gender pay gap in hourly pay	14.5%				17.01%				16.46%			
Mean bonus gender pay gap	37%				25.97%				29.58%			
Median bonus gender pay gap	27.92%				0%				0%			
Proportion of males and females within the whole workforce receiving a bonus payment	Males		Females		Males		Females		Males		Females	
	17	1.98%	14	0.35%	38	4.63%	40	1%	34	3.88%	37	0.88%
Bonus pay Mean	£8,086.07		£5,094.43		£6,906.77		£5,113.12		£8,062.62		£5,677.54	
Difference	£2,991.63				£1,793.65				£2,385.07			
Bonus pay Median	£1,487.83		£1,413.44		£3,745.29		£3,745.29		£4,790		£4,790	
Difference	£74.39				£0				£0			
Gender Hourly rates	Males		Females		Males		Females		Males		Females	
Median					£20.90		£17.35		£21.66		£18.10	
Difference					£3.55				£3.57			
Mean	£22.29		£18.02		£23.74		£18.88		£23.89		£19.84	
Difference	£4.27				£4.85				£4.05			

Figure 3 above demonstrates that although relatively equal number of males and females have received a bonus payment, the percentage of males receiving a bonus out of the overall male workforce is higher in comparison to females. There is a 0% Median Pay Gap

Mean gender pay gap in hourly pay is 16.96%, which is a **3.49%** decrease from our 2021-22 data, moving in the right direction. The hourly difference is £4.05 but the gender pay gap has reduced by £0.80p.

Median gender pay gap in hourly pay is 16.46% in favour of men. This is a **0.55%** decrease from our 2021-22 data moving in the right direction. The hourly difference is £3.57, which the gender pay gap has increase very slightly by £0.02p.

Nearly all NHS organisations have a higher ratio of female then male in their workforce but have a Gender Pay Gap in favour of men.

Bonus Pay, the data presented in Figure 3 suggests that the average bonus pay gap at BHFT has increased by 3.61%. The bonus data relates only to Clinical Excellence Awards (CEA) paid to all eligible substantive Consultant Medical Staff who have been in post for at least a year. However, it is important to note the context and challenges associated with the bonus pay system:

- CEA's are not a one-off annual performance payment. Instead, it relates to a nationally agreed contractual payment which forms part of the salary package for Consultant Medical Staff.
- This system is prescribed by the British Medical Association (BMA) and NHS Employers – the Trust adopts a nationally agreed system.
- Third, many of the CEA's that are still being paid out are historic and will be maintained until the recipient's retirement.

In 2022-23 the Trust proposed equal bonus payments for all eligible male and female Consultants in the Trust, irrespective of whether they were full-time or part-time without any pro-rata calculations. This would have helped eliminate gender pay gap in the year, since our data suggests female consultants are more likely to work less than full time in the Trust. However, this proposal was rejected by the Local Negotiating Committee and BMA guidance (for pro-rata payment) was required to be implemented. Additionally, as stated above, the gender pay gap also arises from on-going annual legacy bonus payments made in relation to CEA points awarded prior to 2018 that some of the Consultants will continue to benefit from until retirement.

Figure 4: Our hourly pay gap



5. Gender Profile by pay band and quartiles in BHFT 2022-2023

All BHFT staff, except for medical staff, executive (6) and very senior managers (3) are paid on the National Agenda for Change (AfC) pay, terms and conditions of service. The terms and conditions set out band structures and pay for all employees to ensure transparency, fairness and equal treatment for all.

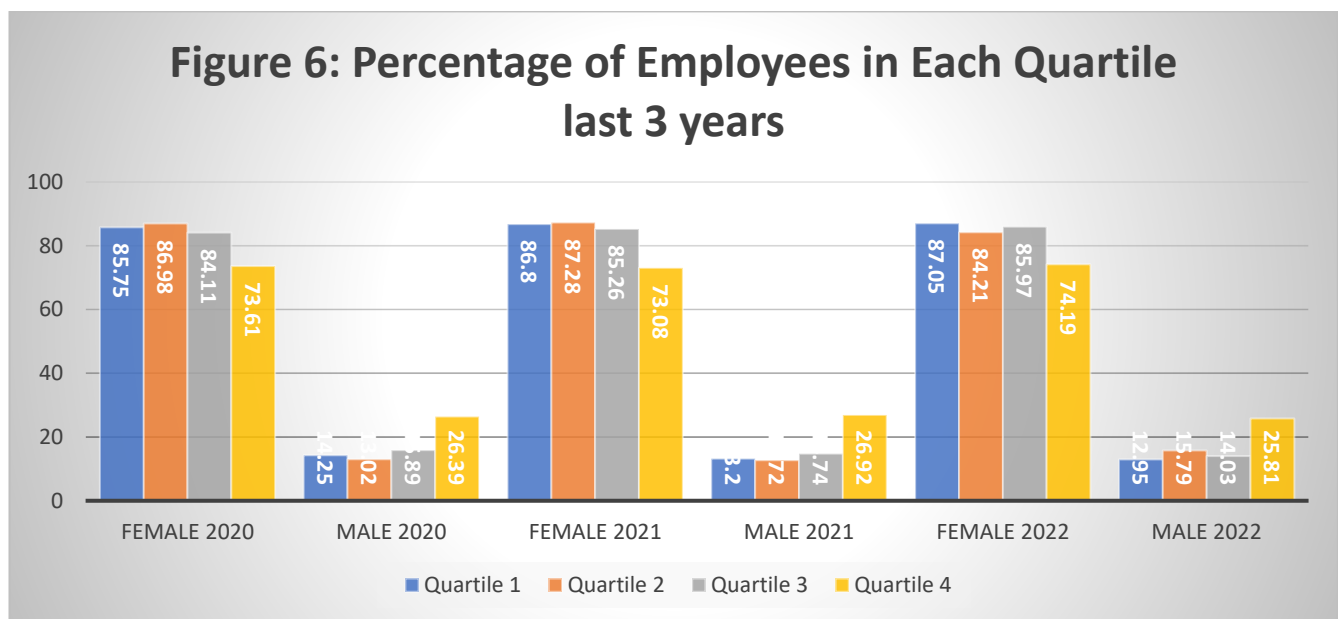
Figure 5 below details the number and percentage of female and male staff within each pay band. A majority of the pay bands are broadly representative of the organisations gender ratio, however we do show more male staff as percentages increase in bands 8a, 8c, 8d, 9 and Board and less female staff in bands 8a, 8b, 8c, 8d and Board as female percentages decrease. Pay band 3 – band 7 is underrepresented of males.

Figure 5: Gender Profile by Pay Band

Grouped Pay Scale	Female		Male		Total Headcount
	Headcount	%	Headcount	%	
Ad-Hoc	4	80.00%	1	20.00%	5
Apprentice	11	100.00%	0	0.00%	11
Band 2	176	77.88%	50	22.12%	226
Band 3	552	87.20%	81	12.80%	633
Band 4	686	87.17%	101	12.83%	787
Band 5	525	85.92%	86	14.08%	611
Band 6	825	85.58%	139	14.42%	964
Band 7	748	84.71%	135	15.29%	883
Band 8a	293	80.27%	72	19.73%	365
Band 8b	124	75.61%	40	24.39%	164
Band 8c	41	69.49%	18	30.51%	59
Band 8d	25	73.53%	9	26.47%	34
Band 9	7	63.64%	4	36.36%	11
Board	6	46.15%	7	53.85%	13
Medical & Dental	113	55.94%	89	44.06%	202
Grand Total	4136	83.25%	832	16.75%	4968

Figure 6 below demonstrates that one of the major reasons for the pay gap is that there is a higher proportion of men in more senior bands within the Trust. As highlighted in Figure 1, females represent 83.25% of our workforce yet only represent 74.19% of the workforce in the upper quartile; males represent 16.75% of our workforce but are overrepresented in the upper quartile (25.81%). This means that females are underrepresented by 9.06% in the senior bands and males overrepresented by 9.06%.

The proportion of females in the lowest quartile of pay (87.05%) represents a slight increase from 86.8% the previous year: higher than the overall number of females in the Trust (83.25%).



6. Comparison with Integrated Care System Partners (ICS)

It's helpful to see our performance in comparison to our public sector system health partners in terms of how BHFT is performing but also BOB/Frimley as a whole in the health care sector.

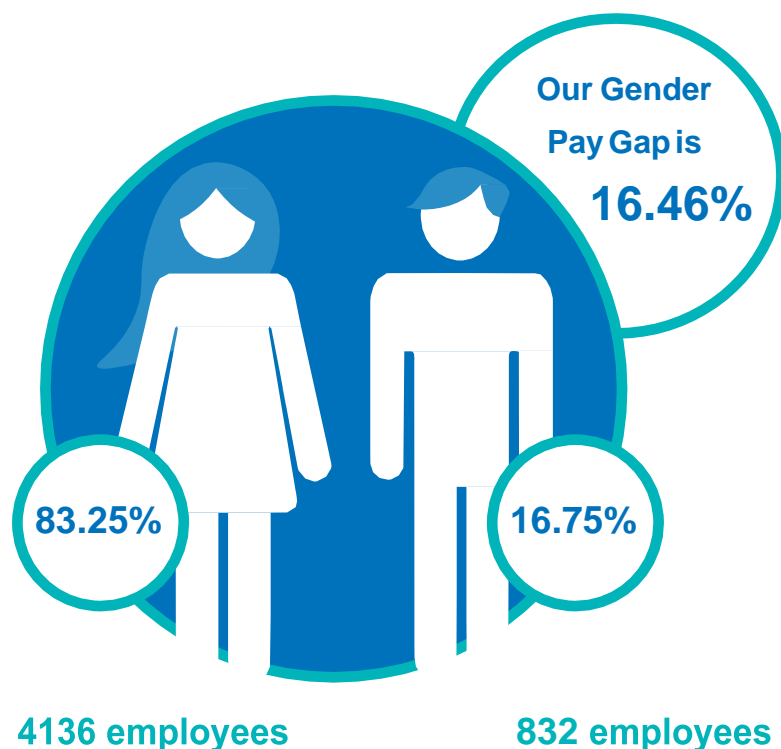
Figure 7 below shows our performance in the gender pay gap in comparison with our health and social care partners.

Figure 7: Gender Pay Gap comparison 2022-2023

Employer	Employer Size	% Difference in hourly pay (Mean)	% Difference in hourly rate (Median)	% Women in lower pay quartile	% Women in lower middle pay quartile	% Women in upper middle pay quartile	% Women in top pay quartile	% Who received bonus pay (Women)	% Who received bonus pay (Men)
Berkshire Healthcare NHS Foundation Trust	1000 to 4999	16.96	16.46	87.05	84.21	85.97	74.19	0.88	3.88
Frimley Health NHS Foundation Trust	5000 to 19,999	21.2	2.4	78.2	75.5	84.2	67.1	37.6	62.4
Surrey & Borders Partnership NHS Foundation Trust	1000 to 4999	3.7	3.3	77.8	79.8	79.9	68.3	1.4	3.7
Royal Berkshire NHS Foundation Trust	5000 to 19,999	20.2	5.3	74.5	78.5	83.1	64.7	0.7	5.1
Oxford Health NHS Foundation Trust	5000 to 19,999	20.7	5.9	85.1	79.1	83.6	72.5	0.4	1.7
Buckinghamshire HealthCare NHS Trust	5000 to 19,999	27.6	17.2	17.0	17.0	15.0	33.0	1.0	5.0
Oxford University Hospitals NHS Trust	5000 to 19,999	3.7	3.3	77.8	79.8	79.9	68.3	1.4	3.7

BHFT Position in comparison to partners	BHFT is the 2 nd smallest employer	BHFT is 5 th out of 7 highest in favour of men	BHFT is 2 nd out of 7 highest in favour of men. Therefore, BHFT has the 2nd highest GPG	BHFT has the most women in the lower pay quartile	BHFT has the most women in the lower middle pay quartile	BHFT has the most women in the upper middle pay quartile	BHFT has the most women in the top pay quartile	BHFT has the 5 th out of 7 highest number of women to receive bonus pay	BHFT has the 4 th out of 7 highest number of men to receive bonus pay
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Whilst the Trust has a Gender Pay Gap of 16.46%, it is worth remembering that the gender pay gap is not the same as unequal pay. This can be simplified by understanding that we have more males than females in higher paid roles, and more females than males in lower paid roles. We also have a considerably lot less males working in the Trust than we do females.



7. What are the causes of the gender pay gap?

BHFT has seen a decrease in the median gender pay gap over the last year from 17.01% to 16.46%. BHFT's Mean Gender Pay Gap in 2023-23 was 16.96%, this represents a 3.49% decrease from 2021-2022 moving in the right direction.

The causes of the gender pay gap are complex and overlapping, some of the reasons for the increase could be attributed to:

- Overall increase in the workforce in the last three years
- Roles in bands 2-7 are predominantly staffed by females (80% and above in most of the bands and in bands 3-4 this figures goes up to >87%).
- As a percentage there are more males in higher paid jobs than lower paid jobs and as a percentage more women in lower paid jobs than in higher paid jobs.
- An increase over the last 3 years of females being employed in Bands 2-4 roles.
- A higher proportion of females are in occupations that offer less financial reward for example, in administration. Many high-paying sectors are disproportionately made up of male workers, for example, medical or information and communications technology.
- A much higher proportion of women work part-time, and subsequently part-time workers earn less than their full-time counterparts on average.
- In general, according to the national landscape women are still less likely to progress up the career ladder into high-paying senior roles, we need to help change this landscape.

8. Actions to close the gender pay gap

Actions to improve the Trust's gender pay gap align with the Trust's strategic ambitions and priorities, in particular making Berkshire HealthCare a great place to work for our people. To meet this goal the Trust has refreshed its strategy and has committed to:

- Scale workforce gap closing action including international recruitment, apprenticeships and streamline student placement employment offer. Attraction focus widens into schools, T levels, NHS Reservists and underrepresented groups including veterans – *this will support our aim to try and increase our male workforce in the lower quartiles.*
- Internal matching to place staff into roles prior to external recruitment – *in time this could help our female workforce with progression and carer development.*
- Recruitment and onboarding process improvement supported by automation and customer focused recruit/candidate connection prior to start – *will be developed alongside our review of inclusive recruitment.*
- Action key area of ambition to address staff experience differential – *we will include looking at our gender pay gap inequality within this work.*
- Talent management cycle/pooling and leadership programme development. Service management skills set development – *this will support our female staff to progress and develop their careers within BHFT.*
- Streamline internal progression path (competency based) with smooth upward grade movement – *will provide more opportunity for female workforce to progress up the bands.*

As part of our EDI priorities work, we will have key areas of focus which are designed to reduce our Gender Pay Gap. Within our EDI Priorities outlined in the EDI and People Strategies, our Gender Pay Gap actions will focus on 5 key areas:

- Inclusive Recruitment – consider as to how we might increase males in the lower quartiles.
- Pay and Reward - Although the NHS Terms and Conditions do not allow the legacy Consultant bonus payments to be changed which makes the overall pay gap difficult to change, we will continue exploring every opportunity, within the confines of national guidance for Local CEA's to ensure that the gender pay gap arising continues to reduce year on year.
- Learning and Development – We need to ensure our female staff at lower bands have the confidence, skills and supported to apply for posts at band 8A and above.
- Culture and Engagement – we need to share our gender pay gap position with our staff, and include them in the co-production of our action plan.
- Ways of working – continue to embed flexible working and ensuring our people policies are supportive and enabling of greater flexibility in the way we deliver our services.

As well as the exploration of developing a Women's network – this holds the potential not only to support co-production in the reduction of gender inequality like the pay gap but to also build up stronger peer to peer support and confidence amongst staff, as well as being a safe place for women to talk about the issues that mean most to them at work such as how to navigate work-life balance, flexible working, women's health, and upskilling for promotion opportunities.



Berkshire Healthcare
NHS Foundation Trust

Before we develop dedicated and detailed actions in collaboration with our Diversity Steering Group, Trade Unions and other stakeholders, we would like to engage the support of a statistician to enable the Trust to better understand the reasons for the pay gap on BHFT.

Contact for further information

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