

NHS Blood and Transplant (NHSBT) Gender Pay Gap – Snapshot date 31st March 2020

About us

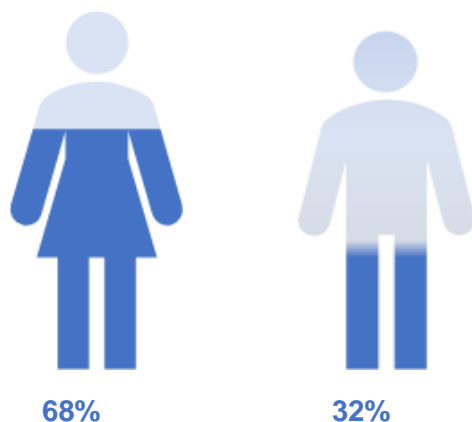
NHSBT is a Special Health Authority responsible for ‘saving and improving lives’ by providing a safe, reliable and efficient supply of blood components, stem cells and diagnostic services to health care providers in England and source organs and tissues across the UK.

Since 2017 our mean gender pay gap has remained fairly static at under 8%. This year our mean gender pay gap for ordinary pay is 7.8% which compares favourably to other public sector organisations and is well below the national average of 15.5% (according to the Office of National Statistics report published in 2020)

Our bonus gap has increased significantly this year, but we know why this has happened and this is explained later in this report.

This report is based on information taken on 31 March 2020.

NHSBT Gender Profile



NHSBT has a predominately female workforce with approximately two thirds of our colleagues being female (3,679) and one third male (1,700). The gender profile of the workforce has only changed marginally since 2017.

NHSBT Gender Pay Gap

Our Gender Pay Gap for ordinary pay, as at 31st March 2020 is reported as follows:

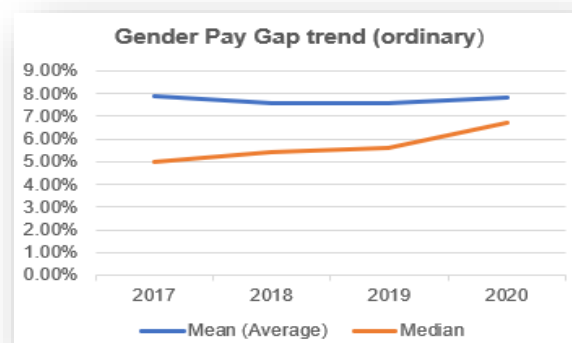
Women's earnings are:	
Mean Gender Pay Gap	7.8% lower than men's earnings
Median Gender Pay Gap	6.7% lower than men's earnings

As shown in the data below the mean gender pay gap has remained fairly static for the last four years. At the same time the median (mid-point) gap has increased steadily with a slightly bigger increase for this round of reporting. The median pay gap is the difference between the 'middle' male and 'middle' female earner. One explanation for this steeper rise is potentially due to the changes in the number of men and women in the pay quartiles (as shown below). The number of men in quartile 1 (lowest paid) reduced from 437 in 2019 to 391 in 2020 whereas there was an increase in women in this quartile from 888 to 950 respectively. This coupled with increases to the number of women in quartile 3 and 4 compared to increases in men in quartile 2 and 4 will have helped maintain the GPG average but has affected the middle values therefore increasing the median.

The table and graph below show our ordinary pay gap since 2017.

Gr

Ordinary Pay		
Snapshot Date	GPG Mean	GPG Median
31 st Mar '17	7.9%	5.0%
31 st Mar '18	7.6%	5.4%
31 st Mar '19	7.6%	5.6%
31 st Mar '20	7.8%	6.7%



Our Gender Pay Gap continues to be

- 1) The higher proportion of men in more
- 2) The higher proportion of women in more junior roles (lower paid roles)

driven by two main factors:

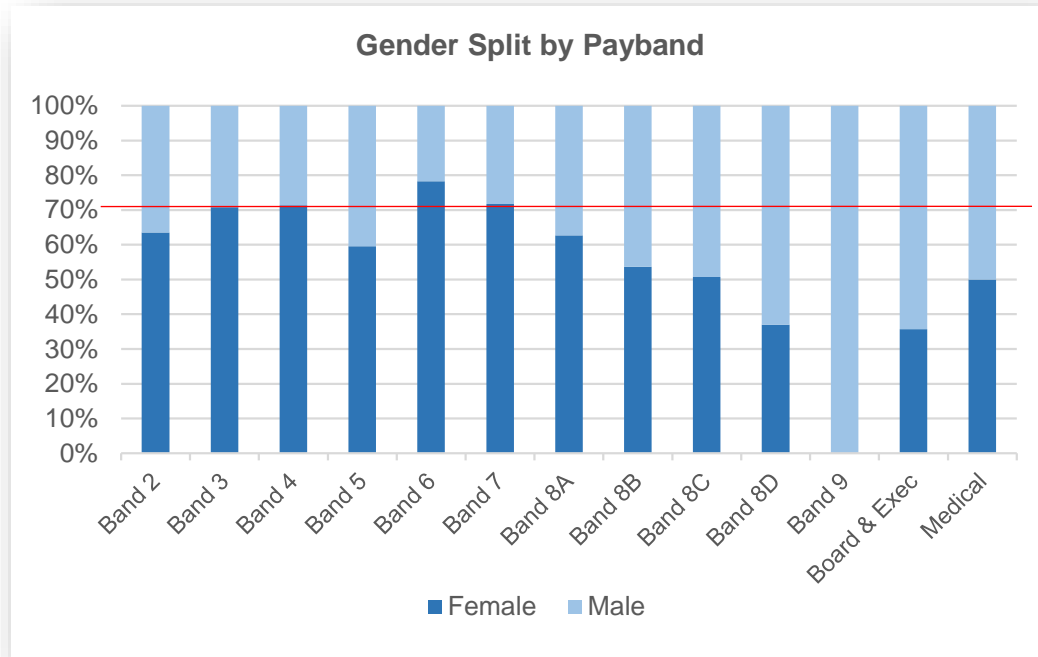
senior (higher paid) roles; combined with

The ordinary pay element of the Gender Pay Gap is calculated using basic pay and other payments such as shift allowances and Recruitment and Retention Premia. Our figures do not include on-call payments as they do not meet the ACAS definition of on-call payments.

Pay Structure

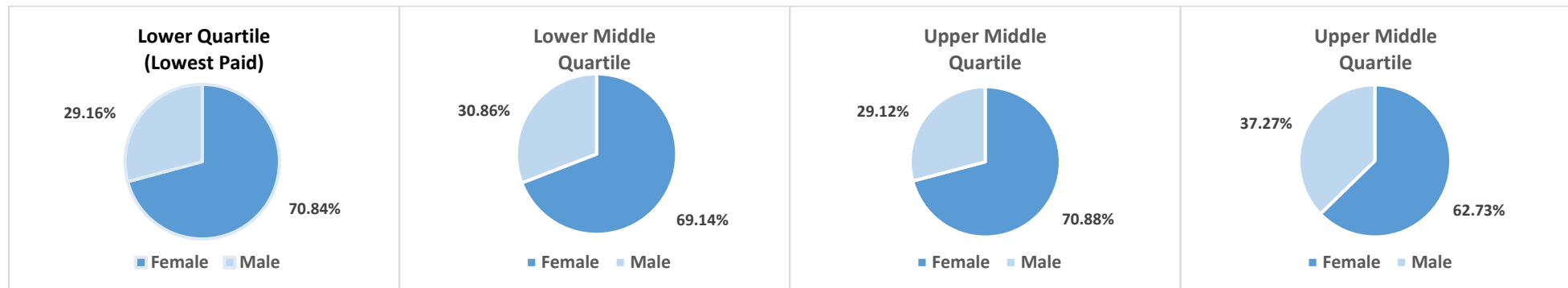
All NHSBT staff, except for board/executives and medics are bound by the NHS Terms and Conditions of Service (formerly known as Agenda for Change) that contains the national agreement on pay and conditions of service. The NHS Terms and Conditions pay bands range from band 2 (lowest paid) up to band 9.

The table below, shows the percentage of males and females in each pay band.



The red line on the graph above indicates the overall percentage of women in the organisation and therefore highlights that there are fewer women in higher paid roles (pay band 8b and above).

This can also be seen in the charts below when comparing ordinary pay of men and women using salary quartiles.



NHSBT Gender Bonus Pay Gap

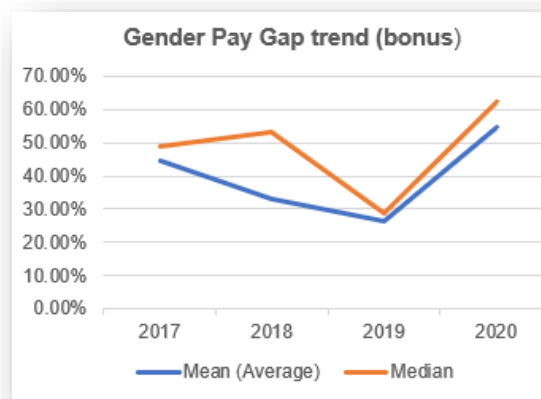
We are also required to report our gender pay gap for the bonus payments that we have made. Our bonus pay gap as at 31st March 2020 is reported as follows:

Women's bonuses are:	
Difference in Mean Bonus Payments	54.8% lower than men's
Difference in Median Bonus Payments	62.5% lower than men's

It is worth noting that for the first three years of GPG reporting, NHSBT's bonus pay comprised of payments made under the Clinical Excellence Awards (CEAs) scheme and the Very Senior Manager/Executive Senior Manager (VSM/ESM) bonus scheme. CEAs are made to Senior Medical staff under their terms and conditions. However, this round of reporting, on the snapshot date of 31st March 2020, only included CEAs because there weren't any bonus payments made to VSM/ESMs in the qualifying period.

In the 12 months ending 31st March 2020, 19 females had received a CEA award compared to 5 males. Bonus payments, in the form of CEAs are paid to very few of our staff, with only 0.52% of females being paid a bonus compared to 0.29% of males. The table and chart below show how our mean and median for our bonus pay gap has changed over the four years of reporting

Bonus Pay		
Snapshot Date	GPG Mean	GPG Median
31 st Mar '17	44.5%	48.7%
31 st Mar '18	32.9%	53.2%
31 st Mar '19	26.3%	28.6%
31 st Mar '20	54.8%	62.5%



The chart above clearly shows the changes over the past four years relating to our bonus pay gap. Whilst this is not ideal, we do understand why this has happened. As a result of our Gender Pay Gap action planning, especially over the last couple of years,

a great deal of work has taken place to actively encourage women to apply for and subsequently receive CEAs. So much so that for this round of reporting there were considerably more women than men who were awarded CEAs (19 to women and 5 to men).

However, it is going to take a little while for this increase in women being awarded CEAs to start to reduce the bonus pay gap, in fact it is the reason why the gap has actually increased rather than reduced and this is down to the fact that the CEAs increase in value over time. The CEA scheme is made up of Local and National awards with different levels of financial reward. The CEAs range from a Local level 1 which has an annual value of £3,016 to the highest National level 12/Platinum which has an annual value of £77,320. For the 2020 snapshot date 8 out of the 18 CEAs paid to women were at level 3 or below, with 3 of these being awarded at the entry level (level 1). Over time colleagues progress through the levels with each level having a greater financial award.

In contrast the lowest level CEA paid to a man was level 6 with the highest being paid was at level 12/Platinum – this is due to historical factors and long-standing high value awards having been in place for many years. Therefore, it is going to take several years before the benefits of more women being awarded CEAs actually begins to pay off and starts to reduce the pay gap in bonus payments.

Reducing the Gender Pay Gap

Whilst we are pleased that our gender pay gap is lower than the national average, NHSBT is committed to ensuring that our gender pay gap is reduced. Over the course of the next 12 months' we will continue to analyse our data and develop plans to address areas for improvement to enable us achieve a reduction in our pay gap as follows:

- Continue to provide more detailed information and analysis of our GPG, including providing details of the GPG by Directorate this will help us identify if any specific remedial action is required in certain parts of the organisation to help drive down the GPG further.
- At the earliest opportunity we will begin to analyse the GPG data for the next snapshot date of 31st March 2021. This data will be shared with HR Business Partners to discuss with their Senior Management Teams to support further development of action plans and remedial actions to be taken during 2021/22. This should then have a positive impact in reducing NHSBT's GPG and we would expect to see a clear step change in our reported GPG.
- Continue with the excellent work carried out to date where we have increased the number of women being awarded CEAs and overtime see this CEA increase in value and at some point, look forward to this paying off and reducing the bonus pay gap.
- Look at widening the inclusivity agenda, further reviewing recruitment practices will hopefully help to increasing diversity of colleagues in the upper pay quartiles.
- Work with the Women's Network to promote our extensive leadership and coaching programmes aimed at all levels of leaders, ensuring women are encouraged to apply for these programmes.
- Repeat the Talent Sharing and Succession planning activity carried out the NHSBT's Executive Team.
- Continue to monitor review and promote the take up of our family friendly policies, such as shared parental leave and flexible working opportunities to ensure that any barriers to women progressing in NHSBT are removed.