



## **Gender Equality Report 2026** **(Data as at 31/03/25)**

### **Introduction**

Bradford Teaching Hospitals NHS Foundation Trust is committed to reducing our gender pay gap and this is our 8<sup>th</sup> publication against this standard.

The 6<sup>th</sup> April 2017 saw the introduction of the Government regulations setting out the requirement for public sector bodies in England with 250 or more employees to publish their gender pay and bonus gap. The Equality Act 2010 (specific Duties and Public Authorities) Regulations 2017 bring in the gender pay gap reporting duty as part of the existing public sector equality duty (PSED).

Gender pay reporting is different to equal pay. The gender pay gap is the average difference between the gross hourly earnings for all men and women which is expressed as a percentage of men's earnings (as set out in the explanation below). Equal pay refers to men and women being paid the same for like work; work rated as 'equivalent' or 'work of equal value' as set out in the Equality Act 2010. It is unlawful to pay people unequally purely because they are a man or a woman.

**Gender pay gap shows the differences in the average pay between men and women.** If a workplace has a particularly high gender pay gap, this can indicate there may be a number of issues to deal with, and the individual calculations may help to identify what those issues are.

Since we began to report our Gender Pay Gap in 2018 (as at March 2017) when our mean average gender pay gap was **31.3%**, we have seen improvement of 9.1%. **As at March 2025 our mean average gender pay gap was 22.2%** which is comparable with other local NHS Trusts.

### **An overview of key data highlights** (data as at March 2025)

- Our mean gender pay gap has stayed roughly the same at **22.2%** (0.1% decrease)
- Our median gender pay gap has decreased by 1.2% to **4.9%**
- Both our mean and median bonus pay gaps have decreased by more than 6%
- Women continue to make up a significant proportion of our workforce (**76.8%**), which is expected as local Clinical Excellence Awards for medical & dental consultants are phased out.
  - Despite a 1.5% decrease in women in the upper quartile of pay (to **65.25%**), we have also seen a 0.7% decrease in women in the lower pay quartile (to **76.7%**)

## Progress on Gender Equality

Some of the recent progress we have made on gender equality includes focus on:

- Raising the profile of gender equality (including allyship) through our successful annual International Women's Day celebration event. Using the opportunity to share information about menopause support and support pathways for domestic abuse.
- Launch of a new Gender Equality Staff Network and appointment of a new Executive Sponsor for the Gender Equality Staff Network
- Our first ever EDI Conference with focus on Belonging and Inclusion
- Development of local EDI action plans. Working with clinical service units and departments to tailor actions to specific inequalities and providing better ownership of those actions)
- Further focus on flexible working for frontline staff
- Development of better support and facilities for breast/ chest-feeding staff

## Areas of Focus for 2026/2027

When it comes to pay; although there are more women employed in the organisation, women continue to earn less than men. There is still work to do to address the issues in the following key areas:

- Women continue to be under-represented at more senior levels and over-represented at supervisory and middle management levels.
- Men continue to be significantly under-represented in Nursing & Midwifery and some other traditionally female professions.

Some positive steps have been taken to raise the profile of gender equality across the Trust and there is no indication, from this years' data, that we should change the focus of our current action plan which has been developed in collaboration with our Gender Equality Staff Network who are continuously looking at ways we can accelerate our progress on Gender Equality.

The action plan will continue to be developed around three key themes with an overall aim of ensuring we recruit, retain and support the right staff and develop excellent leaders who have the skills to empower our people and create a positive culture where our people feel valued, can take responsibility for their actions and flourish. The main focus of our action plan to reduce our gender pay gap will be to:

- **Representation of women in Leadership:** further increasing our engagement with aspiring females and further exploring some of the 'barriers to senior level development' with particular focus on intersectionality, personal development and talent management.
- **Continued focus on improving the working lives of women at BTHFT**, addressing some of the barriers to retention and progression.
- **Raising the profile of Gender Equality across the Trust**, with focus on addressing the under-representation of men in traditionally female roles and challenging gender stereotypes in the workplace.

## Monitoring and Evaluation

The action plan will be monitored by the Trust People Academy and through the Trust Board on a 6-monthly basis as part of their Equality, Diversity & Inclusion update.

# Gender Pay Data


The following data was collected on 31 March 2025 when our workforce comprised **7,491 staff**, of which; **5,753 (76.8%) were women** and **1,738 (23.2%) were men**.

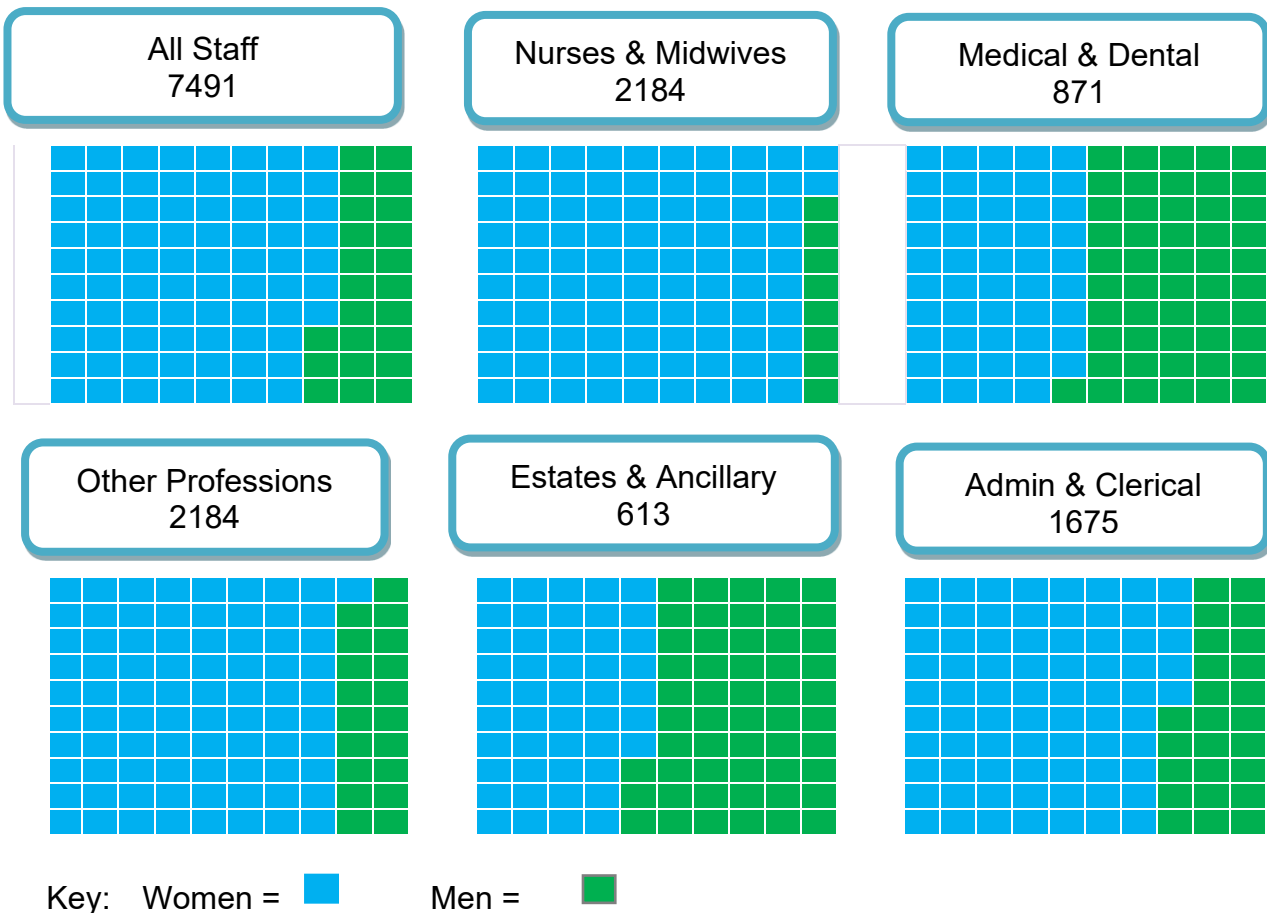
Throughout this report, where appropriate, data for March 2023 and/or March 2024 has been included to show a comparison and evidence our progress over the last three years.

## Workforce by Gender

The table below illustrates how our workforce was made up by gender as at 31<sup>st</sup> March 2025.

The green squares represent men and the blue squares represent women. Women make up a significant proportion of our workforce (76.8%) and this has remained fairly static over the last 12 months with just a 0.2% increase of women in the workforce as a whole since March 2024.

Men continue to be significantly under-represented in Nursing & Midwifery roles and Other Professions. Whilst no change for Nursing & Midwifery roles there is a 1% increase in men in other professions over the last 12 months which is positive. 



## Quartile Reporting

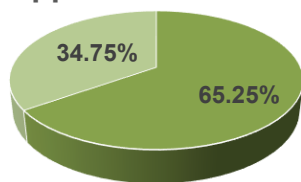
The pie charts below show the proportion of males and females when divided into four groups ordered from the highest to the lowest pay. The data below ranks our whole-time equivalent employees from highest to lowest paid, divided into four equal parts (quartiles). The lower quartile (red) represents the lowest salaries in the Trust and the upper quartile (green) represents the highest salaries.

In March 2025 there were proportionately more women employed by the Trust (76.8%) than men (23.2%). If we are to have gender pay equality, the same proportion of men and women should be represented at all levels of the organisation. The following analysis shows that this is not the case at BTHFT, and **women continue to be proportionately under-represented at the most senior levels and proportionately over-represented at supervisory and middle management levels. Despite minor fluctuations in this data year on year, there has been little change in this metric since March 2021:** ➡

- **At 65.25%; Women continue to be proportionately under-represented in the Upper quartile (higher paid staff) by 11.6% (compared to 76.8% women in the organisation overall).**
  - ➡ The proportion of women in the upper quartile has fluctuated over the last three years. However, after a 2.5% increase last year, we have seen a **1.5% decrease in the proportion of women in the upper quartile this year.**
  - ➡ Women continue to be proportionately over-represented in the Upper Middle quartile (82.3%), but with a slight reduction again (0.1%) in this inequality from last year.
  - ➡ Women continue to be proportionately over-represented in the Lower Middle quartile (79.9%) but with a slight reduction (0.2%) in this inequality from last year.
  - ➡ Women are proportionately represented in the lower quartile (lowest paid staff) at 76.7% and with a 0.7% decrease this year.

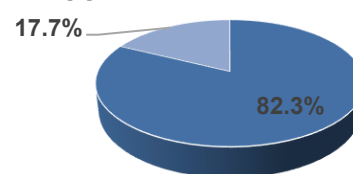
The charts below show the percentage of males and females who fall into each quartile:

Upper Quartile



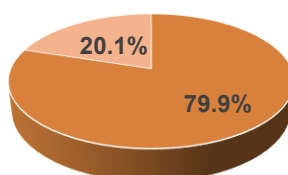
■ Female % ■ Male %

Upper Middle Quartile



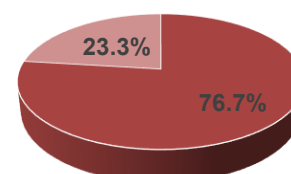
■ Female % ■ Male %

Lower Middle Quartile



■ Female % ■ Male %

Lower Quartile



■ Female % ■ Male %

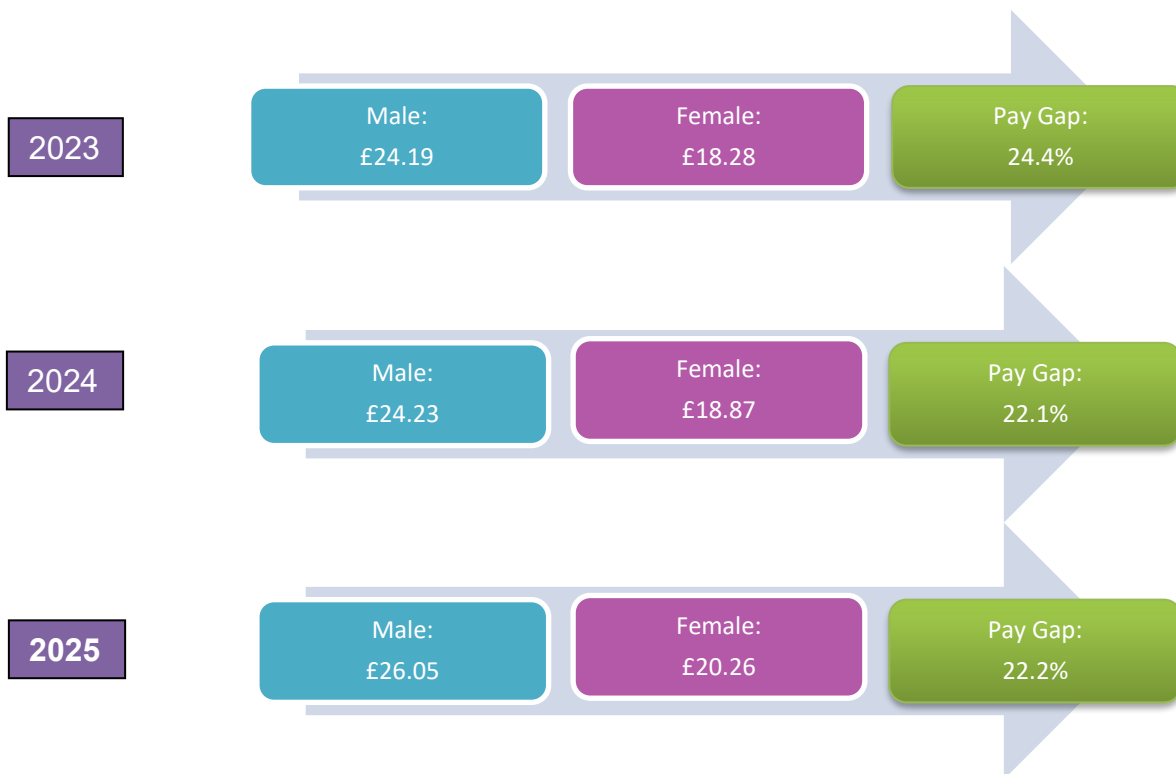
## Average Gender Pay Gap as a Mean Average

The mean is calculated as the sum of all values (hourly pay rate) divided by the number of staff. The difference in these values for men and women is expressed as a percentage.

Table 1

Mean Average Hourly Rate	2023	2024	2025
Male	£24.19	£24.23	£26.05
Female	£18.28	£18.87	£20.26
<b>Gap</b>	<b>24.4%</b> ↓	<b>22.1%</b> ↓	<b>22.2%</b> ↑

When it comes to pay, although there are more women employed in the organisation; women earn less. The mean average pay gap has been steadily reducing over the last few years, but this year has increased slightly (by 0.1%) from **22.1%** to **22.2%** ↑



## Average Gender Pay Gap as a Median Average

Median is calculated by separating each pay list by gender and then putting each list in order from lowest to highest. The Median is the middle number in each list. The difference in these values for men and women is expressed as a percentage.

Table 2

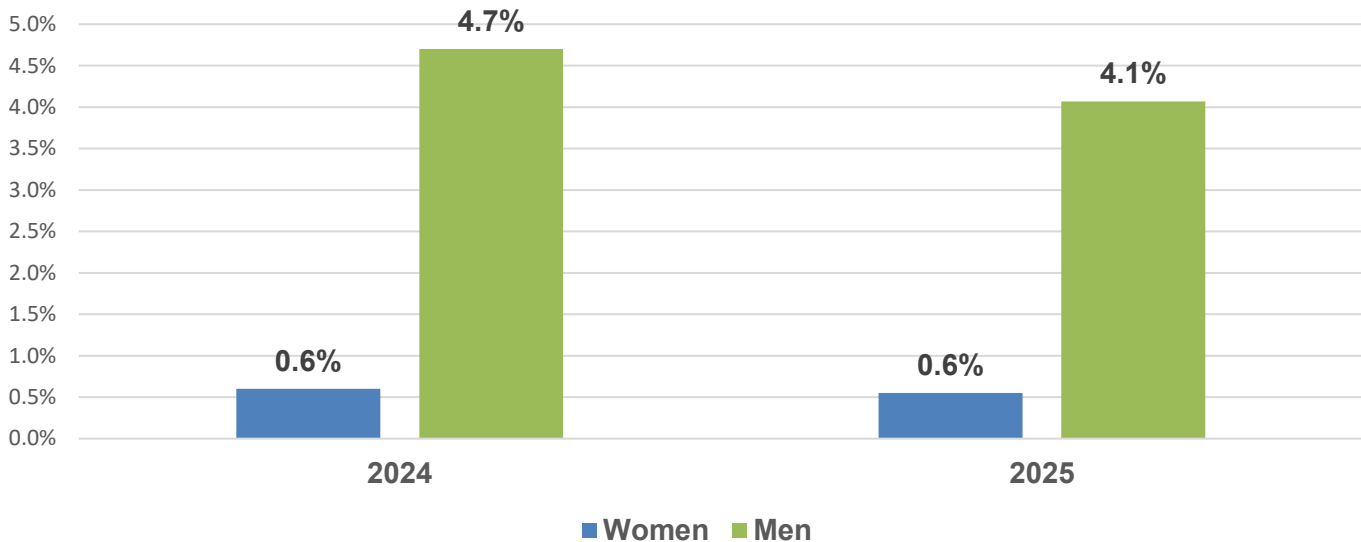
Median Average Hourly Rate	2023	2024	2025
Male	£17.33	£18.10	£19.10
Female	£16.43	£17.00	£18.17
<b>Gap</b>	<b>5.2%</b> ↓	<b>6.1%</b> ↑	<b>4.9%</b> ↓

There has been a year-on-year increase in women's median average hourly pay rate for the last 3 years and although the median average hourly pay rate for men continues to be higher, this year the median pay gap has decreased slightly (by 1.2%) from **6.1%** in **2024** to **4.9%** in **2025**. ↓



## Percentage of Men and Women receiving a Bonus Payment at BTHFT

There continues to be a lower proportion of women in the Trust receiving a bonus payment although this gap has decreased slightly with 0.6% of the women and 4.1% of men at BTHFT receiving a bonus payment in March 2025 (compared to 0.6% women and 4.7% of men in 2024).



### Is it right that a smaller proportion of women in the Trust are paid bonuses?

As identified in previous years, for the purposes of the national gender pay gap requirements this data is calculated as a proportion of the workforce as a whole (where we know that proportionately there is an over-representation of women). However, the only bonus payments made in the Trust are clinical excellence awards (CEA) paid to medical & dental consultants, where we know that we employ more men than women. This exaggerates the gap.

A more useful comparison would be to compare the proportion of male and female consultants receiving a bonus payment (CEA) compared to the proportion of male and female consultants in the workforce:

- As at 31<sup>st</sup> March 2025 **39%** of the consultant workforce were women and **61%** were men. Further analysis of the snapshot data shows that **30%** of bonus payments were made to female consultants and **70%** were made to male consultants. This does still show a **slightly higher proportion of male consultants receiving a bonus payment compared to female consultants (when compared to the proportion of males and females in the consultant workforce)**, although there is a **1% reduction in this disparity from last year**.

### Some background information into the reason for the bonus pay gap:

Historically, there has been a higher proportion of male consultants in the workforce, with a greater length of service and seniority, which were previously success factors in receiving a local CEA (an award paid in varying amounts) and although this award has now been phased out some of these staff continue to receive legacy payments on a mark-time basis. There is no longer opportunity for anyone to apply for the 'old style' CEA (and continuation of this legacy award will be subject to a formal review in the future in agreement with the Local Negotiating Committee). In the interim this means that, year-on-year, the numbers linked to the 'old style' CEA may only change as people retire or leave the organisation for other reasons.

As at March 2025 there also continued to be some consultants (predominantly male) in receipt of a national award for clinical excellence (a national application process that is renewable every 3-5 years

but potentially generates much higher bonus payments dependent on the level of the award). This has a significant impact on the gender bonus pay gap.

As a way to address the inequality in bonus payments within the Trust, from March 2020 a new style Clinical Excellence Award was paid to all consultants who met the eligibility criteria (as at April of the preceding year) without the need to submit an application. The new style CEA was calculated and paid to all eligible consultants as an equal share of a total award budget and the payment made in full irrespective of someone's hours of work. This approach was aimed at creating greater equity for female consultants who are more likely to work part-time hours. The proportion of consultants receiving the new style CEA was directly related to the proportion of eligible consultants employed, rather than limited to a selection of those who have made an application for the award. Going forward this new style CEA has been stopped and is now incorporated into basic pay. However, as the last of these payments (for 2023) were paid in May 2024 they will have been picked up in the reference period for our 2025 bonus pay gap review. These equal shares payments are of a lower value and unlikely to have a significant impact on the pay gap. Therefore, any inequality in terms of our mean or median bonus pay gap is predominantly attributable to the old style and national CEA payments.

## Average Bonus Gender Pay Gap as a Mean Average

The mean average bonus payment is calculated as the sum of all values (bonus payments within a specified reference period) divided by the number of staff (consultants receiving bonus payments within that reference period). The bonus pay gap demonstrates the % difference in these mean average payments for men and women.

Table 3

Average Bonus Pay Per Annum	2023	2024	2025
Male	£8,142.16	£11,797.50	£11,551.72
Female	£5,041.58	£6,814.43	£7,405.24
<b>Gap</b>	<b>38.1%</b> ↑	<b>42.2%</b> ↑	<b>35.9%</b> ↓

Based on this years' data calculation, men **continue to earn on average 35.9% more in bonuses than women**. However, this is a decrease of **6.3%** from last year. ↓

The only bonus payments made in the Trust are Clinical Excellence Awards (CEA's) paid to medical & dental consultants. In recent years efforts to create greater equity in these payments has reduced our bonus pay gap slightly. However, this will not be fully eliminated until legacy (old style) local CEA payments are reduced/ eliminated through colleagues retiring or leaving the Trust and/ or through a greater proportion of female consultants applying for higher value national CEA awards – changes which are very difficult to influence.

However, it is anticipated that over the next few years we will see a gradual improvement in the mean bonus pay gap data as 'old style' CEA payments gradually diminish, and more women potentially achieve some of the higher paid national awards.



## Average Bonus Gender Pay Gap as a Median Average

Median is calculated by separating each pay list (list of bonus payment amounts) by gender and then putting each list in order from lowest to highest. The median is the middle number in each list and the median bonus pay gap is the percentage difference between that mid-point for men and women.

Table 4

Average Bonus Pay Per Annum	2023	2023	2024
Male	£2,759.19	£8,987.19	£9,048.00
Female	£2,156.00	£5,217.72	£6,032.04
<b>Gap</b>	<b>21.9%</b> ↓	<b>41.9%</b> ↑	<b>33.3%</b> ↓

**As a median average men earned 33.3% more than women in bonuses in March 2025.** This is a decrease of 8.6% in the median bonus pay gap over the last 12 months ↓

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