

2022 Gender pay gap report

(Reported November 2022)

NHS Resolution's mean gender pay gap has decreased from 8.4% in 2021 to 7.9% in 2022. However, the median pay gap has increased from 7% to 10.4%. In relation to the bonus pay gap, our median and mean bonus gender pay gap is 0% as only female employees received a bonus pay in 2022.

Our workforce profile remains the same as 2021: 64% female and 36% male as at 31 March 2022. 2022 saw a decrease of 3.5% of female employees in the lower quartile and an increase of 2.4% of female employees in the lower middle quartile. There was also a marginal increase of 0.5% of female employees within the upper quartile compared to 2021.

Note: When referring to senior roles in this report the term includes managers paid at Agenda for Change band 8a and above.

Our purpose and values

Resolving concerns fairly and learning from harm is at the heart of what NHS Resolution is about, embedding our values in the way we work internally and externally.

We are an arm's length body of the Department of Health and Social Care. We are a Special Health Authority which provides:

- Indemnity cover for clinical and non-clinical liabilities
- Learning from claims
- Legal and professional services
- Dispute resolution between commissioners and primary care contractors
- Advice and support to healthcare organisations on the effective management and resolution of performance concerns relating to practitioners.

Our purpose

- Deliver fair resolution
- Share data and insights as a catalyst for improvement
- Collaborate to improve maternity outcomes
- Invest in our people and systems to transform our business.

Our values

Professional – We are dedicated to providing a professional, high quality service, working flexibly to find effective and efficient solutions.

Expert – We bring unique skills, knowledge and expertise to everything we do.

Ethical – We are committed to acting with honesty, integrity and fairness.

Respectful – We treat people with consideration and respect, and encourage supportive, collaboration and inclusive team working.

Reporting requirements

From April 2017 onwards, any UK organisation employing 250 or more employees is required to report annually on its gender pay in six different ways:

1. Mean gender pay gap – ordinary pay
2. Median gender pay gap – ordinary pay
3. Mean gender pay gap – bonus pay in the 12 months ending 31 March
4. Median gender pay gap – bonus pay in the 12 months ending 31 March
5. The proportion of male and female employees paid a bonus in the 12 months ending 31 March
6. The proportion of male and female employees in each quartile

The gender pay gap shows the difference in the average earnings between male and female employees within NHS Resolution.

The mean gender pay gap is the difference between the mean hourly rate of pay of male full-pay relevant employees and that of female full-pay relevant employees.

The median gender pay gap is the difference between the median hourly rate of pay for male full-pay relevant employees and that of female full-pay relevant employees.

Our gender profile

Snapshot date – 31 March 2022

Figure 1 below details our gender profile. Despite the increase in headcount, the overall workforce profile has remained the same since the last reporting period. Our workforce consisted of 339 female (40 of which are part time) and 190 male employees (18 of which are part time). Females make up 69% of all part-time workers and figure 2 details the number of part time female and male staff within each pay bands as at 31 March 2022. Band 6 is largely reflective of the organisation's female part time profile, however, in band 4 and 5 and bands 7 to 8b the number of female part-time workers to compared to male part-time workers is not reflective. The seven part time males at Band 8c and two part time males at band 8d are exclusively in the Advisers team in Practitioner Performance Advice (Advice).

An explanation of how this variance may be driving our gender pay gap is on slides 8 and 9.

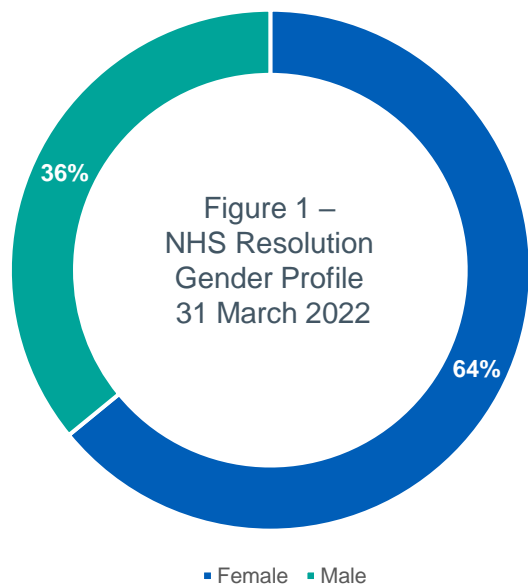
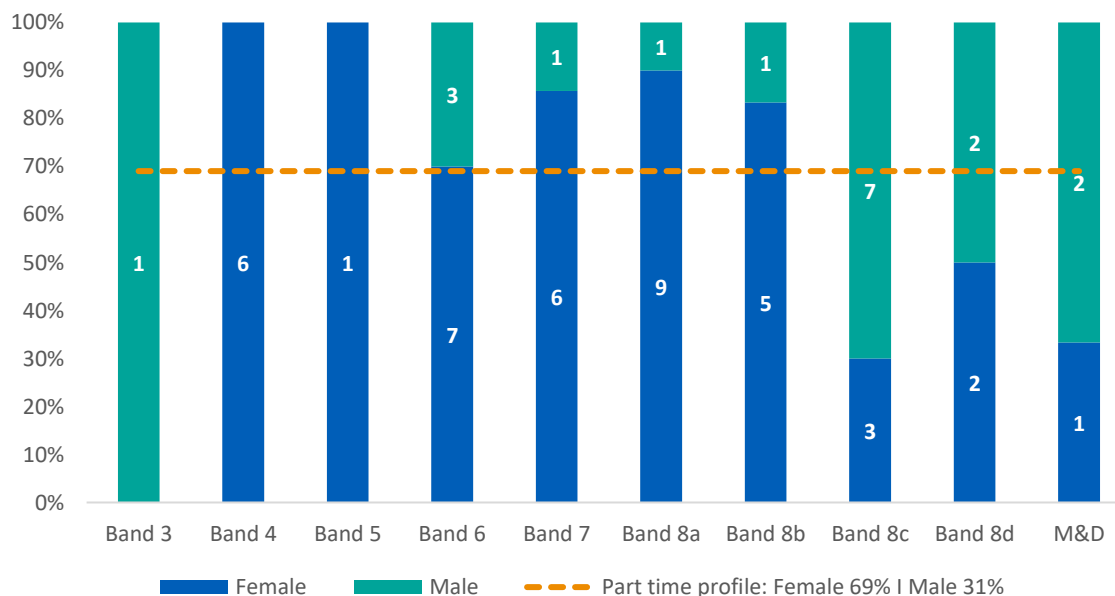


Figure 2 - Part-time profile by gender



Gender profile by pay band

Pay structure

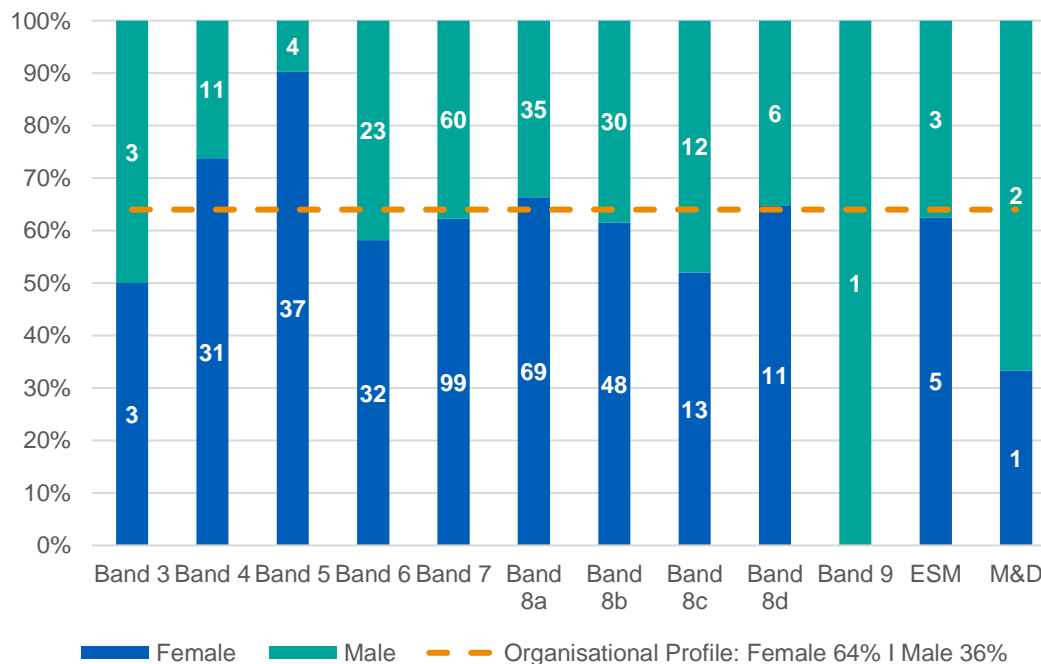
All NHS Resolution staff, except for medical and dental staff (M&D), executive and senior managers (ESM) are paid on the National Agenda for Change (AfC) pay, terms and conditions of service. The terms and conditions set out band structures and pay for all employees to ensure transparency, fairness and equal treatment for all.

Profile across bands

Figure 3 details the number of female and male staff within each pay bands as at 31 March 2022.

While bands 7 to 8b, 8d, ESM are largely reflective of the organisation's profile, there is an upwards trend in employing more female staff in band 6. In addition, there has also been an upward trend in employing more female staff in bands 8a, 8b and 8d. Pay band 9 is representative of just 1 individual.

Figure 3 - Gender Profile by Pay Band



Our gender pay gap data

NHS Resolution has a mean gender pay gap of 7.9%, which has decreased from 8.4% in 2021. However, the median gender pay gap has increased from 7% in 2021 to 10.4%.

Ordinary pay	
Mean gender pay gap	7.9
Median gender pay gap	10.4
Proportion of staff paid a bonus	
Female	Male
0.88%	0%

**In 2022, only female employees received a bonus as result there is no gender pay gap to report.*

Bonus pay	
Mean gender pay gap – bonus pay	0%*
Median gender pay gap – bonus pay	0%*

Recruitment, Promotions and Turnover activity

New Hires

Over the 12-month reporting period from 1 April 2021 – 31 March 2022, NHS Resolution appointed 1.7 times more females into senior roles than males with 27 females appointed into band 8a roles and above compared to 16 males. This is a slight increase from 2021 where the organisation appointed 1.5 times more females into senior roles. Claims management saw the highest number of female new hires into senior roles with 3.5 times more females appointed than males. Conversely, Digital, Data and Technology (DDaT), appointed three times more male new hires than female.

Despite the positive activity, as with previous years the number of positions at bands 3-6 continue to be predominantly filled by female employees; there were 26 female appointments compared to 9 males in the reporting period. Finance and Corporate Planning appointed 1.6 times more females into bands 3-6 roles and DDaT appointed four females compared to one male. Membership, Stakeholder and Engagement (MSE), Advice, Policy Strategy and Transformation and Safety and Learning, appointed only females in bands 3-6 within the reporting period. Due to a large proportion of these vacancies being filled by female employees (74%) in the short term the organisation will continue to see a gender pay gap.

Promotions

Within the same period there were 29 promotions into senior roles (Band 8a and above); this excludes temporary acting up. Females made up 58.6% (17 females) of these promotions compared to 41.3% (12) males. Of the 17 females promoted only two were part-time. Of the 12 males promoted to senior roles none were part-time.

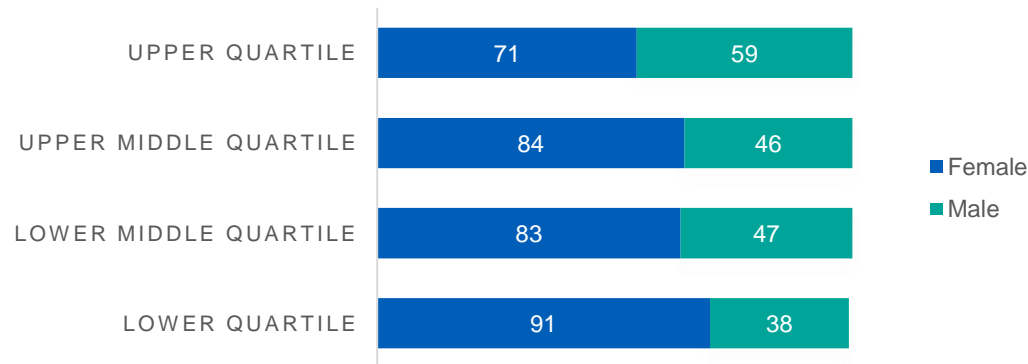
Turnover

In the reporting period, NHS Resolution had 28 voluntary leavers in senior roles, 12 of which were due to retirement. Of the remaining 16 voluntary leavers, there were eight female and eight male. Compared to our gender pay gap report 2021 there were no employees leaving due to caring responsibilities. There were three voluntary leavers who stated work life balance as the reason for leaving, one of which was female.

Our gender pay gap data

The information below details the number of staff and the percentage of staff within each salary quartile.

Figure 4 – Number of staff in each quartile



Percentage of Staff in Each Quartile	2022 Rates		2021 Rates		Year on Year Change	
	Female %	Male %	Female %	Male %	Female %	Male %
Lower Quartile	70.5	29.5	74.1	25.9	-3.5	3.5
Lower Middle Quartile	63.8	36.2	61.5	38.5	2.4	-2.4
Upper Middle Quartile	64.6	35.4	63.3	36.7	1.3	-1.3
Upper Quartile	54.6	45.4	54.1	45.9	0.5	-0.5

Note: We use rounding on our figures which may not always equal to 100% on some of the breakdowns.

The main changes within the quartiles has been within the lower and lower middle quartiles. While there has been a decrease of 3.5% of females in the lower quartile and an increase of 2.4% of females in the lower middle quartile, there has also been a 1.3% increase of females in the upper middle quartile and a slight increase of 0.5% of females in the upper quartile.

The lower middle and upper middle quartile is almost proportionate to the organisation's gender profile. However, lower and upper quartiles are not proportionate to the organisation's gender profile with a higher female to male split in the lower quartile and a higher male to female split in the upper quartile. The two disproportionate quartiles could be driving our gender pay gap.

Considered impacts

There has been a decrease in our mean gender pay gap from 8.4% in 2021 to 7.9 % and an increase in our median gender pay gap from 7% in 2021 to 10.4%. As in previous year, there may be a variety of reasons for the pay gap, particularly the median and we've outlined some possible drivers below. As the gender profile within in our senior roles (band 8a and above) and more junior roles (bands 4 to 5) are not reflective of our organisation's gender profile, we've focused our analysis on these grades.

Promotions by gender and grade

From 1 April 2021 to 31 March 2022, 17 females were promoted into senior roles (band 8a and above).

At band 7 within our organisation, the gender profile is 62% female and 38% male. Within the reporting period of 1 April 2021 to 31 March 2022, 62% females were promoted to band 8a and 38% male. The gender profile at band 8a is 66% female and 34% male. However, only 60% females were promoted from band 8a to band 8b compared to 40% males. The female promotions from band 8a to band 8b compared to the gender profile of band 8a could be driving a gender imbalance at the more senior bands and thus, contributing to our Gender pay gap (GPG).

Additionally, of the 17 females that were promoted into senior roles (Band 8a and above), three were part-time on application. Two of these increased their hours on promotion; one of the two increased their hours to full time. This may suggest that senior roles are either not attractive or accessible to part-time employees, who are more likely to be women (see slide 4). There were no part-time male promotions.

Average hourly pay by gender and grade

On analysing the average hourly pay by gender and grade, on average, females earn more than males in bands 3 to 5. The gap at bands 6 is less than 1% and at bands 7 and 8a is 2.1% and 2.8% respectively. At bands 8b, 8c and 8d, males are earning more than females with pay gaps of 5.5%, 8.6% and 6.3% respectively.

Considered impacts

Sector/role specific considerations

Roles within Information Technology are predominantly occupied by males. This is reflected in the NHS Resolution's new hire metrics for the reporting period of 1st April 2021 to 31 March 2022. For example, out of the 28 new hires in DDaT, 17 were male compared to 11 females. Of this only 2 females were appointed into senior roles compared to 5 males. These roles are in high demand and sometimes attract a recruitment and retention premium.

In contrast, administration and personal assistant roles are predominantly occupied by females. For example, the two band 5 PA's that were appointed were females.

Senior manager profile by gender and length of service, turnover and leaving reason

As part of the AfC terms and conditions contract refresh, a number of pay points were removed, which means it now takes fewer years to reach the top of each pay band. As at 31 March 2022, males had longer service at senior manager level (8a and above) with 60% of male employees with 10 or more years' service compared to 40% females. Within the 5 – 10-year length of service range at band 8c, seven males were at the top of the band compared to four females and at band 8d three males were at the top of the band compared to 2 females. As our pay structure is part of a nationally agreed framework and is based on length of service, rather than sector driven, it in itself will not be a driver in our gender pay gap.

As outlined on slide six, from 1 April 2021 to 31 March 2022, there were 16 voluntary leavers, eight of which were female. One female resigned with under 1 years' service compared to five males. Two females with over 10 years' service resigned compared to no males resigning with the same length of service. This presents an opportunity to develop actions to better retain female employees with longer service.

There were three voluntary leavers who stated work life balance as the reason for leaving, one of which was female. As outlined in slide 6, contrary to our previous gender pay gap reporting in 2021, no leavers stated caring responsibilities as their reason for leaving.

Actions taken

During 2021/22, we continued to take action in line with our *Equality, diversity and inclusion strategy and action plan February 2020 – March 2022*. This detailed actions to be taken that would help address our gender pay gap. Below, we provide details of those actions and the outputs:

- We commenced action in creating our LinkedIn page as means of attracting a wider range of prospective staff.
- In collaboration with the Business Intelligence team, HR&OD have created a KPI recruitment tracker which allows the team to audit the diversity of candidates by protected characteristics from application to shortlisting stage.
- We piloted a work placement programme in DDaT in collaboration with the British Computer Society and Nuffield Research Placements. Four students, two of which were female, undertook placements. We plan to utilise this as a means of encouraging females to embark on a career in the area of data, computing or technology.
- We have continued to highlight and promote the apprenticeship scheme to all staff as part of the talent pipeline. HR&OD, Claims and Policy, strategy and transformation have engaged in the process.
- We have promoted and championed flexible working by adopting working hour principles to remove the requirement for employees to work core hours of 10am - 12noon and 2pm – 4pm where duties of their role permit. In addition we embarked on reviewing our flexible working and family leave policies and procedures to support our Equality, Diversity and inclusion ambitions.
- We have highlighted the impact of the menopause in the workplace and provided guidance and support to staff affected by the menopause and line managers.
- To support employees who have taken an extended period of leave due to caring for family members, family leave, recovering from a period of ill health, we've created a return to work mentoring programme. The purpose of the programme is to support these employees with their transition back to work.

Our intended actions

In September 2022, NHS Resolution's People Committee agreed ***Our People Strategy 2022 - 2025*** to support the delivery of our corporate strategy. Aligned with the NHS People Plan, our People Strategy will allow us to continue to focus on our people priorities and incorporates our commitment to embedding equality, diversity and inclusion across the organisation and ensuring that fair treatment and social inclusion are at the heart of everything we do. Our intended actions to address the gender pay gap include:

- Ensuring we continue to be transparent about our promotion, pay and reward processes.
- Reviewing our language, images and branding used to promote and advertise roles and careers within our organisation.
- Ensuring recruitment managers and selection panel members have the skills, knowledge and experience to represent our organisation and select suitable people. This will be done by designing effective interview training that reflects our PEER values and associated behaviours.
- Wherever possible, ensuring diverse selection panels.
- Through talent management, identifying and supporting aspiring women leaders within our organisation by providing them with opportunities for development and career progression.
- Continuing to offer and actively promoting a range of opportunities for flexible working to all staff, to suit their parental and caring responsibilities and commitments outside of work.
- Where practicable, advertising and offering jobs as having flexible working options, such as part-time work, remote working, job sharing or compressed hours.
- Encouraging senior leaders to champion flexible working.
- Continuing to promote our return to work mentoring offer– highlighting the benefit to staff going off or returning from maternity leave.
- Considering the creation of apprenticeship and work placement opportunities for roles predominately occupied by males, such as IT, and encouraging females to take these up.
- Utilising the Employee Staff Record (ESR) and the Talent Management functionality to understand the gender and age profile of our people to inform our succession planning.
- Reviewing the application of RRP and where it is no longer a requirement for a specific role, implementing an agreed process to cease the payment.
- Researching approaches other organisations in the digital space (e.g. NHS Digital) have taken to successfully attract more females into tech and data roles and apply relevant methods in NHS Resolution.