

Gender Pay Gap Report

31 March 2025

Date: 5th May 2025



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Introduction

Since 2017 Gender Pay Gap legislation has required all employers with more than 250 staff to publish annual information on the pay gap between their male and female staff. For public sector organisations such as the NHS the snapshot date for data capture is 31 March every year.

The Gender Pay Gap regulations require six figures to be reported annually:

- Mean (average) gender pay gap in hourly ordinary pay
- Median (middle) gender pay gap in hourly ordinary pay
- Mean (average) gender pay gap in bonus pay
- Median (middle) gender pay gap in bonus pay
- Proportion of men and women in each pay quartile
- Proportion of men and women receiving bonus pay

Ordinary pay includes basic pay, allowances, and enhanced and special duties pay. It does not include any type of bonus pay. For this calculation just the snapshot date is used, so if staff were not paid for any reason (career break, or statutory sick or maternity pay for example) on 31 March 2025 they are not included.

Bonus pay in the Trust relates to Clinical Excellence Awards, a national scheme for medical consultants that recognises contribution to high quality care, and service improvement and innovation. The relevant dates for bonus pay are the full financial year, so in this report 1 April 2024 to 31 March 2025.

More information on gender pay gap and calculations can be found on the Government website at <https://www.gov.uk/government/publications/gender-pay-gap-reporting-guidance-for-employers>

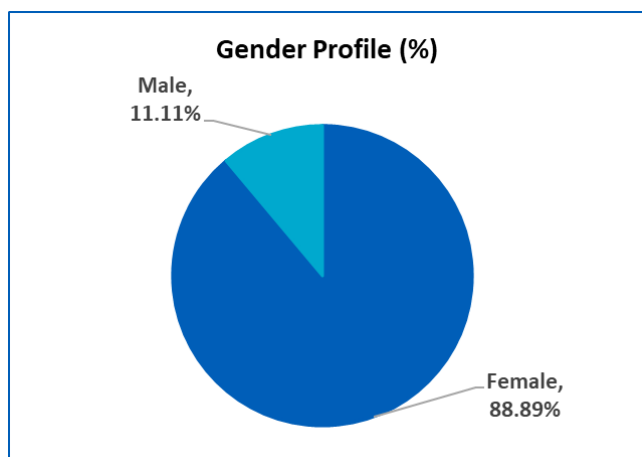
In 2024 – 2025 the Trust started to integrate with Warrington and Halton Teaching Hospitals NHS Foundation Trust. While it will be some time before the two organisations finalise formal integration there has been a sharing of executive level roles in the latter months of the financial year. These shared roles are reflected within calculations where appropriate.

It is important before we begin to highlight that while the national reporting mandate for the gender pay gap is for the binary norm of male and female, as a Trust we recognise that not all staff will identify within these confines. We are working to engage with these staff, to listen to their lived experience so that we can ensure that their employment experience is equitable, and that they feel supported, valued, and included within the team that is Bridgewater.

Results for 31 March 2025

Ordinary pay

On 31 March 2025 we employed 1,566 staff who were relevant to gender pay gap reporting, including bank staff paid for work in the relevant period, and excluding substantive staff on statutory sick or maternity pay only on that date.



The female workforce was 1,392 or 88.89% of the total workforce, and the male workforce was 174 or 11.11% of the total workforce.

This is broadly reflective of the gender breakdown in 2024 and is largely reflective of the national NHS breakdown.

Table 1 shows the number of female and male staff in each pay quartile, the division of female and male staff into four roughly equal groups based on hourly pay.

Table 1: Showing the numbers and percentages of female and male staff in the four pay quartiles at 31st March 2025.

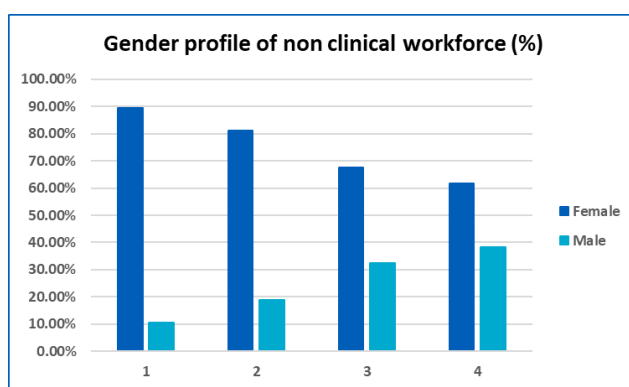
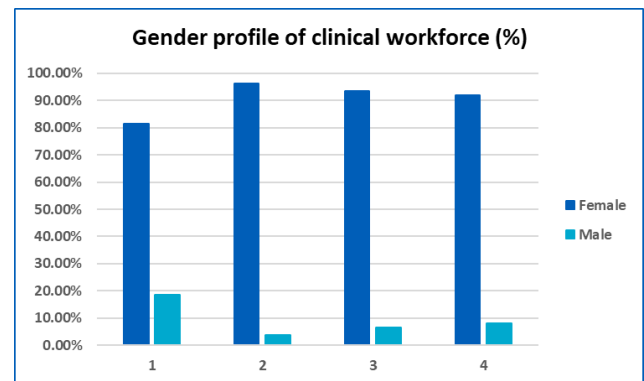
Female Workforce	Total	Percentage %	Male Workforce	Total	Percentage %
Lower quartile 1	337	86.0	Lower quartile 1	55	14.0
Lower middle quartile 2	364	93.1	Lower middle quartile 2	27	6.9
Upper middle quartile 3	357	91.3	Upper middle quartile 3	34	8.7
Upper quartile 4	334	85.2	Upper quartile 4	58	14.8

It will be observed that female staff are under-represented in quartile 4, this influences particularly the mean, or average, gender pay gap figure – the greater number of male staff on higher Agenda for Change, Medical and Dental, and Very Senior Manager pay scheme bands increases the overall hourly rate for male staff. The median gender pay gap figure is balanced by the higher representation of female staff in the workforce overall, the large number of staff in Agenda for Change pay bands 3 to 7, and the significant number of female staff in higher Agenda for Change, Medical and Dental, and Very Senior Manager pay scheme bands.

Further detail by staff group is provided on the following page.

The clinical workforce represents 69.3% of the overall Trust workforce. The clinical workforce is paid through the Agenda for Change pay scheme.

The clinical workforce is 92.1% female, with female staff particularly over-represented when compared to the overall workforce in quartile 2 (96.0%) and quartile 3 (93.6%). This relates to the number of female staff within Agenda for Change pay bands 4 to 6, this includes community nurses, school nurses and health visitors, and many allied health professional therapist roles.



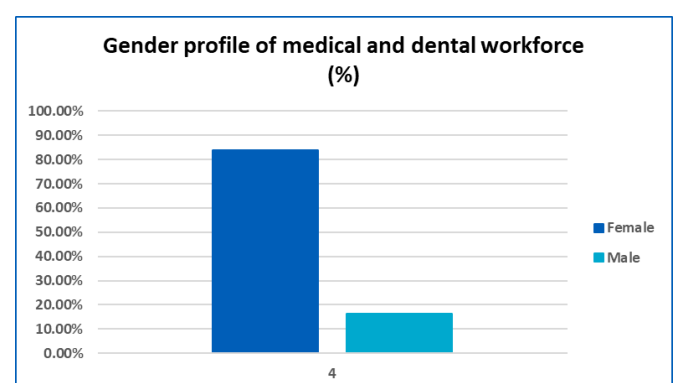
The non-clinical workforce represents 26.0% of the overall Trust workforce. The non-clinical workforce is paid through both Agenda for Change and Very Senior Manager pay schemes, reflective of the diversity of roles in this group.

The non-clinical workforce is 81.3% female, with female staff significantly under-represented in quartiles 3 (67.6%) and 4

(61.8%). There is a large number of female staff in clerical roles at Agenda for Change pay band 3, represented in quartile 1; in higher quartiles and pay bands the ratio of female to male staff significantly reduces until in the highest Agenda for Change pay bands ratios are broadly equal.

The medical and dental workforce represents 4.7% of the overall Trust workforce, they are paid through Medical and Dental pay schemes.

The medical and dental workforce is 83.8% female, with all the medical and dental workforce in quartile 4.



The influence of this group is the contribution of the staff to the hourly rate figures, and thereby to the gender pay gap calculations, the greater representation of male staff having an effect on overall Trust results,

Table 2: Showing the mean and median hourly rate of pay for female and male staff, and the gender pay gap shown as both a monetary value and as a percentage. At 31 March 2025.

	Mean hourly rate of pay	Median hourly rate of pay
Female	20.47	18.66
Male	23.31	19.09
Pay Gap monetary value £	2.84	0.44
Pay Gap percentage value %	12.15	2.28

Table 2 tells us that the mean or average hourly rate for male staff is £2.84 more than for female staff, a percentage pay gap of 12.15%. This is a reduction in the pay gap by 0.73% from the previous year, though the actual monetary pay gap has increased by £0.03 (3 pence).

The median or middle hourly rate for male staff is £0.44 more than for female staff, a percentage pay gap of 2.28%. This is a reduction in the pay gap by 0.01% from the previous year, however the actual monetary pay gap has increased by £0.03 (3 pence).

Table 3 shows a comparison of gender pay gaps for ordinary pay from 2017 to 2025.

Table 3: Showing the mean and median gender pay gap results by percentage from 2017 to 2024.

	Mean Gender Pay Gap	Median Gender Pay Gap	Mean Gender Pay Gap	Median Gender Pay Gap
2017	23.52%	8.48%	£4.55	£1.27
2018	23.87%	7.34%	£4.84	£1.16
2019	22.38%	1.54%	£4.53	£0.24
2020	25.34%	9.19%	£5.56	£1.56
2021	16.24%	4.13%	£3.28	£0.67
2022	14.45%	0.34%	£2.96	£0.05
2023	15.97%	3.16%	£3.48	£0.55
2024	12.88%	2.29%	£2.81	£0.41
2025	12.15%	2.28%	£2.83	£0.44

It will be observed from this table that the gender pay gap in the Trust continues to reduce.

The mean pay gap has nearly halved since reporting began in 2017. This is a positive result as it suggests greater representation of female staff at higher levels, either in management or executive roles, or within the medical and dental professions.

The reduction of the median pay gap has been slower, but as the monetary value shows this is less than 45 pence in the hourly rate, and reflects the efforts to increase representation of both female and male staff across the diversity of Trust roles through the recruitment and career and leadership development opportunities offered by the Trust.

Bonus pay – results for year ending 31 March 2025

Bonus pay for the Trust historically has referred to Clinical Excellence Awards; this was a national scheme that recognised and rewarded consultants who contributed most to the delivery of safe and high-quality care to patients and to continuous improvement of NHS services.

Within the reporting period there was one Clinical Excellence Award made to a member of Trust staff. This was awarded by Warrington and Halton Teaching Hospitals NHS Foundation Trust for contributions within that organisation for a member of staff who retains a joint role across both organisations, as a result this has been reported in the [Warrington and Halton Gender Pay Gap report 2025](#).

Within Bridgewater this means that in the Trust there was no bonus pay in the year 1st April 2024 to 31st March 2025.

Due to the very small numbers of staff involved a comparison with previous years is not provided, however all previous gender pay gap reports can be viewed at <https://bridgewater.nhs.uk/aboutus/equalitydiversity/equalityact2010/>

Equitable and transparent pay

As an employer we are committed to ensuring that our pay practices are transparent, fair, and equitable.

It is important to recognise that the gender pay gap is not the same as equal pay. Equal Pay legislation relates to unequal pay, a difference in pay between a man and a woman, or a group of men and a group of women, doing the same or a similar job (or a job of equal value) – unequal pay is unlawful, unless objectively justified showing the treatment being proportionate as a means to achieving a legitimate business aim.

The gender pay gap shows the difference in average pay of all men and all women employed by an organisation – everyone, in every role. It is possible to have equal pay within an organisation while still having a gender pay gap, however it should be noted that a particularly large gender pay gap can indicate pressing issues needing to be addressed.

As a Trust we operate the national NHS Job Evaluation Scheme and Terms and Conditions of Service. Roles in the Trust are placed within one of these agreed pay grades, with grades being determined based on level of responsibility, qualification, and experience required to effectively undertake the job.

Progression for all staff in Agenda for Change pay bands from 2021 is through the nationally agreed pay step progression process which we have assessed for equality impact internally, noting that this has also had a national equality assessment. We also operate Medical and Dental pay and terms. The Trust works closely with staff-side colleagues to ensure the schemes are implemented fairly and consistently at every stage of employment.

It is important to note is that staff are positioned within the national pay scales based on length of service and experience. Jobs may be rated as equivalent by banding and have staff within the same job role at different points of the pay spine; this will be as a consequential result in pay differentials and differences in hourly

Contact details

Thank you for taking the time to read our gender pay gap report. Should you have any queries or questions or if you would prefer the contents of this report in another language or format, please contact our Equality & Inclusion Manager in the first instance, details below.

Paula Woods (*Director of People and Organisational Development*)

Ruth Besford (*Equality & Inclusion Manager*) ruth.besford@nhs.net

Gender Pay Gap Action Plan 2025 – 2027

The action plan has been developed based on data from the NHS Staff Survey 2024, qualitative data from engagement with the Trust Staff Networks, and review of gender pay gap progress.

Key action	Steps for action	Who	Updates due
Triangulate data from the gender, ethnicity, and disability pay gap reports 2025	<ul style="list-style-type: none"> • Agree disaggregation of data, for example by protected characteristic groups, staff group, unpaid carers, flexible working, or pay band. • Undertake data analysis and review. • Report, with recommendations for next steps through governance. 	EDI Working Group	September 2025
Women's Network	<ul style="list-style-type: none"> • Agree standard operating procedure for network in common with WHH. • Develop communications campaign for network recruitment. • Plan and host re-launch network event. • Recruit joint Chair and Deputy roles. • Agree annual objectives and activities, linked to upcoming mandates, policy, events, and engagement. 	EDI Leads and support, BCH and WHH	September 2025 April 2026

Career progression	<ul style="list-style-type: none"> Engage with Women's Network in use inspired research project looking at experiences and views on career progression in the Trust. 	EDI Working Group	December 2025
Flexible working	<ul style="list-style-type: none"> Monitor and report flexible working requests and approvals in recruitment. Continue to monitor flexible working requests and approvals in the workforce. Engage with Women's Network on Making Flexible Work campaign impacts. 	EDI Working Group Recruitment and Workforce	
Carers support	<ul style="list-style-type: none"> Develop communications campaign with Carers Support Network to highlight existing Trust support. Undertake second carers survey as part of Carers Week 2025 Review and report carers data, including triangulation with carers leave, sickness absence, leavers etc. 	EDI lead	June 2025
Neonatal care leave and pay	<ul style="list-style-type: none"> Review existing policy regarding 	EDI Working Group	August 2025

What the law says - Neonatal care leave and pay - Acas	neonatal care leave.		
Menopause and menstrual health	<ul style="list-style-type: none"> Develop communications campaign and resources to support menopause and menstrual health awareness in partnership with Women's Network 	Women's Network EDI Working Group	September 2025
Employment Rights Bill: <ul style="list-style-type: none"> Unpaid bereavement leave Dismissal protection for pregnant women Flexible working Third party harassment 	<ul style="list-style-type: none"> Review legislative updates in the employment rights bill. Undertake EHIA on proposed or mandatory changes - ensure engagement with Women's Network. 	EDI lead EDI Working Group	TBC
Reciprocal Mentoring For Inclusion	<ul style="list-style-type: none"> Develop a joint proposal with WHH for a RMfI. 	EDI Working Group	December 2025