

Equality Analysis

Increases in employee contributions to the NHS Pension Scheme from 1st April 2014

March 2014

Title:

Equality Analysis – Increases in Employee Contributions to the NHS Pension Scheme from 1st April 2014

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Policy – Equality Analysis

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NHS staff and employers; independent, voluntary sector and "traditional" NHS Trust providers of NHS clinical services

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Equality analysis

Title: Increases in employee contributions to the NHS Pension Scheme from 1st April 2014

DH Business Plan Action: Working with HM Treasury to deliver changes to the NHS Pension Scheme

The Department of Health and Welsh Assembly Government are working with HM Treasury, other public sector pension schemes and with the current NHS Pension Scheme Governance Group to design and implement changes in employee contributions for the NHS Pension Scheme to deliver commitments made in the 2010 Spending Review. This includes the development of necessary changes in regulations.

What are the intended outcomes of this work?

Expenditure on public service pensions over the last decade has increased by a third to £32bn. The costs of pensions are increasing as people live much longer than previous generations – the average 60 year old is living ten years longer now than they did in the 1970s. More of people's lives are now being spent in retirement – between 40 to 45% of adult life compared with around 30% for pensioners in the 1950s. Pensions are therefore in payment for longer.

These additional costs have generally fallen to the taxpayer to underwrite. The view of the Government is that this is unfair and unaffordable. There needs to be a fairer balance between what employees pay and what other taxpayers contribute towards a public service pension.

The Government therefore asked the Independent Public Service Pensions Commission to consider the case for delivering savings on public service pensions within the current spending review period. The Commission concluded that it would be more effective to increase member contributions rather than alter the level and range of benefits provided by pension schemes. The Government therefore announced in the 2010 Spending Review that public sector workers would be asked to contribute more for their pensions. The Spending Review set out plans for savings of £2.8bn per year (including £1bn planned by the previous Government) to be realised by 2014-15. Each public service pension scheme is required to deliver savings equivalent to an average increase of 3.2% in employee contributions over the same period.

Within this context, the Department of Health including Welsh Government representation, have been working with NHS Employers and Trade Unions on the proposed approach to increasing the level of contributions made by members of the NHS Pension Scheme towards their pension in 2014-15. This has been based on the public consultation carried out in 2012/13 and the available opt-out data since April 2012 that has been shared with employers, Trade Unions engaged in the NHS PS Governance arrangements and with HMT.

The Government laid out a series of preferred parameters within which individual public service pension schemes developed their approach to achieving the required savings:

- No increases for the lowest paid;
- Additional protection for those earning under £21k (in practice the increase over the three years is intended to be restricted to 0.6% for those earning below £26.5k);
- Maximum increase over the three years of 6% for any member.

Within these parameters, the Department developed a preferred approach that sought to protect the low paid, apply increases progressively and limit the level of opt out that higher contribution rates may generate. In doing so, the Department considered the salary profiles of both the NHS Pension Scheme members and the wider NHS workforce.

The following table presents the Department's preferred approach based on the consultation and available opt-out data.

The revised approach that the Department intends to apply in increasing NHS Pension Scheme member contributions from 1 April 2014 is set out in the Tables 1 and 2 below:

Table 1: Revised proposed increases in contribution rates

Full Time Equivalent pensionable pay	Contribution rate (before tax relief) 2013/14	Contribution rate (before tax relief) 2014/15	Contribution rate increase in 2014/15 (percentage point)
Up to £15,431	5.0%	5.0%	0%
£15,432 to £21,387	5.3%	5.6%	0.3%
£21,388 to £26,823	6.8%	7.1%	0.3%
£26,824 to £49,472	9.0%	9.3%	0.3%
£49,473 to £70,630	11.3%	12.5%	1.2%
£70,631 to £111,376	12.3%	13.5%	1.2%
Over £111,376	13.3%	14.5%	1.2%

Table 2: Revised proposed increases in contribution rates net of tax relief

Full-time 2013/14 pay	2013/14 contribution net of tax relief	2014/15 contribution net of tax relief	Contribution increase net of tax relief (percentage point)
£15,000	4.00%	4.00%	0%
£20,000	4.24%	4.48%	0.24%
£25,000	5.44%	5.68%	0.24%
£30,000	7.20%	7.44%	0.24%
£40,000	7.20%	7.44%	0.24%
£60,000	6.78%	7.50%	0.72%
£80,000	7.38%	8.10%	0.72%
£130,000	7.98%	8.70%	0.72%

Who will be affected?

The group affected by this policy are members of the NHS Pension Scheme, earning more than £15,431 full-time equivalent per year from 1 April 2014. The increases range from 0% to1.2% and after tax relief 0% to 0.72%.

The NHS Pension Scheme is a statutory, occupational scheme; both members and their NHS employers are generally required to pay a contribution to cover the cost of paying benefits.

Membership of the scheme is not compulsory. Persons who are eligible to join the scheme are:

- Staff directly employed by the NHS,
- Self employed General, Dental and Ophthalmic Practitioners,
- General Medical Practice Staff, and
- Staff of organisations that are granted access to the NHS Pension Scheme via a Direction by the Secretary of State, for example, staff working in hospices, social enterprises and other third sector organisations providing health care.

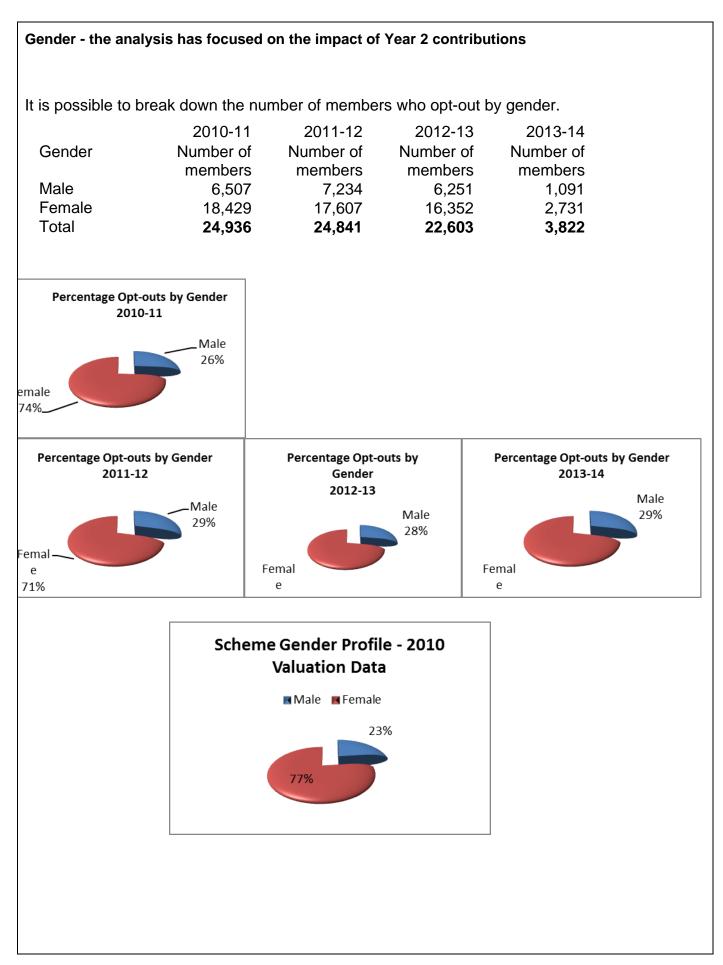
The Scheme currently has approximately 1.3 million active members who pay a range of contributions to the pension scheme according to the level of their whole time equivalent pensionable pay from 5% to 14.5%.

Evidence

What evidence have you considered?

The evidence is based on analysis of the active membership data provided for NHS Pension Scheme valuation as at 31 March 2012 which has been uprated in the same way as for valuation purposes to take account of incomplete data.

In addition, the Technical Advisory Group including DH, TUs, NHS Employers and HMT have been reviewing the available opt-out data from ESR and BSA. Data is not available on why people opt-out from the scheme. A full copy of the opt-out reports for data up to May/July, are attached at Annex A and B. The Governance Group and Technical Advisory Group will continue to monitor the opt-out data as it becomes available. HMT also receive the opt-out data



Analysis by part-time/full-time status - the analysis has focused on the impact of Year 2 contributions

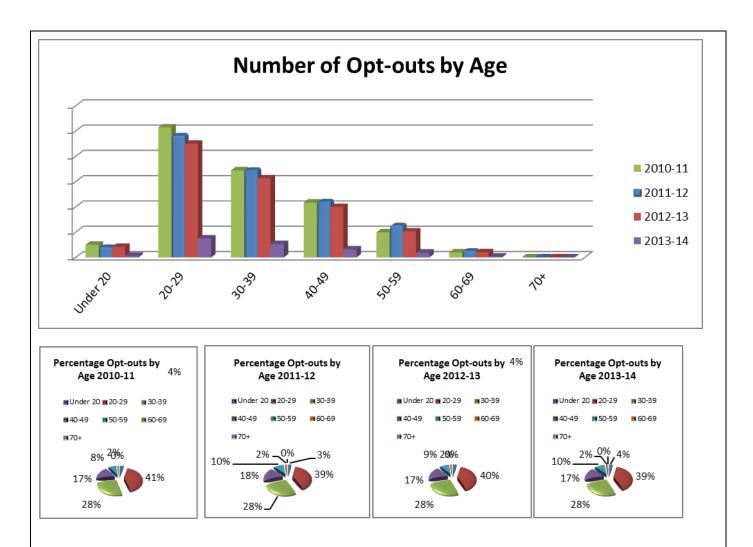
Opt out by Whole Time / Part time status

	Number of members								
	2010-	2011-12	2012-13	2013-14					
	11								
Part Time	11,026	10,498	10,678	1,821					
Whole time	13,733	13,746	11,663	1,921					
Unknown	177	597	262	80					
	24,936	24,841	22,603	3,822					

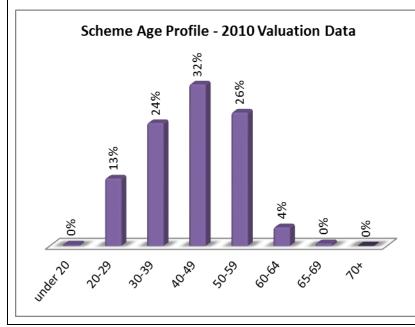
Age – the analysis has focused on the impact of Year 2 contributions.

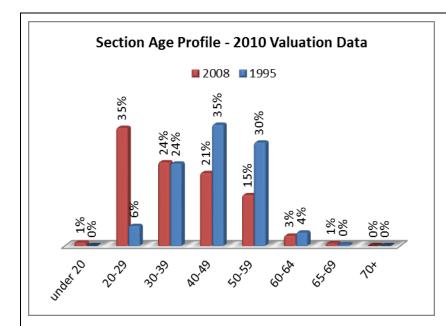
It is possible to break down the number of members who opt-out by age. In this example the members who opted-out have been broken down into eight age ranges. Statistical averages are also provided.

	2010-11	2011-12	2012-13	2013-14
Age	Number of	Number of	Number of	Number of
	members	members	members	members
Under 20	1,012	812	845	137
20-29	10,288	9,640	9,001	1,507
30-39	6,892	6,912	6,266	1,066
40-49	4,344	4,419	3,999	640
50-59	1,990	2,527	2,065	389
60-64	402	522	416	78
70+	8	9	11	5
Total	24,936	24,841	22,603	3,822
Mean	33	34	34	34
Mode	23	23	24	24



1.1. Scheme Age Profile – 2010 Valuation Data





Opt out by disability, ethnicity, sexual orientation, employer type and Whole Time / Part time status.

Opt out by Disability				
	Nur	nber of meml	oers	
Section	2010-	2011-12	2012-13	2013-14
ESR Response - see	0	1	0	0
Learning Disability / Difficulty	20	17	28	5
Long-Standing Illness	20	23	17	3
Mental Health condition	10	13	14	0
No	6,399	6,630	6,861	971
Not Declared	1,570	1,632	1,379	230
Other	17	11	13	3
Physical Impairment	11	5	11	2
Sensory Impairment	4	10	7	0
Unknown	16,733	16,354	14,104	2,585
Yes - unspecified	152	145	169	23
	24,936	24,841	22,603	3,822

Opt out by Ethnicity					
	Νι	umber of memb	pers		
Section	2010-	2011-12	2012-13	2013-14	
	11				
Any other	147	165	172	22	
Asian	1,432	1,597	1,306	230	
Black	1,052	1,042	1,035	178	
Chinese	57	76	65	14	
Filipino	114	80	69	15	
Japanese	3	1	2	0	
Malaysian	6	7	9	1	
Mixed	234	240	237	37	
Not specified	2,358	2,200	1,915	425	
Other	17	22	37	5	
Unknown	10,369	10,004	9,016	1,663	
White	9,136	9,395	8,728	1,232	
· · · · · · · · · · · · · · · · · · ·	24,936	24,841	22,603	3,822	
	21,000	21,011	22,000	0,022	
Opt out by Sexual Orientation					
	Νι	umber of memb	oers		
Section	2010-	2011-12	2012-13	2013-14	
	11	2011 12	2012 10	201011	
Bisexual	50	52	55	7	
Gay	96	81	98	12	
Heterosexual	6,688	6,863	6,873	940	
Lesbian	36	42	41	4	
Not Disclosed	1,019	1,027	771	133	
Unknown	17,047	16,776	14,765	2,726	
onatown	24,936	24,841	22,603	3,822	
	21,000	21,011	22,000	0,022	
Opt out by Employer Type					
	Νι	umber of memb	bers		
	2010-	2011-12	2012-13	2013-14	
	11				
PCT-LHB	4,609	2,918	1,513	137	
Trust	8,545	8,523	8,223	1,481	
Foundation Trust	9,974	11,234	11,015	1,841	
Directions	327	131	123	5	
SHA & Arms Length	609	639	438	70	
Section 22 of the Health & Social	1	4	1	0	
Section 31 of The Health Act	5	4	1	0	
CIC	11	73	52	4	
Community Health	67	405	513	100	
GP Practices	573	559	514	93	
Unknown	215	351	210	91	
	24,936	24,841	22,603	3,822	
	,000	,0	,000	-, -	

Pregnancy, Maternity and Carers

Contributions to the NHS Pension Scheme are based on salary or level of pensionable earnings. We do not consider that the proposal to increase contributions raises any specific equality issues in relation to pregnancy, maternity or carers. The issue of part-time working is relevant here, and is considered fully in the section above.

Other identified groups

Contributions to the NHS Pension Scheme are based on salary or level of pensionable earnings. NHS payscales (i.e. Agenda for Change) are applied uniformly across all participating NHS employers nationally, underpinned by Job Evaluation for Agenda for Change and VSMs, and equally to all staff in similar grades. As such we do not consider that the requirement to contribute to the NHS Pension Scheme as a condition of membership, nor the proposal to increase such contributions, impacts negatively on staff from different socio-economic groups or with a differing residency status.

Engagement and involvement Was this work subject to the requirements of the cross-government <u>Code of Practice on</u> <u>Consultation?</u> No

How have you engaged stakeholders in gathering evidence or testing the evidence available?

Following the announcement in Spending Review 2010, that public service employees would need to make increased contributions to Public Service Pension Schemes, in year 1 (2012/13) we carried out a public consultation and a further regulatory consultation. We have since then continued to discuss both the effect of year 1 and the proposals for year 2 (2013/2014), and the proposals for year 3 (2014/2015) with the NHS Pension Scheme Governance Group and the Technical Advisory Group. The Governance Group and Technical Advisory Group consists of a Management Side containing representatives of NHS Organisations, a Staff Side consisting of representatives of the recognised NHS trade unions, the Department of Health, the Government Actuary's Department (advising DH), and First Actuarial, an independent actuary, providing independent actuarial advice to the governance group as a whole. These groups have seen the available opt-out data.

In addition, HMT have received the opt-out reports.

How have you engaged stakeholders in testing the policy or programme proposals?

The Technical Advisory Group has discussed monthly opt-out data from April 2012 through to May/July 2013, and they will continue to monitor this data. The combination of both reports using the available ESR data and the BSA data provides evidence that there is an increase in scheme membership (both FTE and Headcount) of between 2.2% & 2.4% in the period March - May 2013. This represents the most significant movement in numbers since the production of these reports was initiated in October 2011 and is probably down to the implications of auto-enrolment and the NHS organisational changes.

For each engagement activity, please state who was involved, how and when they were engaged, and the key outputs:

• Regular meetings with Technical Advisory Group and Governance Group – secretariat by NHS Employers. They were engaged on a monthly basis and provided the reports

- from both available BSA and ESR data on the opt-out position.
- NHS BSA developing the reports and input into Governance Groups
- HMT provided with monthly reports
- Pension ESG DH managed group that includes NHS BSA, NHS Employer and ESR representation

Summary of Analysis

From the available data in the ESR and BSA reports at Annex A and B – the combination of both reports using the available ESR data and the BSA data provides evidence that there is an increase in scheme membership (both FTE and Headcount) of between 2.2% & 2.4% in the period March - May 2013. This represents the most significant movement in numbers since the production of these reports was initiated in October 2011 and is probably down to the implications of auto-enrolment and the NHS organisational changes.

Impact of proposals on eliminating discrimination, harassment and victimisation, advancing equality of opportunity, or promoting good relations between groups

Pension benefits received from the NHS Pension Scheme are the result of contributions paid into the scheme based on a member's salary or level of pensionable earnings, however increases are currently distributed progressively, in line with HMT parameters, with the higher paid paying proportionately more. This is fair because in final salary pension schemes, higher earners derive more benefit per pound contributed over the course of their career than those on lower incomes. The principles that might apply for a career average scheme going forward are being discussed further by the Governance and Technical Advisory Groups, but these discussions will need to recognise that for some time there will remain to be a final salary link and the need to manage opt-out potential particularly for the low paid and new starters.

What is the overall impact?

The NHS Pension Scheme is open to all NHS staff to join unless they are already in receipt of NHS pension benefits. The above analysis demonstrates the expectation that increasing contributions does not give rise to equality issues, and the available data supports that conclusion. HM Treasury estimated that the rate of staff opting out of public service pension schemes is expected to increase by up to one percent of pay bill over the three years as a result of the proposed increase in contributions The combination of both reports using the available ESR data and the BSA data provides evidence that there is actually an increase in scheme membership (both FTE and Headcount) of between 2.2% & 2.4% in the period March - May 2013. This represents the most significant movement in numbers since the production of these reports was initiated in October 2011 and is probably down to the implications of auto-enrolment and the NHS organisational changes.

The benefits of NHS Pension Scheme membership and return on investment per pound contributed remain significant in comparison to commercially available alternatives and should remain attractive to staff.

In order to fulfil the disclosure requirements, all staff will receive a payslip leaflet outlining the position on year 3 employee contributions, once the regulatory consultation has concluded – this is likely to be

in February/March 2014.

Addressing the impact on equalities

We do not consider that the current operation of the NHS Pension Scheme gives rise to any impact on equalities. In considering the impact of the proposed contribution increases, the evidence examined does not indicate any gaps or opportunities upon which to take action. We have searched for independent research evidence on any differential impact of public pension reforms, based on socio-economic status, and also in respect of excluded or marginalised groups, but have failed to identify any.

For the record Name of person who carried out this assessment: Julie Badon

Date assessment completed: September 2013

Name of responsible Director/Director General: Gavin Larner, Director of NHS Pay, Pensions & Employee Relations

Date assessment was signed:

WORKFORCE DATA ANALYSIS TEAM - NHS PENSION SCHEME OPT-OUT REPORT

JULY 2013 (MAY DATA)

1. Introduction

This paper summarises the latest opt out information provided by the DH's Workforce Data Analysis Team (WDAT). The information is presented in the manner previously shared at TAG /Governance Group meetings and builds on the previous opt out data. It does so by providing the **May 2013 data** and comparing this data with both the March 2013 and the initial October2011 results. The caveats previously detailed surrounding the accuracy of this information remain and its value appears to be in highlighting trends rather than providing accurate quantifications of scheme opt outs.

2. Findings from Updated Information

The tables that follow each of the Headcount and FTE analyses aim to illustrate the changes to potential scheme opt outs. They key points that emerge are:

- There is an increase in scheme membership (both FTE and Headcount) of between 2.2% & 2.4% in the period March May 2013. This represents the most significant movement in numbers since the production of these reports was initiated in October 2011.
- Whilst the data does not confirm the reason for this increase, it appears reasonable to assume that it is due to the effect of Auto Enrolment within NHS organisations. The fact that the increases in scheme membership are predominately within the lower AfC Bands supports this assessment.

This potential impact of Auto Enrolment unfortunately masks the identification of any potential scheme opt-outs following the introduction of Year 2 contribution increases. At the present time, the opt-out reporting produced by the BSA may provide more meaningful opt-out information given this situation.

Estimated Percentage of Staff with Pension: FTEs by Staff Group and Agenda for Change Band

	Staff wi	th pension	on FTEs	by Agen	da for C	hange E	Band (Oc	tober 20	11)					
	1	2	3	4	5	6	7	8a	8b	8c	8d	9	Non AfC	Total
Doctor	-	-	-	-	-	-	-	-	-	-	-	-	93%	93%
Qualified nursing, midwifery & health visiti	-	-	-	-	85%	90%	94%	95%	96%	97%	-	-	55%	88%
Qualified Scientific, therapeutic and techn	-	-	82%	83%	88%	92%	94%	95%	97%	96%	97%	-	70%	91%
Qualified Ambulance Staff	-	-	-	95%	96%	98%	98%	-	-	-	-	-	-	96%
Support to Clinical Staff	69%	77%	82%	85%	84%	89%	91%	93%	-	-	-	-	60%	80%
Central Functions & Hotel, Property & Es	64%	75%	80%	84%	85%	88%	91%	93%	95%	-	-	-	58%	79%
Managers	-	-	-	-	-	88%	91%	94%	96%	96%	98%	97%	90%	94%
All Non-Medical	65%	77%	81%	85%	86%	90%	93%	95%	96%	96%	97%	97%	67%	85%
All	65%	77%	81%	85%	86%	90%	93%	95%	96%	96%	97%	97%	89%	86%

	Staff wi	aff with pension FTEs by Agenda for Change Band (March 2013)												
	1	2	3	4	5	6	7	8a	8b	8c	8d	9	Non AfC	Total
Doctor	-	-	-	-	-	-	-	-	-	-	-	-	92%	92%
Qualified nursing, midwifery & health visiti	-	-	-	-	85%	90%	94%	95%	96%	97%	-	-	61%	88%
Qualified Scientific, therapeutic and techn	-	-	82%	83%	88%	91%	94%	95%	97%	97%	96%	-	71%	91%
Qualified Ambulance Staff	-	-	-	94%	96%	97%	98%	-	-	-	-	-	-	96%
Support to Clinical Staff	70%	78%	82%	85%	84%	89%	90%	93%	-	-	-	-	62%	81%
Central Functions & Hotel, Property & Es	65%	74%	80%	84%	84%	87%	90%	92%	95%	-	-	-	59%	79%
Managers	-	-	-	-	87%	88%	91%	93%	95%	96%	97%	96%	88%	93%
All Non-Medical	66%	77%	82%	85%	86%	90%	93%	94%	96%	96%	97%	96%	68%	85%
All	66%	77%	82%	85%	86%	90%	93%	94%	96%	96%	97%	96%	89%	86%

Staff with pension FTEs by Agenda for Change Band (May 2013)

5

88%

90%

96%

87%

87%

88%

88%

6

91%

93%

97%

90%

89%

89%

92%

92%

7

95%

95%

99%

91%

91%

91%

94%

94%

8a

96%

96%

93%

93%

94%

95%

95%

8b

97%

97%

94%

95%

96%

96%

8c

98%

97%

96%

96%

96%

8d

96%

97%

97%

97%

9

97%

96%

96%

Non AfC

93%

62%

72%

62%

64%

86%

69%

90%

Total

93%

90%

92%

96%

84%

82%

93%

87%

88%

4

86%

94%

87%

86%

87%

87%

1

75%

69%

70%

70%

Doctor

Managers

All

All Non-Medical

Qualified nursing, midwifery & health visiti

Qualified Scientific, therapeutic and techn

Central Functions & Hotel, Property & Es

Qualified Ambulance Staff

Support to Clinical Staff

2

82%

78%

81%

81%

3

85%

85%

82%

85%

85%

October 2	011		
AfC 1 - 5	AfC 6 - 9	Non AfC	Total
-	-	93%	93%
85%	92%	55%	88%
86%	93%	70%	91%
96%	98%	-	96%
80%	90%	60%	80%
80%	89%	60%	82%
74%	92%	52%	74%
81%	92%	67%	85%
82%	92%	89%	86%

March 201	3		
AfC 1 - 5	AfC 6 - 9	Non AfC	Total
-	-	92%	92%
85%	91%	61%	88%
86%	93%	71%	91%
96%	98%	-	96%
81%	89%	62%	81%
80%	89%	62%	83%
73%	91%	48%	74%
82%	94%	68%	85%
82%	94%	89%	86%

May 2013			
AfC 1 - 5	AfC 6 - 9	Non AfC	Total
-	-	93%	93%
88%	93%	62%	90%
89%	94%	72%	92%
96%	98%	-	96%
84%	90%	62%	84%
83%	90%	68%	85%
77%	92%	49%	77%
85%	95%	69%	87%
85%	95%	90%	88%

Note: '-' indicates groups with fewer than 500 staff. Note: numbers highlighted in grey background indicates groups with fewer than 5,000 staff.

	FTE poi	TE points increase between March 2013 and May 2013												
	1	2	3	4	5	6	7	8a	8b	8c	8d	9	Non AfC	Total
Doctor	-	-	-	-	-	-	-	-	-	-	-	-	1.4%	1.4%
Qualified nursing, midwifery & health visiti	-	-	-	-	3.0%	1.8%	1.1%	0.8%	0.7%	0.9%	-	-	1.1%	2.2%
Qualified Scientific, therapeutic and techn	-	-	2.7%	3.0%	2.0%	1.4%	1.0%	0.5%	0.4%	0.1%	0.0%	-	0.6%	1.3%
Qualified Ambulance Staff	-	-	-	0.1%	0.1%	-0.1%	0.4%	-	-	-	-	-	-	0.0%
Support to Clinical Staff	5.4%	4.0%	2.8%	2.3%	2.3%	1.2%	1.3%	0.4%	-	-	-	-	0.5%	3.1%
Central Functions & Hotel, Property & Es	4.0%	3.9%	2.7%	2.2%	2.1%	1.7%	1.2%	1.0%	-0.6%	-	-	-	4.8%	2.6%
Managers	-	-	-	-	-	0.6%	0.9%	0.4%	0.5%	0.3%	-0.2%	0.2%	-1.6%	0.2%
All Non-Medical	4.2%	4.0%	2.8%	2.3%	2.6%	1.7%	1.1%	0.6%	0.4%	0.4%	0.0%	0.2%	1.1%	2.3%
All	4.2%	4.0%	2.8%	2.3%	2.6%	1.7%	1.1%	0.6%	0.4%	0.4%	0.0%	0.1%	1.2%	2.2%

March 201	3 and May	/ 2013	
AfC 1 - 5	AfC 6 - 9	Non AfC	Total
	-	1.4%	1.4%
3.0%	1.5%	1.1%	2.2%
2.2%	1.0%	0.6%	1.3%
0.1%	-0.0%	-	0.0%
3.2%	1.2%	0.5%	3.1%
2.5%	1.4%	4.8%	2.6%
3.7%	1.2%	-1.6%	0.2%
3.0%	1.3%	1.1%	2.3%
3.0%	1.3%	1.2%	2.2%

	FTE poi	nts incre	ase betv	ween Oc	tober 20	11 and M	<i>l</i> lay 2013	;						
	1	2	3	4	5	6	7	8a	8b	8c	8d	9	Non AfC	Total
Doctor	-	-	-	-	-	-	-	-	-	-	-	-	0.7%	0.7%
Qualified nursing, midwifery & health visiti	-	-	-	-	3.3%	1.5%	0.8%	0.6%	0.4%	0.7%	-	-	6.7%	2.2%
Qualified Scientific, therapeutic and techn	`	-	2.7%	3.6%	1.9%	1.1%	0.9%	0.3%	0.6%	0.7%	-1.2%	-	2.2%	1.2%
Qualified Ambulance Staff	-	-	-	-0.4%	-0.3%	-0.3%	0.6%	-	-	-	-	-	-	-0.3%
Support to Clinical Staff	6.6%	4.8%	3.2%	2.2%	2.3%	0.8%	-0.0%	0.3%	-	-	-	-	2.5%	3.5%
Central Functions & Hotel, Property & Es	4.3%	3.7%	2.8%	2.1%	1.4%	1.4%	0.5%	-0.5%	-0.2%	-	-	-	5.6%	2.5%
Managers	-	-	-	-	-	0.2%	0.3%	-0.3%	-0.5%	-0.2%	-1.0%	-0.7%	-3.9%	-0.6%
All Non-Medical	4.7%	4.6%	3.1%	2.2%	2.7%	1.3%	0.8%	0.2%	-0.1%	0.1%	-0.9%	-0.6%	2.2%	2.4%
All	4.7%	4.6%	3.1%	2.2%	2.7%	1.3%	0.8%	0.2%	-0.1%	0.1%	-0.9%	-0.7%	0.7%	2.2%

October 2	011 and M	ay 2013	
AfC 1 - 5	AfC 6 - 9	Non AfC	Total
-	-	0.7%	0.7%
3.3%	1.1%	6.7%	2.2%
2.3%	0.8%	2.2%	1.2%
-0.3%	-0.2%	-	-0.3%
3.6%	0.6%	2.5%	3.5%
2.7%	0.9%	5.6%	2.5%
3.2%	0.2%	-3.9%	-0.6%
3.3%	3.1%	2.2%	2.4%
3.3%	3.1%	0.7%	2.2%

Estimated Percentage of Staff with Pension: Headcounts by Staff Group and Agenda for Change Band

	Staff wi	th pensi	on Head	counts b	y Agend	la for Ch	ange Ba	and (Octo	ober 201	1)				
	1	2	3	4	5	6	7	8a	8b	8c	8d	9	Non AfC	Total
Doctor	-	-	-	-	-	-	-	-	-	-	-	-	91%	91%
Qualified nursing, midwifery & health visiti	-	-	-	-	84%	89%	93%	94%	96%	97%	-	-	57%	87%
Qualified Scientific, therapeutic and techn	-	79%	81%	82%	87%	91%	93%	95%	96%	94%	95%	-	70%	91%
Qualified Ambulance Staff	-	-	-	94%	95%	97%	97%	-	-	-	-	-	-	96%
Support to Clinical Staff	66%	76%	81%	84%	84%	88%	90%	93%	-	-	-	-	60%	79%
Central Functions & Hotel, Property & Es	62%	73%	79%	83%	85%	87%	90%	93%	94%	-	-	-	57%	77%
Managers	-	-	-	-	-	88%	91%	93%	95%	96%	97%	97%	89%	93%
All Non-Medical	63%	75%	80%	84%	85%	89%	93%	94%	95%	95%	97%	96%	66%	84%
All	63%	75%	80%	84%	85%	89%	93%	94%	95%	95%	97%	96%	88%	85%

	Staff wi	th pensi	on Heado	counts b	y Agend	la for Ch	ange Ba	and (Mar	ch 2013)					
	1	2	3	4	5	6	7	8a	8b	8c	8d	9	Non AfC	Total
Doctor	-	-	-	-	-	-	-	-	-	-	-	-	91%	91%
Qualified nursing, midwifery & health visiti	-	-	-	-	85%	88%	93%	94%	95%	96%	-	-	63%	87%
Qualified Scientific, therapeutic and techn	-	78%	81%	83%	87%	91%	93%	95%	96%	95%	94%	-	72%	91%
Qualified Ambulance Staff	-	-	-	93%	95%	97%	98%	-	-	-	-	-	-	95%
Support to Clinical Staff	68%	77%	81%	84%	84%	88%	89%	92%	-	-	-	-	62%	80%
Central Functions & Hotel, Property & Es	63%	73%	79%	83%	84%	87%	90%	91%	94%	-	-	-	57%	77%
Managers	-	-	-	-	86%	87%	90%	93%	94%	95%	96%	96%	86%	92%
All Non-Medical	63%	76%	81%	84%	85%	89%	92%	94%	95%	95%	96%	95%	67%	84%
All	63%	76%	81%	84%	85%	89%	92%	94%	95%	95%	96%	95%	88%	85%

October 2	011		
AfC 1 - 5	AfC 6 - 9	Non AfC	Total
	-	91%	91%
84%	91%	57%	87%
86%	93%	70%	91%
95%	97%	-	96%
79%	89%	60%	79%
79%	89%	60%	82%
70%	91%	47%	71%
80%	91%	66%	84%
80%	91%	88%	85%

March 201	3		
AfC 1 - 5	AfC 6 - 9	Non AfC	Total
-	-	91%	91%
85%	90%	63%	87%
86%	93%	72%	91%
95%	97%	-	95%
80%	89%	62%	80%
80%	89%	62%	82%
70%	90%	40%	70%
81%	91%	67%	84%
81%	91%	88%	85%

	Staff with	th pension	on Heado	ounts b	y Agend	la for Ch	nange Ba	and (May	/ 2013)					
	1	2	3	4	5	6	7	8a	8b	8c	8d	9	Non AfC	Total
Doctor	-	-	-	-	-	-	-	-	-		-	-	93%	93%
Qualified nursing, midwifery & health visiti	-	-	-	-	88%	90%	94%	95%	96%	97%	-	-	64%	90%
Qualified Scientific, therapeutic and techn	-	80%	84%	86%	89%	92%	94%	95%	96%	96%	94%	-	73%	92%
Qualified Ambulance Staff	-	-	-	94%	95%	97%	99%	-	-	-	-	-	-	95%
Support to Clinical Staff	73%	81%	84%	86%	86%	89%	91%	93%	-	-	-	-	62%	83%
Central Functions & Hotel, Property & Es	67%	77%	82%	85%	86%	89%	91%	92%	94%	-	-	-	62%	80%
Managers	-	-	-	-	87%	88%	91%	93%	95%	96%	96%	95%	85%	92%
All Non-Medical	67%	80%	84%	86%	88%	91%	94%	94%	95%	96%	96%	95%	69%	86%
All	67%	80%	84%	86%	88%	91%	94%	94%	95%	96%	96%	95%	89%	87%

May 2013			
AfC 1 - 5	AfC 6 - 9	Non AfC	Total
-	-	93%	93%
88%	92%	64%	90%
88%	94%	73%	92%
95%	97%	-	95%
83%	90%	62%	83%
82%	90%	68%	84%
74%	91%	41%	74%
84%	92%	69%	86%
84%	92%	89%	87%

Note: '-' indicates groups with fewer than 500 staff. Note: numbers highlighted in grey background indicates groups with fewer than 5,000 staff.

	Headco	unt poin	ts increa	se betw	een Mar	ch 2013	and May	y 2013						
	1	2	3	4	5	6	7	8a	8b	8c	8d	9	Non AfC	Total
Doctor	-	-	-	-	-	-	-	-	-	-	-	-	1.5%	1.5%
Qualified nursing, midwifery & health visiti	-	-	-	-	3.0%	2.0%	1.3%	1.0%	0.8%	0.8%	-	-	1.3%	2.3%
Qualified Scientific, therapeutic and techn	-	2.2%	2.6%	2.9%	2.0%	1.4%	1.0%	0.5%	0.7%	0.1%	0.2%	-	0.6%	1.3%
Qualified Ambulance Staff	-	-	-	0.2%	0.1%	-0.1%	0.5%	-	-	-	-	-	-	0.1%
Support to Clinical Staff	5.4%	3.9%	2.8%	2.3%	2.3%	1.2%	1.5%	0.3%	-	-	-	-	0.5%	3.1%
Central Functions & Hotel, Property & Es	4.0%	3.8%	2.7%	2.2%	2.1%	1.8%	1.2%	1.1%	-0.5%	-	-	-	5.0%	2.7%
Managers	-	-	-	-	1.2%	0.7%	1.1%	0.5%	0.6%	0.4%	-0.1%	-0.2%	-1.1%	0.3%
All Non-Medical	4.2%	3.9%	2.8%	2.3%	2.6%	1.8%	1.2%	0.7%	0.5%	0.4%	0.1%	-0.0%	1.4%	2.4%
All	4.2%	3.9%	2.8%	2.3%	2.6%	1.8%	1.2%	0.7%	0.5%	0.4%	0.2%	-0.5%	1.4%	2.3%

March 201	3 and May	/ 2013	
AfC 1 - 5	AfC 6 - 9	Non AfC	Total
-	-	1.5%	1.5%
3.0%	1.7%	1.3%	2.3%
2.2%	1.0%	0.6%	1.3%
0.1%	-0.0%	-	0.1%
3.2%	1.2%	0.5%	3.1%
2.4%	1.4%	5.0%	2.7%
3.9%	1.4%	-1.1%	0.3%
3.0%	1.3%	1.4%	2.4%
3.0%	1.3%	1.4%	2.3%

	Headco	eadcount points increase between October 2011 and May 2013												
	1	2	3	4	5	6	7	8a	8b	8c	8d	9	Non AfC	Total
Doctor	-	-	-	-	-	-	-	-	-	-	-	-	1.5%	1.5%
Qualified nursing, midwifery & health visiti	-	-	-	-	3.2%	1.6%	0.9%	0.7%	0.4%	0.2%	-	-	7.1%	2.2%
Qualified Scientific, therapeutic and techn	-	1.0%	2.6%	3.7%	2.0%	1.1%	0.9%	0.3%	0.7%	1.2%	-1.1%	-	2.8%	1.2%
Qualified Ambulance Staff	-	-	-	-0.4%	-0.3%	-0.3%	1.1%	-	-	-	-	-	-	-0.2%
Support to Clinical Staff	7.3%	4.7%	3.3%	2.2%	2.3%	1.0%	0.2%	0.2%	-	-	-	-	2.7%	3.6%
Central Functions & Hotel, Property & Es	4.5%	3.7%	2.7%	2.2%	1.5%	1.5%	0.6%	-0.4%	-0.4%	-	-	-	4.7%	2.7%
Managers	-	-	-	-	-	0.1%	0.6%	-0.2%	-0.3%	-0.2%	-1.0%	-1.2%	-3.9%	-0.6%
All Non-Medical	4.9%	4.5%	3.2%	2.2%	2.7%	1.4%	0.9%	0.3%	0.1%	0.3%	-0.8%	-0.9%	2.6%	2.5%
All	4.9%	4.5%	3.2%	2.2%	2.7%	1.4%	0.9%	0.3%	0.1%	0.3%	-0.8%	-1.3%	1.5%	2.4%

October 2	011 and M	ay 2013	
AfC 1 - 5	AfC 6 - 9	Non AfC	Total
-	-	1.5%	1.5%
3.2%	1.3%	7.1%	2.2%
2.4%	0.8%	2.8%	1.2%
-0.3%	-0.0%	-	-0.2%
3.7%	0.8%	2.7%	3.6%
2.7%	1.0%	4.7%	2.7%
3.5%	0.3%	-3.9%	-0.6%
3.3%	1.0%	2.6%	2.5%
3.3%	1.0%	1.5%	2.4%

September 2012 Headcount / FTEs by Staff Group and Agenda for Change Band

	Headcount	adcount by Agenda for Change band as of September 2012												
	1	2	3	4	5	6	7	8a	8b	8c	8d	9	Non AfC	Total
Doctor	0	0	0	0	0	0	0	0	0	0	0	0	107,242	107,242
Qualified nursing, midw if ery & health visiting staff	0	85	342	182	166,824	109,739	55,089	10,290	2,937	968	239	50	2,610	346,410
Qualified Scientific, therapeutic and technical staff	14	537	2,656	7,256	29,342	49,071	39,705	15,023	5,947	2,850	1,434	333	1,630	153,472
Qualified Ambulance Staff	0	0	0	2,697	11,548	3,370	845	102	60	18	2	0	14	18,645
Support to Clinical Staff	5,535	141,522	112,179	56,015	14,863	7,593	2,410	581	186	66	41	4	5,385	343,927
Central Functions & Hotel, Property & Estate	35,681	32,492	28,016	26,303	21,122	16,263	11,179	3,335	1,175	354	212	23	2,637	177,862
Managers	1	8	42	126	532	2,067	6,257	8,673	6,844	4,920	3,093	1,067	3,786	37,314
All Non-Medical	41,231	174,644	143,235	92,579	244,231	188,103	115,485	38,004	17,149	9,176	5,021	1,477	16,062	1,077,630
All	41,231	174,644	143,235	92,579	244,231	188,103	115,485	38,004	17,149	9,176	5,021	1,477	123,306	1,184,898

	FTE by Age	by Agenda for Change band as of September 2012												
	1	2	3	4	5	6	7	8a	8b	8c	8d	9	Non AfC	Total
Doctor	0	0	0	0	0	0	0	0	0	0	0	0	100,899	100,899
Qualified nursing, midw if ery & health visiting staff	-	82	334	168	145,543	93,295	49,622	9,718	2,837	945	233	50	2,232	305,060
Qualified Scientific, therapeutic and technical staff	13	439	2,181	6,106	26,660	41,549	32,905	12,605	5,066	2,425	1,291	310	1,319	132,869
Qualified Ambulance Staff	-	-	-	2,523	10,964	3,250	829	101	60	18	2	-	9	17,755
Support to Clinical Staff	4,051	113,821	94,533	48,495	13,705	6,990	2,200	546	177	63	37	4	4,542	289,165
Central Functions & Hotel, Property & Estate	23,897	25,983	24,070	23,934	19,747	15,253	10,605	3,187	1,131	331	200	22	2,200	150,558
Managers	1	7	35	113	491	1,972	5,892	8,287	6,589	4,778	3,011	1,036	3,439	35,650
All Non-Medical	27,961	140,331	121,154	81,338	217,110	162,310	102,053	34,444	15,859	8,560	4,774	1,422	13,742	931,058
All	27,961	140,331	121,154	81,338	217,110	162,310	102,053	34,444	15,859	8,560	4,774	1,422	114,641	1,031,957

Annex B

Increased Employee Contributions Opt-out Management Information

24 July 2013

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	Bac Cor Tim Opt 7.1. 7.2. 7.3. 7.4. 7.5. 7.6. Fime	Purpose Background and scope Context Timeliness of reports Opt-Out Forms Received Opt-out Analysis 7.1. Opt-out and joiners by month 7.2. Opt-out by age 7.3. Scheme Age Profile – 2010 Valuation Data 7.4. Opt-out by gender 7.5. Opt-out by scheme section 7.6. Opt out by disability, ethnicity, sexual orientation, employer type and Who Fime / Part time status 7.7. Scheme active membership – 2010 Valuation Data

The purpose of this document is to demonstrate management information available about those members who opt-out of the NHS Pension Scheme.

Every employee who is eligible to join the NHS Pension Scheme is automatically enrolled and becomes a member unless they opt-out. A member may opt-out of the NHS Pension Scheme at any time.

NHSBSA Pensions is currently able to produce very little management information about those employees who opt-out of the NHS Pension Scheme within the first pay period of employment and therefore never become members. This is largely due to the fact that the form to opt-out (SD502) only records the decision to opt-out and this is the only information received by NHSBSA Pensions for employees who opt-out on commencement of employment. The information concerning this group is therefore currently restricted to the volume of opt-out forms received.

NHSBSA Pensions does not collect or hold any information concerning a member's reason for opting-out.

Where an employee opts-out of the NHS Pension Scheme after the first pay period they become a member of the NHS Pension Scheme. NHSBSA Pensions therefore holds much more reportable information about this group.

In order to put the opt-out management information into context, some management information about the scheme membership is included. Whilst the management information about opt-out is useful in its own right it is important to view it in the context of the scheme to aid correct interpretation of the data. For example the opt-out information shows the majority of members who opt-out fall into two job types and therefore one may conclude that the high incidence of opt-out may be due to job type. However, when viewed in context of the scheme it can be seen that the opt-outs correlate to the scheme job type profile and a higher number of opt-outs would be expected in the job types with the higher population of members.

The information at point 5 Opt out Forms Received is generally available within one week of the end of the previous month. No further analysis is carried out on these forms and it is most important to note that the figures show only the numbers of forms received by the NHSBSA in each month. Many of those forms will have been signed in earlier months; the NHSBSA has no control over when employers submit these. Nevertheless, the report is an indicator of the level of opt-out activity. (Note that historical information is held for several years. This will be provided as soon as it has been extracted.)

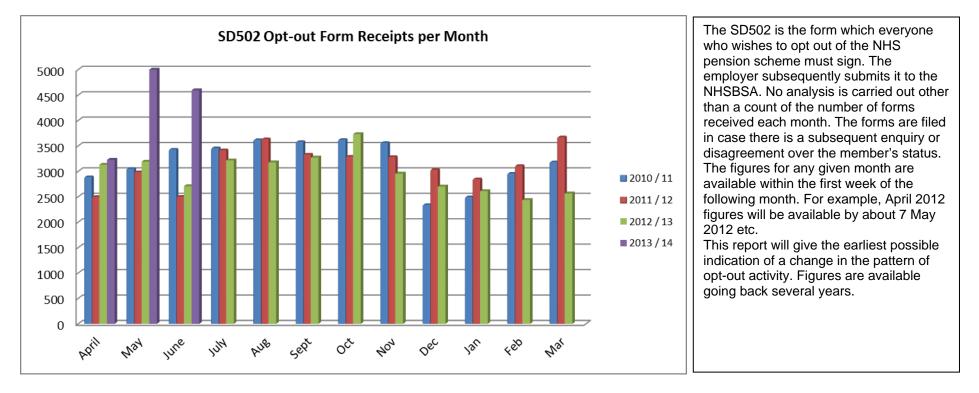
Every person who opts out of the NHS pension scheme *must* complete one of these forms, so these figures are a true record of the total number of opt-outs, including those in the first pay period. This is particularly significant because those who opt out in the first pay period, in other words before receiving their first pay, do not appear on the NHSBSA database as a scheme member. Therefore these people do not appear in any of the other analyses.

The analyses at point 6 Opt out Analysis show only scheme members who have opted out and exclude new employees who opted out in their first pay period. The information is submitted by employers through ESR or Pensions Online and the time lag for receipt is up to six weeks. This is outside NHSBSA control. Additionally, many opt-outs are processed retrospectively by employers, meaning that the true number for a given month will only be known some time later.

For example, people opting out of the scheme in April 2012 might have their paperwork processed by their employers in April, May or June. The opt-out paperwork, ESR or Pensions Online notification could arrive at the NHSBSA in April, May, June or July. Assuming that reports are generated every month, the numbers of opt-outs shown for April will increase each time. The picture will become progressively more complete, but we would not expect to see a fuller picture for April until July or even August.

SD 502 Throughput of receipts per month into Comms Centre

	April	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Total for year	Mean
2010 / 11	2886	3051	3428	3455	3617	3578	3620	3559	2339	2491	2955	3179	38158	3180
2011 / 12	2497	2985	2501	3416	3633	3332	3291	3283	3031	2846	3108	3670	37593	3133
2012 / 13	3129	3190	2707	3215	3175	3271	3731	2955	2700	2610	2435	2564	35682	2974
2013 / 14	3225	5000 ¹	4595										12820	4273

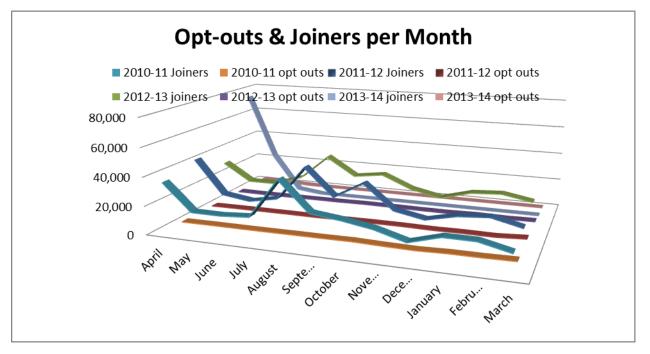


¹ The rise in the number of opt-out forms received may well be a combination of increased contributions in April 2013 and the introduction of Auto Enrolment which automatically brings people into the Scheme.

7.1. Opt-out and joiners by month

It is possible to break down the number of members who opt-out by month. The number of joiners reflects the number of joiner events and it should be noted that one member may have more than one joiner event in the reporting period².

	201	2010-11		1-12	2012	-13	2013-14		
Month	Member	Numbe	Member	Numbe	Member	Numbe	Member	Numbe	
	s opting	r of	s opting	r of	sopting	r of	sopting	r of	
	out	joiners	out	joiners	out	joiners	out	joiners	
April Mav June Julv August Septemb October Novemb Decemb	1.956 2.047 2.052 2.076 2.198 2.232 2.409 1.853 1.513	35.784 17.140 17.026 18.395 45.201 25.362 22.985 19.581 13.746	1.832 1.974 1.961 1.977 1.904 2.060 2.205 2.172 1.853	41.908 18.308 15.460 19.165 43.352 24.416 35.784 19.350 15.412	1.938 1.772 1.775 1.832 1.828 2.067 1.957 1.730 1.701	29.920 17.686 17.693 24.265 41.285 28.912 31.698 23.171 18.791	1.961 1.471 390	74.849 28.430 2.486	
Januarv Januarv Februarv March Total Mean	2.087 2.089 2.424 24.936 2.078	13.746 19.588 19.448 14.679 268.93 22.411	1.853 2.069 1.861 2.973 24.841 2.070	15.412 20.013 21.556 16.741 291.46 24.289	2.147 1.754 2.102 22.603 1.884	24.348 25.653 21.950 305.37 25.448	3.822 319	105.76 8.814	



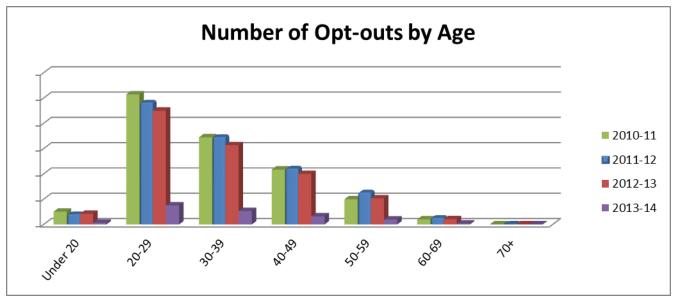
² Note that figures for the most recent month will always be low because of a timing issue regarding the collection of the data. This is rectified in subsequent reports. ³ The increase in joiners for April 2013 is due to NHS Reforms closure of PCTs & SHA's and the formation of the new bodies, Area Teams,

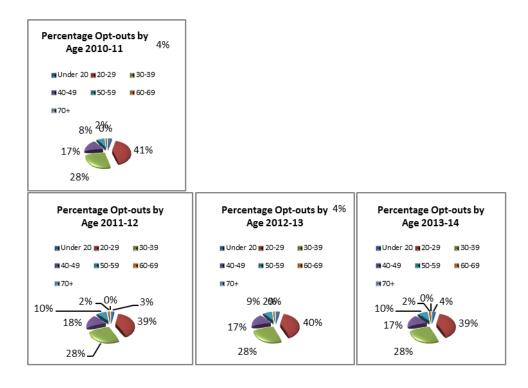
CCGs and CSUs. Members leaving the scheme on 31st March 2013 are recorded as leavers, not opt outs.

7.2. Opt-out by age

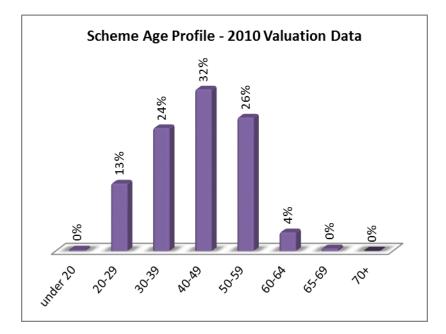
It is possible to break down the number of members who opt-out by age. In this example the members who opted-out have been broken down into eight age ranges. Statistical averages are also provided.

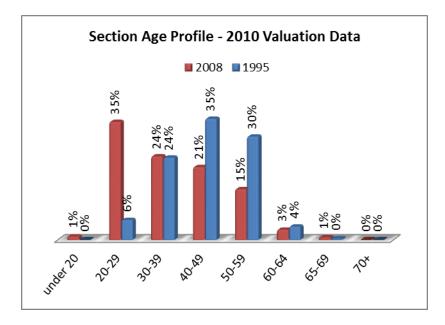
	2010-11	2011-12	2012-13	2013-14
Age	Number of	Number of	Number of	Number of
	members	members	members	members
Under 20	1,012	812	845	137
20-29	10,288	9,640	9,001	1,507
30-39	6,892	6,912	6,266	1,066
40-49	4,344	4,419	3,999	640
50-59	1,990	2,527	2,065	389
60-64	402	522	416	78
70+	8	9	11	5
Total	24,936	24,841	22,603	3,822
Mean	33	34	34	34
Mode	23	23	24	24



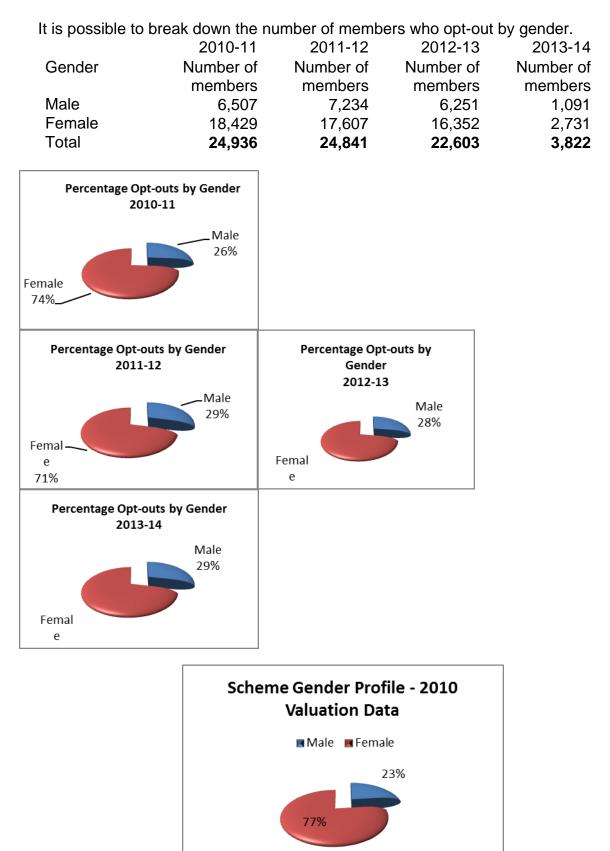


7.3. Scheme Age Profile – 2010 Valuation Data





7.4. Opt-out by gender



7.5. Opt-out by scheme section

It is possible to b	2010-11	e number of i 2011-12	2012-13	2013-14	eme section.
Section	Number of	Number of	Number of	Number of	
	members	members	members	members	
1995	4,587	5,055	4,009	473	
2008	20,349	19,786	18,594	3,349	
Total	24,936	24,841	22,603	3,822	
Percentage Opt-ou Section 2010-11 1995 2008 1 2008 1 2008 1 2008 1 2008 1 2008 1 2008 1 2009 1 2008 1 2009 1 2008 2008 2008 2008 1 2008					
Percentage Opt-ou	its by	Percentage Op	ot-outs by	Percentage C)pt-outs by
Section		Sectio	n	Secti	on
2011-12		2012-1	13	2013	-14
1 995 2 008	3	1 995	2008	1 995	²⁰⁰⁸ 12%
2	.0%	_	18%		
			5		
80%		82%	-	88%	

It is possible to break down the number of members who opt-out by scheme section.

Relating the members who opt-out to the active membership it is possible to estimate the percentage of active members who opt-out. % of active

	% of active
	members who
	opt-out
1995	0.52
Section	
2008	5.84
Section	
Scheme	1.90

7.6. Opt out by disability, ethnicity, sexual orientation, employer type and Whole Time / Part time status.

Opt out by Disability

	Number of members							
Section	2010-	2011-12	2012-13	2013-14				
ESR Response - see	0	1	0	0				
Learning Disability / Difficulty	20	17	28	5				
Long-Standing Illness	20	23	17	3				
Mental Health condition	10	13	14	0				
No	6,399	6,630	6,861	971				
Not Declared	1,570	1,632	1,379	230				
Other	17	11	13	3				
Physical Impairment	11	5	11	2				
Sensory Impairment	4	10	7	0				
Unknown	16,733	16,354	14,104	2,585				
Yes - unspecified	152	145	169	23				
	24,936	24,841	22,603	3,822				

Opt out by Ethnicity

loity								
N	umber of men	nbers						
2010-	2011-12	2012-13	2013-14					
11								
147	165	172	22					
1,432	1,597	1,306	230					
1,052	1,042	1,035	178					
57	76	65	14					
114	80	69	15					
3	1	2	0					
6	7	9	1					
234	240	237	37					
2,358	2,200	1,915	425					
17	22	37	5					
10,369	10,004	9,016	1,663					
9,136	9,395	8,728	1,232					
24,936	24,841	22,603	3,822					
	2010- 11 147 1,432 1,052 57 114 3 6 234 2,358 17 10,369 9,136	$\begin{array}{ccccccc} 2010-&2011-12\\ 11&&&\\ 147&165\\ 1,432&1,597\\ 1,052&1,042\\ 57&76\\ 114&80\\ 3&1\\ 6&7\\ 234&240\\ 2,358&2,200\\ 17&22\\ 10,369&10,004\\ 9,136&9,395 \end{array}$	$\begin{array}{cccccccccccccccccccccccccccccccccccc$					

Opt out by Sexual Orientation

Opt out by Sexual Orientation				
	Nu	mber of mem	bers	
Section	2010-	2011-12	2012-13	2013-14
	11			
Bisexual	50	52	55	7
Gay	96	81	98	12
Heterosexual	6,688	6,863	6,873	940
Lesbian	36	42	41	4
Not Disclosed	1,019	1,027	771	133
Unknown	17,047	16,776	14,765	2,726
	24,936	24,841	22,603	3,822

Opt out by Employer Type

	Number of members			
	2010-	2011-12	2012-13	2013-14
	11			
PCT-LHB	4,609	2,918	1,513	137
Trust	8,545	8,523	8,223	1,481
Foundation Trust	9,974	11,234	11,015	1,841
Directions	327	131	123	5
SHA & Arms Length	609	639	438	70
Section 22 of the Health & Social	1	4	1	0
Section 31 of The Health Act	5	4	1	0
CIC	11	73	52	4
Community Health	67	405	513	100
GP Practices	573	559	514	93
Unknown	215	351	210	91
	24,936	24,841	22,603	3,822

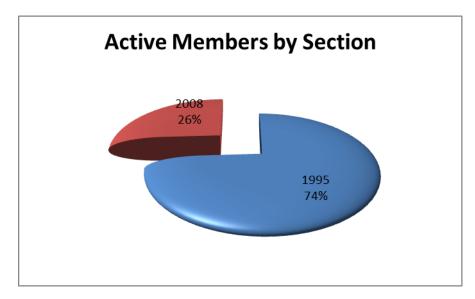
Opt out by Whole Time / Part time status

	Number of members			
	2010- 11	2011-12	2012-13	2013-14
Part Time	11,026	10,498	10,678	1,821
Whole time	13,733	13,746	11,663	1,921
Unknown	177	597	262	80
	24,936	24,841	22,603	3,822

7.7. Scheme active membership – 2010 Valuation Data

Members are defined as active if they are engaged in NHS employment and paying contributions to the scheme. The scheme active membership represents the total members who could potentially opt-out.

	Number of		
	active		
	members		
1995 Section	966,777		
2008 Section	338,435		
Scheme	1,305,212		



Explanation of Graphs

Page 6 – Opt outs by gender

There is a table containing numbers of opt outs from the NHS Pension Scheme during 2010-11, 2011-12, 2012-13 and 2013-14 by gender (male and female). The numbers show annual decreases but with the numbers of women opting out always at least twice as high as the number of men.

The tables are accompanied by pie charts showing the percentages of men and women opting out in 2010-11 (males 26 per cent, females 74 per cent), 2011-12 (males 29 per cent, females 71 per cent), 2012-13 (males 28 per cent, females 78 per cent), 2013-14 (males 29 per cent, females 71 per cent). There is also a pie chart showing the gender profile of the NHS Pension Scheme as at the 2010 valuation, revealing that 23 per cent of members are male and 77 per cent are female.

Page 7

There are two tables, the first contains figures relating to the numbers of staff opting out broken down by part time or full time status. The figures cover the four years from 2010-11, 2011-12, 2012-13 and 2013-14. Each year there are more full time employees opting out than part time, with a small number of "unknowns". The highest figure across both groups in the four year period is 13,746 full timers opting out in 2011-12.

The second table sets out the figures opting out by age across the same four years. The largest group consistently across the years is in the 20-29 age bracket, with the highest number being 10,288 in 2010-11.

Page 8 – Opt outs by age

There is a bar chart on page 8 which demonstrates opt outs from the NHS Pension Scheme by age, it is a pictorial representation of the table at the bottom of page 7. It shows that the largest numbers of opt outs are seen in the 20-29 age bracket, with the lowest numbers in higher age ranges of 60-69 and 70+.

There are also pie charts showing the percentages of opt outs by age band in the years from 2010-11 to 2013-14. The data for 2013-14 is not complete, but represents the period to May 2013. The pie charts again show that the highest percentage of opt outs is seen in the 20-29 age bracket, representing 41 per cent in 2010-11, 39 per cent in 2011-12, 40 per cent in 2012-13 and 39 per cent so far in 2013-14. The second largest group opting out is in the 30-39 age bracket, representing 28 per cent across all four years.

There is a bar chart at the bottom of page 8 which shows the age profile of the NHS Pension Scheme as at the 2010 valuation. This shows that 13 per cent of members are in the 20-29 bracket, 24 per cent in the 30-39 bracket, 32 per cent (the largest group) in the 40-49 bracket, 26 per cent in the 50-59 bracket, 4 per cent in the 60-64 bracket (zero per cent over 64).

Page 9

The bar chart at the top of the page demonstrates the age profiles of the two sections of the NHS Pension Scheme – the 1995 section and the 2008 section. The chart shows that in the 1995 scheme, the largest percentage of members are in the 40-49 age bracket (35 per cent). The next largest group is in the 50-59 bracket (30 per cent), followed by the 30-39 bracket (24 per cent), with 6 per cent in the 20-29 bracket. The smallest group in the 1995 section is the 60-64 bracket where 4 per cent of members fall. In the 2008 section the largest group is in the 20-29 age bracket (35 per cent), with the next largest group in the 30-39 age bracket (24 per cent).

The table at the bottom of page 9 sets out the figures for opt outs for members whose status as disabled/non-disabled is known across the four year period 2010-11 to 2013-14. The largest number of opt outs from members with a declared disability came from those with a learning disability/difficulty. There were 28 opts outs in this group in the year 2012-13.

Page 10

There are three tables on page 10, the first shows opt outs by declared ethnicity. These figures show that, across the four years from 2010-11 to 2013-14 the highest ethnic group opting out are from the "unknown" group. The next highest, consistently across the fours year are in the "white" group. There are also relatively high numbers in the "not specified" group. After this, members declaring their ethnicity as "Asian" are consistently opting out in numbers around 1500 each year. The next highest group is members declaring their ethnicity as "Black", with just above 1000 opt outs each year.

The second table gives figures relating to opt outs by declared sexual orientation across the four years from 2010-11 to 2013-14. The largest group falls into the "unknown" category. The next highest figures are in the "heterosexual" group, where the numbers exceed 6000 each year. The next highest group declare their sexual orientation as "gay" where the figures are consistently near 100. The lowest numbers are in the group declaring their sexual orientation as "lesbian", where the numbers are around 40 each year.

The third table gives figures relating to opt outs by employer type across the four years from 2010-11 to 2013-14. As could be expected, the highest figures align with the largest employer types. Foundation Trust employees are the largest group of employees opting out across the four year period, followed by NHS Trust employees.

Page 16

Three tables on page 16 set out the percentages of full-time equivalent staff who are members the NHS Pension Scheme by Agenda for Change pay band (1 to 9) and by group (i.e. nurses, doctors, ambulance staff, clerical staff). The three tables reflect different times; the first being October 2011, the second March 2013 and the third May 2013. The figures show that between 86 per cent and 88 per cent of all staff are members of the NHS Pension Scheme. The highest percentage, 96 per cent, is shown in all three tables for qualified ambulance staff. The lowest percentage, 79 per cent, is shown in the first two tables for central functions & hotel, property and estates staff. This rises to 82 per cent in the final table but remains the lowest percentage.

Page 17

Both tables on page 17 show the changes in percentage points of membership of the NHS Pension Scheme by Agenda for Change pay band (1 to 9) and by group (i.e. nurses, doctors, ambulance staff, clerical staff), the first table for the period March 2013 to May 2013, and the second table for the period October 2011 to May 2013.

The largest increase in the first table is 5.4 per cent, in band 1 "support to clerical staff". The largest decrease is 1.6 per cent in non-agenda for change "managers".

The largest increase in the second table is 6.6 per cent, again in band 1 "support to clerical staff". The largest decrease is 3.9 per cent again in non-agenda for change "managers".

Overall, both tables show a 2.2 per cent increase in membership of the NHS Pension Scheme as a percentage of staff.

Page 18

The three tables on this page show the percentages of employees by headcount (actual staff, rather than full time equivalent) who are members of the NHS Pension Scheme by Agenda for Change pay band (1 to 9) and by group (i.e. nurses, doctors, ambulance staff, clerical staff), the first table at October 2011, the second at March 2013, and the third at May 2013.

The tables show that 85 per cent in the first two tables, increasing to 87 per cent in May 2013, of staff are members of the NHS Pension Scheme.

The highest figure in the first table (October 2011) is 97 per cent, in band 8c for qualified nurses, midwives and health visitors, and in bands 6 and 7 for qualified ambulance staff. The lowest figures are 57 per cent in non-agenda for change staff in qualified nurses, midwives and health visitors and also central functions & hotel, property and estates staff.

The highest figure in the second table (March 2013) is 98 per cent for ambulance staff in band 7. The lowest figure is 57 per cent for central functions & hotel, property and estates staff who are non-agenda for change staff.

The highest figure in the third table (May 2013) is 99 per cent in band 7 qualified ambulance staff and the lowest figures are 62 per cent for non-agenda for change staff in the support to clinical staff group and central functions & hotel, property and estates staff.

Page 19

There are two tables on this page showing changes in percentage points of membership of the NHS Pension Scheme by Agenda for Change pay band (1 to 9) and by group (i.e. nurses, doctors, ambulance staff, clerical staff), the first table for the period March 2013 to May 2013, and the second table for the period October 2011 to May 2013.

The highest increase in the first table is 5.4 per cent in band 1 staff in the support to clinical staff group. The highest decrease in the first table is 1.1 per cent in the non-agenda for change group of managers.

The highest increase in the first table is 7.3 per cent in band 1 staff in the support to clinical staff group. The highest decrease in the first table is 3.9 per cent in the non-agenda for change group of managers.

Page 20

There are two tables on this page. The first shows the numbers of staff by headcount (actual staff, rather than full time equivalent) who are members of the NHS Pension Scheme by Agenda for Change pay band (1 to 9) and by group (i.e. nurses, doctors, ambulance staff, clerical staff), at September 2012. The second table shows the numbers full time equivalent staff who are members of the NHS Pension Scheme by Agenda for Change pay band (1 to 9) and by group (i.e. nurses, doctors, ambulance staff, clerical staff), at September 2012.

Page 26

There is a table plus an illustrative bar chart on this page. The figures show the numbers of opt out forms (known as SD 502 forms) received at the NHS Business Services Authority (which administers the NHS Pension Scheme) each month from April 2010 through to June 2013, including the annual total and the mean figure per month.

The total figure for 2010-11 was just above 38000 forms, the total for 2011-12 was around 37500 forms, and the total for 2012-13 was around 35500 forms. The first few months of 2013-14 showed figures higher than the mean for the previous 3 years, with a figure of 5000 for the month of May 2013. It is thought that the introduction of auto-enrolment in April 2013 has led to the numbers of opt forms

being received increasing significantly since then as employees previously opted out would need to go through that process again following auto-enrolment.

Page 27

There is a table and graph on this page titled "opt out and joiners per month". These are monthly figures from April 2010 to June 2013. Overall, the figures show that the numbers of opt outs are relatively consistent and generally between 1000 and 2000 each month. The number of joiners per month is less consistent but generally peaks in April, with a high point of almost 75000 joiners in April 2013. This reflects the changes to the NHS structure which took place in April 2013 with the implementation of the Health and Social Care Act. The highest figure outside of April 2013 was just over 45000 in August 2010.

Pages 28 and 29

There is a table and a bar chart on page 28 which demonstrate opt outs from the NHS Pension Scheme by age. It shows that the largest numbers of opt outs are seen in the 20-29 age bracket, with the lowest numbers in higher age ranges of 60-69 and 70+.

There are also pie charts on page 29 showing the percentages of opt outs by age band in the years from 2010-11 to 2013-14. The data for 2013-14 is not complete, but represents the period to May 2013. The pie charts again show that the highest percentage of opt outs is seen in the 20-29 age bracket, representing 41 per cent in 2010-11, 39 per cent in 2011-12, 40 per cent in 2012-13 and 39 per cent so far in 2013-14. The second largest group opting out is in the 30-39 age bracket, representing 28 per cent across all four years.

There is a bar chart at the bottom of page 29 which shows the age profile of the NHS Pension Scheme as at the 2010 valuation. This shows that 13 per cent of members are in the 20-29 bracket, 24 per cent in the 30-39 bracket, 32 per cent (the largest group) in the 40-49 bracket, 26 per cent in the 50-59 bracket, 4 per cent in the 60-64 bracket (zero per cent over 64).

Page 30

There is a bar chart at the top of the page which demonstrates the age profiles of the two sections of the NHS Pension Scheme – the 1995 section and the 2008 section. The chart shows that in the 1995 scheme, the largest percentage of members are in the 40-49 age bracket (35 per cent). The next largest group is in the 50-59 bracket (30 per cent), followed by the 30-39 bracket (24 per cent), with 6 per cent in the 20-29 bracket. The smallest group in the 1995 section is the 60-64 bracket where 4 per cent of members fall. In the 2008 section the largest group is in the 20-29 age bracket (35 per cent), with the next largest group in the 30-39 age bracket (24 per cent).

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Page 32

There is a table containing numbers of opt outs from the NHS Pension Scheme during 2010-11, 2011-12, 2012-13 and 2013-14 by section of the NHS Pension Scheme – the 1995 section and the 2008 section.

The figures show that there are significantly more opt outs in the 2008 section of the scheme, ranging from just over 20000 in 2010-11 to 18500 in 2012-13. In the 1995 section the highest opt outs were seen in 2011-12 with just over 5000, with the lowest being just over 4000 in 2012-13.

The table is accompanied by pie charts showing the percentages of 1995 and 2008 section members opting out in 2010-11 (1995 section 18 per cent, 2008 section 82 per cent), 2011-12 (1995 section 20 per cent, 2008 section 80 per cent), 2012-13 (1995 section 18 per cent, 2008 section 82 per cent), 2013-14 (1995 section 12 per cent, 2005 section 88 per cent).

There is also a table at the bottom of this page which estimates the percentage of active scheme members by section, and overall, who opt out. Of the 1995 section, this is given as half of one per cent. Of the 2008 section this is given as almost six per cent, with the overall figure being just under two per cent.

Page 33

There are two tables on this page. The first sets out the figures for opt outs for members whose status as disabled/non-disabled is known across the four year period 2010-11 to 2013-14. The largest number of opt outs from members with a declared disability came from those with a learning disability/difficulty. There were 28 opts outs in this group in the year 2012-13.

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24 July 2013

are in the "white" group. There are also relatively high numbers in the "not specified" group. After this, members declaring their ethnicity as "Asian" are consistently opting out in numbers around 1500 each year. The next highest group is members declaring their ethnicity as "Black", with just above 1000 opt outs each year.

Page 34

There are three tables on this page. The first table gives figures relating to opt outs by declared sexual orientation across the four years from 2010-11 to 2013-14. The largest group falls into the "unknown" category. The next highest figures are in the "heterosexual" group, where the numbers exceed 6000 each year. The next highest group declare their sexual orientation as "gay" where the figures are consistently near 100. The lowest numbers are in the group declaring their sexual orientation as "lesbian", where the numbers are around 40 each year.

The second table gives figures relating to opt outs by employer type across the four years from 2010-11 to 2013-14. As could be expected, the highest figures align with the largest employer types. Foundation Trust employees are the largest group of employees opting out across the four year period, followed by NHS Trust employees.

The third table gives figures relating to opts outs by whole time status and part time status across the four years from 2010-11 to 2013-14. The figures consistently show that more whole time members opt out than part time members. The highest number of whole time opt outs was in 2011-12 with almost 14000. The highest number of part time opt outs was also in 2010-11 with just over 11000.

Page 35

There are figures and a pie chart on this page showing the number of members defined as active – this being employees paying contributions to the scheme, who could then opt out of the scheme. The figures relate to the position at the 2010 valuation of the scheme. There were almost 967000 members of the 1995 section of the scheme, and almost 340000 members of the 2008 section. This gives a total active membership of just over 1.3 million.