

Gender Pay Gap Report for 31/03/2023 snapshot

1. Introduction

One of the priorities of our Trust Strategy, *Building a Healthier Future Together 2023-28* is supporting our people and Ambition 1 of *Paget's People*, our People Plan 2023-28, is to promote an inclusive, fair and safe workplace. This includes taking firm action to address discrimination against staff. Analysis of the gender pay gap is important so we can see where we are doing well in terms of pay parity and areas we might need to improve on.

2. What is the Gender Pay Gap report?

- Employers with 250 or more employees must publish statutory calculations every year showing the pay gap between their male and female employees. For NHS Trusts, this means providing a 'snapshot' of pay differences on 31st March each year and bonus payments made during the year.
- Snapshot data is required to be reported and published by 30 March the following year. The data in this report therefore relates to the 31 March 2023 and was published by 30 March 2024 in line with reporting requirements. The results must be published on the employer's website and a government website. While employers may already be taking steps to improve gender equality and reduce or eliminate their gender pay gap, this process supports and encourages action.
- Gender pay reporting is different to equal pay; equal pay deals with the pay differences between men and women who carry out the same jobs, similar jobs or work of equal value. The gender pay gap shows the difference in the average pay between all men and women in a workforce based on hourly pay. It takes account of mean and median averages, as well as 'bonus' payments. Clinical Excellence Awards, payable to medical Consultants, are classed as bonus payments for gender pay reporting purposes. If a workforce has a particularly high gender pay gap, this can indicate there may be a number of issues to deal with, and the calculations may help to identify what those issues are.
- Within the NHS, excluding Very Senior Managers (VSM), pay scales are set nationally and terms and conditions prescribe pay arrangements on appointment. Jobs for all staff on Agenda for Change (all staff excluding medical and VSM) are subject to NHS Job Evaluation to determine appropriate pay bandings. This therefore has a significant impact on preventing gender related pay discrepancies.

3. The Gender Pay Gap Indicators

The six pay gap indicators are:

- i. Average gender pay gap as a mean average
- ii. Average gender pay gap as a median average
- iii. Average bonus gender pay gap as a mean average
- iv. Average bonus gender pay gap as a median average
- v. Proportion of males receiving a bonus payment and proportion of females receiving a bonus payment
- vi. Proportion of males and females by pay quartile ordered from lowest to highest pay.

4. Results for 31st March 2023

a. Hourly Gender Pay Gap

	Male	Female	Difference	Pay Gap
Mean	£22.66	£17.09	£5.57	25.56%
Median	£17.60	£15.47	£2.12	12.07%

- When comparing mean hourly pay, women's mean hourly pay is 25.56% lower than men's.
- In JPUH, women earn 88p for every £1 that men earn when comparing median hourly pay, 12% less than men.

b. Bonus Pay Gap

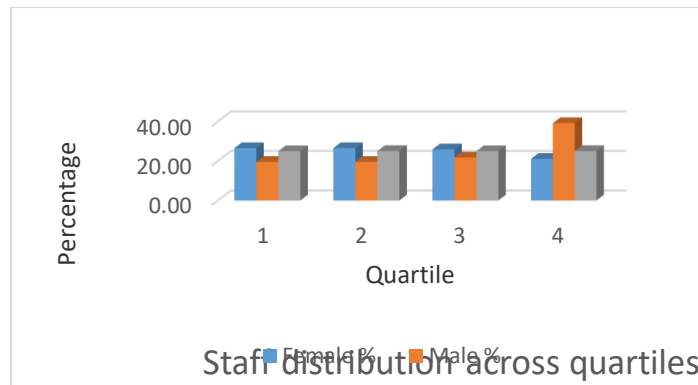
	Male	Female	Difference	Pay Gap
Mean	£8,803.45	£7,584.76	£1,218.69	13.84%
Median	£6,032.04	£6,032.04	£0.00	0.00%

- When comparing mean bonus pay, women's mean bonus pay is 13.84% lower than men's.
- In JPUH, women earn the equivalent for every £1 that men earn when comparing median bonus pay.
- Of those who received bonus pay:
 - ❖ 0.29% were women
 - ❖ 3.33% men.

c. Male and Female Split Across Four Pay Quartiles

	Q1 (lowest paid)	Q2	Q3	Q4 (highest paid)
Female	83.42%	81.57%	81.39%	64.71%
Male	16.58%	18.43%	18.61%	35.29%

Women, as a proportion of the total male and female workforce per quartile, occupy 65% of the highest paid jobs (quartile 4) and 83% of the lowest paid jobs (quartile 1), however, as demonstrated by the chart below, there is a far higher proportion of men, as a proportion of the total male workforce, in quartile 4. Alongside this, there is a disproportionately higher distribution of women in the lower quartiles (1 - 3) as a proportion of the overall female workforce.



5. Understanding the Trust Gender Pay and Bonus Gaps

The gender pay gap is impacted by:

- The much higher distribution of men within the highest pay quartile as a proportion of the overall male workforce.
- The lower distribution of women in quartile 4 compared to the distribution of women in the lower quartiles proportionate to the overall female workforce.
- The higher proportion of male to female senior doctors (relevant to quartile 4 pay).
- The number and higher levels of Clinical Excellence Awards of male compared to female Consultants.

It is noteworthy that when comparing Agenda for Change salaried staff there is little difference between mean and median pay.

6. Comparison Between Years

- Between 31/03/2022 and 31/03/2023 the **mean gender pay gap** decreased very slightly from 25.74% to 25.56%. This is the lowest it has been over the previous 5 years, the highest being 27.41% in 2019.
- The **median gender pay gap** has decreased slightly from 13.32% to 12.07%.
- The **mean bonus gender pay gap** has increased significantly from 0.49% to 13.84%. Further analysis is being undertaken for consideration by the Equity, Diversity and Inclusion Steering Group but it is associated with Clinical Excellence Awards for Consultants.
- The **median bonus gender pay gap** has, however, reduced from 20% to 0%.
- The overall trend over the last six years has been a reduction in the gap between the proportion of males and females receiving a bonus payment.
- The proportion of men in the highest pay quartile has increased from 33.88% to 35.29% but the proportion of females in the lowest quartile has stayed static.
- Actions taken since the previous report include introducing more diverse selection panels and stakeholder panels for all senior positions as part of our fair recruitment work. Development programmes and careers sessions have been delivered,

particularly focused on supporting under-represented staff groups. The progress with reducing the pay gap indicates these actions are having some impact.

- Once benchmark data is available, a comparison will be undertaken with other local acute Trusts. Previous results have indicated that the Trust is not an outlier.

7. Closing the Gender Pay Gap

The gender pay gap has complex and multi-faceted causes and will take significant time to fully address. As a large employer, and one with a high proportion of female employees, the Trust is, however, in a position to remove internal barriers to pay parity and to influence wider societal factors.

Females are more likely to take on additional caring responsibilities at home and voluntary roles in the workplace. They are also more likely to be in lower paid roles. It is important that we continue to remove these as barriers to career progression.

The results show the need for continued focus on fair recruitment, development opportunities (including taking positive action, where appropriate), spotlighting female career journeys at senior levels and embedding a flexible working culture at all levels, in line with our People Plan. Additionally, consideration will be given to how we encourage female applicants for Clinical Excellence Awards if a competitive process is reinstated and the prevention of bias in the assessment process. The Equity, Diversity and Inclusion Steering Group is also considering the introduction of a target for female representation at senior levels.

8. Approval

The Board approved this report in March 2024.