

GENDER PAY GAP REPORT

Data reported as at 31 March 2023, unless otherwise indicated.

1. Summary

This is Gloucestershire Hospitals NHS Foundation Trust's (GHFT) seventh Gender Pay Gap report. It is based on a snapshot of all GHFT staff on 31 March 2023. On that date, GHFT's permanent workforce head count was made up of **8830 (approx. 79.3% female and 20.7% male)**.

The analysis used to prepare this report identifies a 'mean' and 'median' gender pay gap.

The measured position on the gender pay gap at 31 March 2023 is as follows:

- **The mean gender pay gap is the difference between mean pay for men and women in the organisation. In GHFT, the mean pay for men is 25.7% higher than for women. Compared to the 28.2% in 2022, this is a decrease of 2.5%.**
- **The median gender pay gap is the difference between median pay for men and women in the organisation. In GHFT, the median pay for men is 19.1% than for women. Compared to the 21.7% in 2022, this is a decrease of 2.6%.**

It is critical to emphasise that this does not mean that a male and a female employee member doing equal work receive different levels of pay. Rather, the above statistics are driven largely by:

- (i) The pay of the medical workforce which has an amplified effect on statistics relating to the total workforce.
- (ii) The distribution of males and females within different parts of the workforce.

The primary focus lies in the exclusion of the medical workforce and their Clinical Excellence Awards (CEA), which effectively cancels out the median gender pay gap. When examining pay across all staff except medical personnel, there is a mean gender pay gap of 1.89% favouring males, but a median gap of -4.85%. This suggests that the pay gap within the medical workforce is significant enough to balance out the absence of a gender pay gap among female employees across the rest of the Trust's workforce. Addressing the gender based pay disparities highlighted in the table below requires a multifaceted approach aimed at promoting equity and fairness within the organisation

2. Introduction

The Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017 (**the Regulations**) require public sector organisations with over 250 staff to report on and publish their gender pay gap on a yearly basis. This is based on a snapshot from 31st March of each year, and each organisation is duty bound to publish information on their website. This report captures data as at 31st March 2023.

GHFT employs circa. 8830 staff in a number of Staff Groups, including: administrative; nursing; allied health; and medical roles. All staff except for medical and Very Senior Managers (VSMs) are on Agenda for Change pay-scales, which provide a clear process of paying staff equally, irrespective of their gender or ethnicity.

What is the gender pay gap?

The gender pay gap shows the difference in the average pay between all males and females in the Trust. If there is a particularly high gender pay gap, it can indicate there may be several issues with which to deal, and the individual calculations may help to identify what those issues are.

The gender pay gap is different to equal pay. Equal pay deals with pay difference between males and females who carry out the same job, similar jobs or work of equal value. It is unlawful to pay people unequally because they are male or female.

What do we have to report on?

The statutory requirements of the Gender Pay Gap legislation is that each public sector organisation must calculate the following:

- The mean basic pay gender pay gap
- The median basic pay gender pay gap
- The proportion of males and females in each quartile pay band
- The mean bonus gender pay gap
- The median bonus gender pay gap
- The proportion of both males and females receiving a bonus payment.

Definitions of pay gap

The **mean pay gap** is the difference between the pay of all male and all female Staff when added up and divided respectively by the total number of males, and the total number of females in the workforce.

The **median pay gap** is the difference between the pay of the middle male and the middle female, when all male Staff and then all female Staff are listed from the highest to the lowest paid.

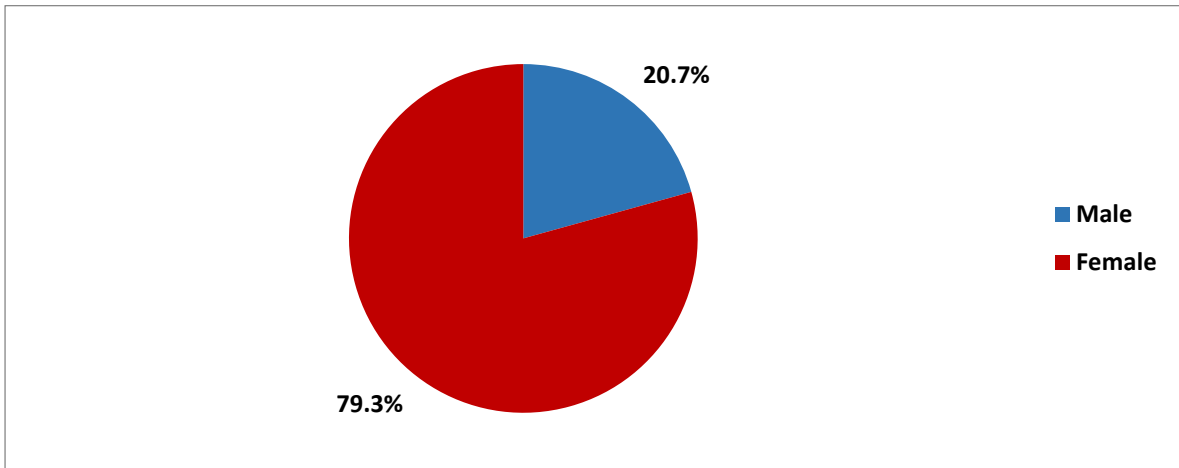
Who is included?

All staff who were employed by GHFT and on full pay on the snapshot date (31st March 2022) are included. Bank staff who worked a shift on that date are also included. Staff who are on half or nil absence, less than full pay maternity leave and agency staff are not included.

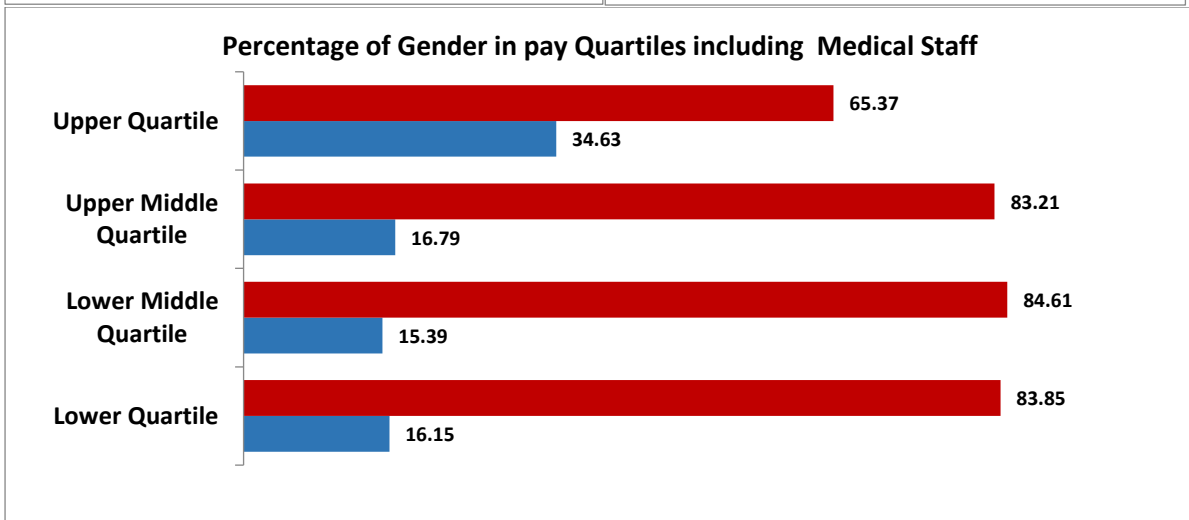
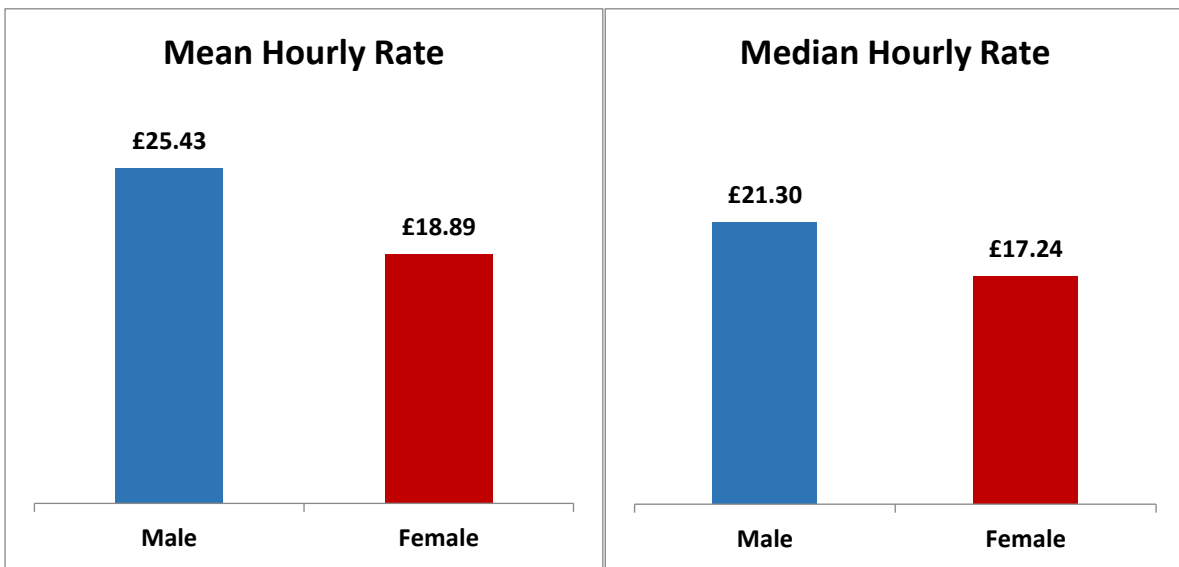
3. Results for Gloucestershire Hospitals NHS Foundation Trust

Trust Gender Profile (based on headcount)

GHFT, as is typical of the NHS, has a higher proportion of females to males in its workforce – of the 8830 staff counted as part of the gender pay gap reporting, 6999 female Staff compared to 1831 male staff.



Gender Pay Gap GHFT Including Medical Staff



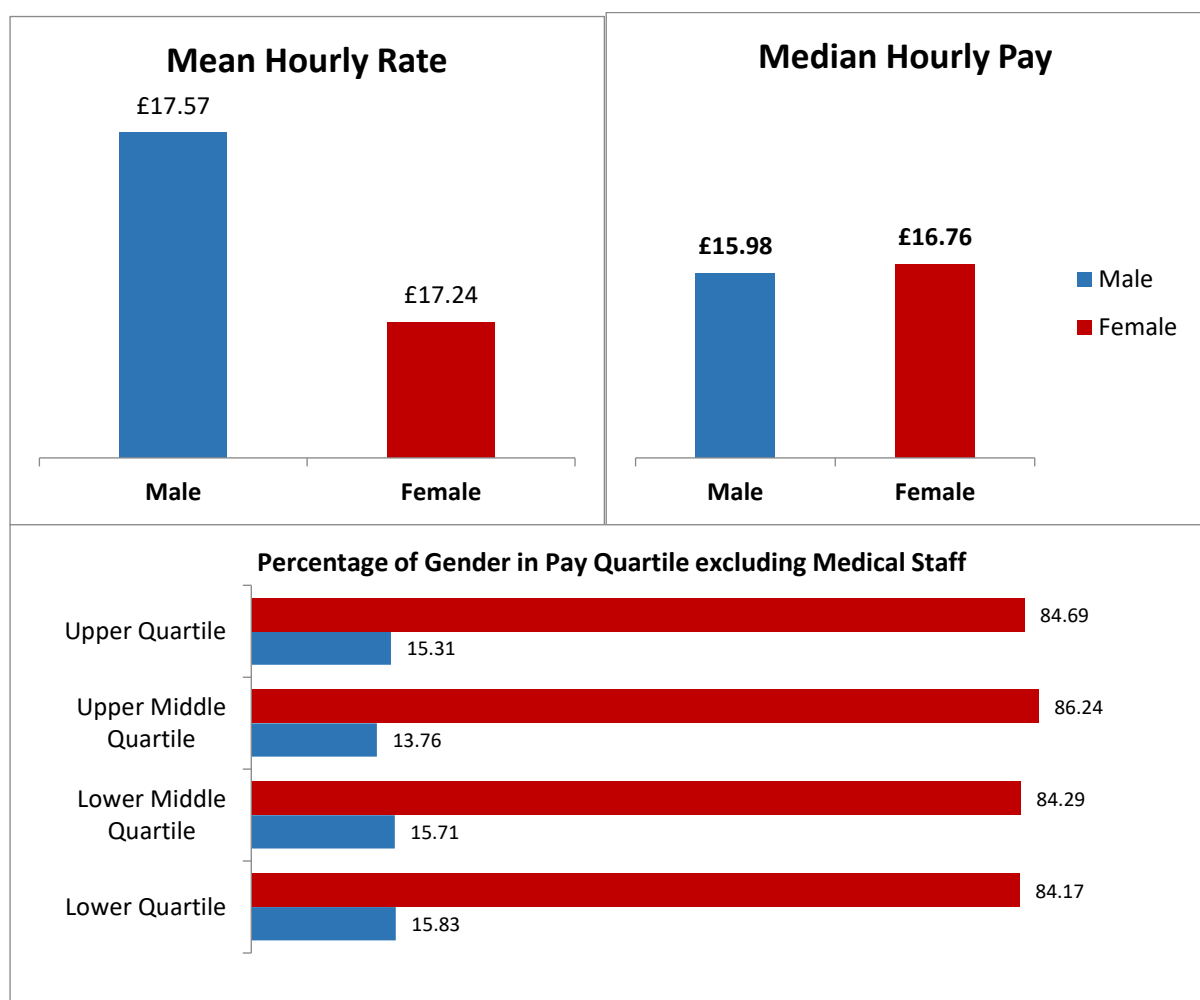
The above charts show that the mean hourly pay for males is £6.54 Higher than that of females, a gender pay gap of 25.7%.

They also show that median pay for males is £4.07 higher than females, a gender pay gap of 19.1%. We are also required to split the workforce into quartiles (blocks of 25%) split by pay and show the proportions of males and females in each quartile. The results of this split are shown below. Even though females make up the majority of the workforce at 79.3% and males 20.7%, there continues to be more males in the highest pay quartile (34.6%).

As explained in the introduction, the inclusion of medical staff with the rest of the workforce has a significant effect on the GPG figures.

Gender Pay Gap GHFT Excluding Medical Staff

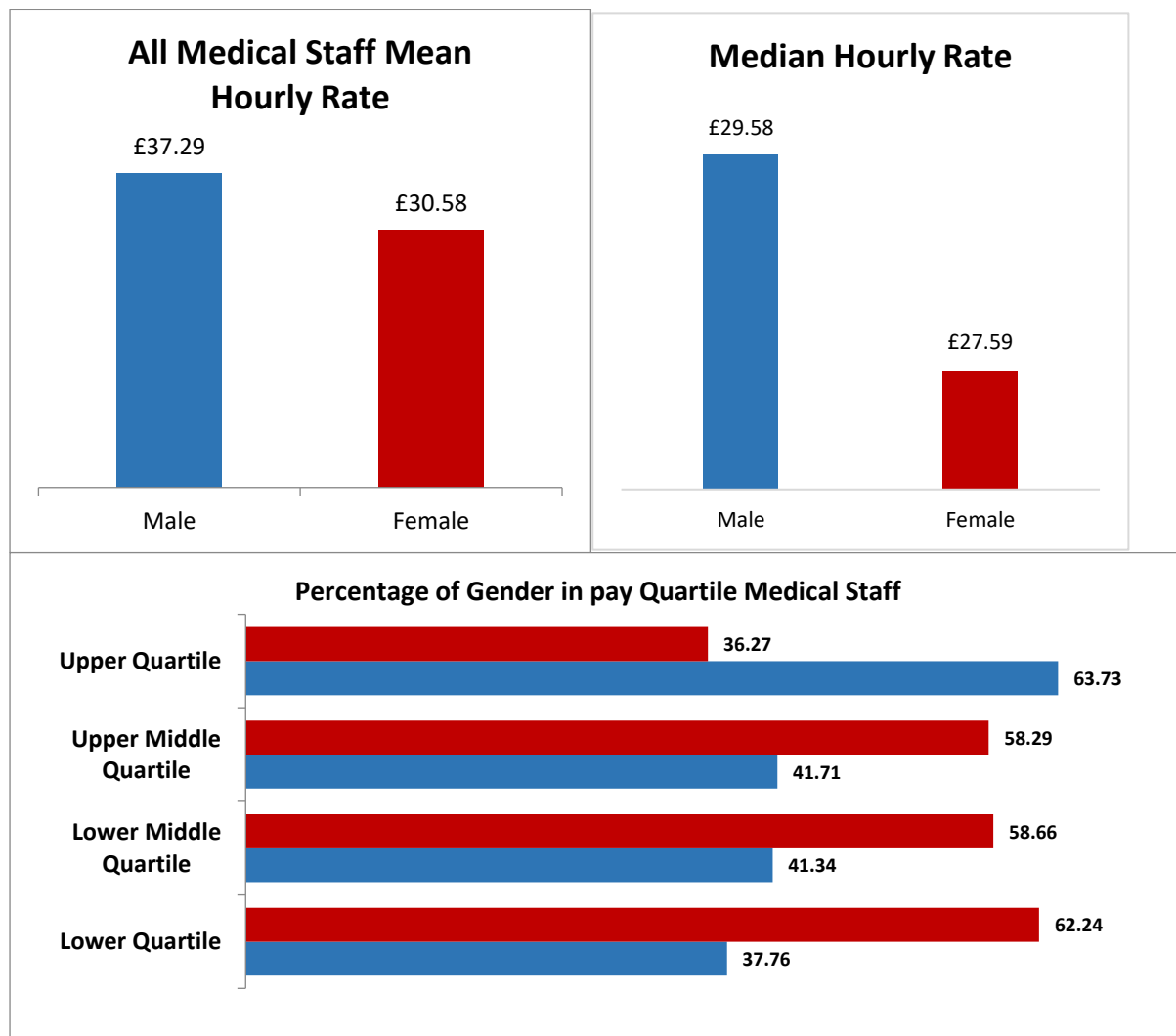
When removing Medical Staff from the equation, GHFT has an even higher percentage of females than males in its workforce – of the 7231 staff counted as part of the gender pay gap reporting, 84.9% were female (**from 79.3%** when Medical Staff were included). The Gender Pay Gap is much smaller as an average, and is -4.85% for the median.



The above charts show that the mean hourly pay for males is **£0.33** higher than that of females, a gender pay gap of **1.89%**. The quartile split also show a higher proportion of females in all pay quartiles.

Gender Pay Gap GHFT Medical Staff Only

When including only Medical Staff, the Trust still has a higher percentage of females than males overall in its workforce, but the difference isn't so great. Of the **1586 (based on this assignment Category)** Medical Staff counted as part of the gender pay gap reporting (including General Practitioner Trainees), 53.8% were female (from 79.3% when non-Medical staff included).



The above charts show that the mean hourly pay for males is **£6.71** higher than that of females, a gender pay gap of **18.0%**. The above chart also shows that median pay for males is **£2.00** higher than females, a gender pay gap of **6.75%**. The quartile split shows that the lower quartile is **62.24%** female, while in the upper quartile this is completely reversed and **63.73%** are male.

What does this mean?

The figure for the median pay gap is usually considered to be more representative of gender pay gap across the workforce. However, that still does not take account of the small number of higher paid staff (Senior Medical staff) that are skewing the data when combined with non-medical staff. The effect is simply more extreme when using the mean.

The gender composition and pay gaps in each individual band are examined below; for ease

of reference, we have highlighted in green where the higher average pay is to be found (male or female cohort).

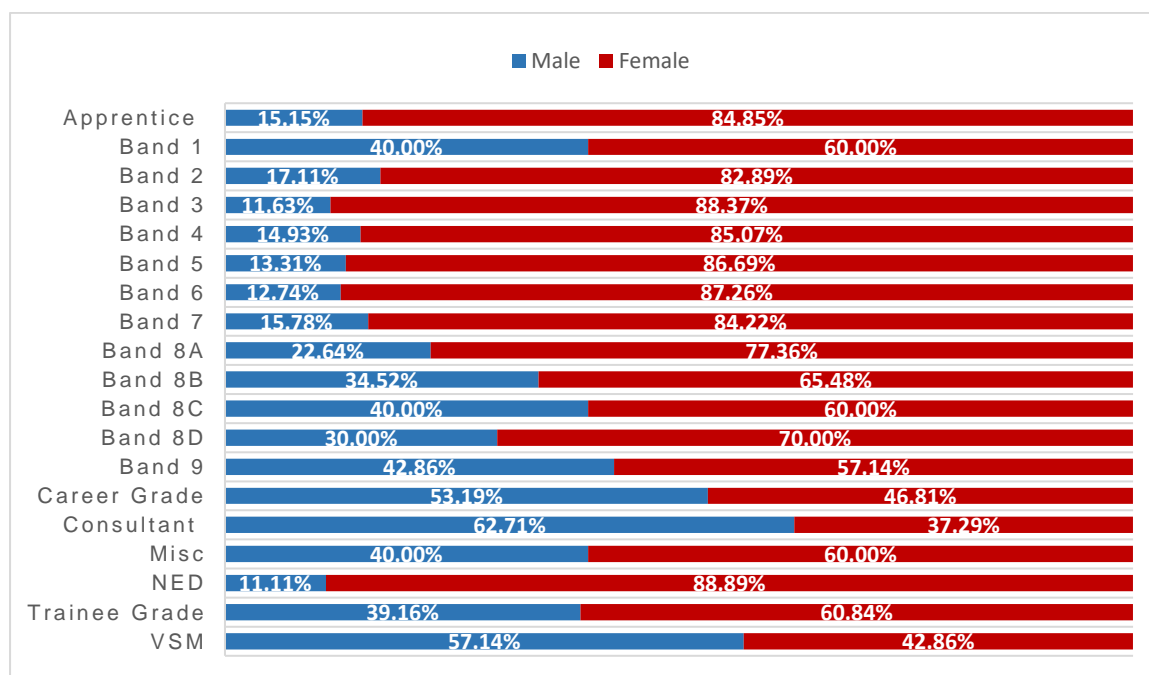
Grade	No. of Male Staff	Male Average Hourly Rate*	No. of Female Staff	Female Average Hourly Rate*	Difference	Gap
Apprentice	5	£5.49	28	£5.67	0.18	-3.27%
Band 1	2	£10.63	3	£10.54	0.09	0.84%
Band 2	288	£12.79	1395	£12.74	0.05	0.38%
Band 3	94	£12.00	714	£11.90	0.10	0.80%
Band 4	89	£12.99	507	£13.31	0.32	-2.44%
Band 5	242	£17.50	1576	£18.83	1.32	-7.56%
Band 6	158	£19.20	1082	£20.50	1.29	-6.72%
Band 7	104	£22.92	555	£23.27	0.35	-1.54%
Band 8a	48	£25.98	164	£26.12	0.14	-0.53%
Band 8b	29	£30.12	55	£29.90	0.22	0.74%
Band 8c	14	£32.86	21	£36.28	3.42	-10.41%
Band 8d	9	£40.96	21	£32.73	8.23	20.09%
Band 9	3	£51.32	4	£42.45	8.86	17.27%
Career Grade	50	£37.16	44	£34.55	2.61	7.02%
Consultant	264	£55.82	157	£53.08	2.74	4.91%
Misc	24	£31.52	36	£26.32	5.19	16.47%
NED	1	£7.58	8	£10.15	2.56	-33.82%
Trainee Grade	403	£25.14	626	£24.87	0.27	1.06%
VSM	4	£75.65	3	£88.36	12.71	-16.80%

*Refers to the mean hourly rate

†negative values mean that the difference and the gap are favourable to females.

The above table shows that, on average, females earn more in almost half of the pay bands than males – the band where males earn more are Bands 1, 2, 3, 8b, 8d, and medical roles. We have also analysed the proportion of males and females across each of the above bands, and the results of this are shown in the bar chart below.

Gender split by band – based on headcount



4. Specific Focus Areas

Medical Staff

The most significant feature of the data at 31 March 2023 is that if Medical Staff were to be removed from the calculations, then the median gap is nullified and the mean is reduced to **1.89%** from **25.7%**.

Medical staff group comprises a large group, from Foundation level doctors in their first-year post qualifications to consultants. The pay gap for Medical staff as a whole is **18.0%** - males get paid on average **£37.29** per hour whereas females are paid **£30.58** per hour.

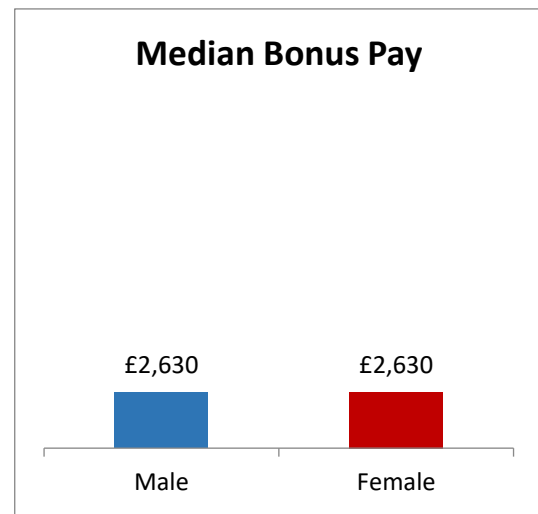
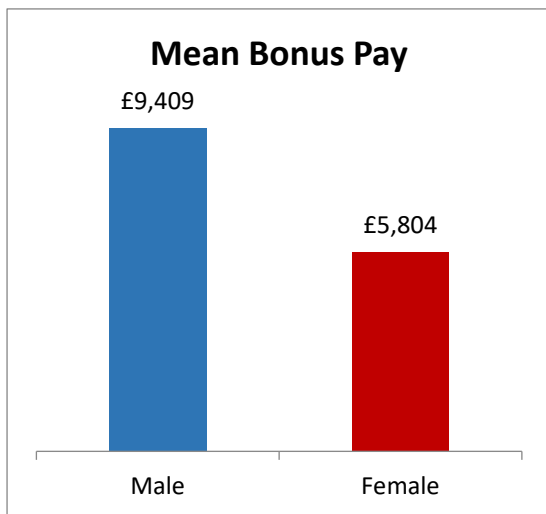
Please note National Clinical Excellence Awards have been excluded from the Medical Pay Calculations in this document. The Bonus section will address the Awards.

5. Bonuses

In the specified period, a total of **382** bonuses were awarded. **136** to female consultants and **246** to male consultants. When compared to the ratio of male to female consultants, **64.40%** of bonuses were paid to male consultants, who represent **62.71%** of all consultant's positions. While **35.60%** were given to female consultant's, who represent **37.29%** of all consultants' positions. This data is encouraging as it reflects a decrease compared to the previous report. With the GPG dropping from 45.36% to **38.31%** last year.

NHS Employers acknowledge that the current local CEA system is flawed and worsens inequalities for women and BME colleagues, and part time workers. In response, a consultant began in September 2020 involving a negotiating group comprising the

department for health and social care (DHSC), the British Medical Association (BMA), and the HSCA



Mean gender pay gap, bonus 38.31%

Median gender pay gap bonus 0.00

Following the 2021 consultation on reform of the National Clinical Excellence Awards, the Department of Health and Social Care (DHSC) and the Welsh Government have agreed the following changes will be implemented in a revised scheme as the National Clinical Impact Awards.

The awards have been re-branded as the National Clinical Excellence Awards to reflect to applicants and scorers that the primary focus of the awards is the output of activities, rather than undertaking activities in the absence of describing their impact and results. (More Information can be found:

<https://www.gov.uk/government/publications/clinical-excellence-awards-application-guidance/guide-for-applicants-national-clinical-excellence-awards-2021-awards-round>

6. Recommendations and Actions

The gap in our mean and median pay and particularly bonus pay, shows there is more work to be done. We will continue to take steps to reduce our pay gap and explore best practice, to support the integration and learning from these findings, the following steps are proposed:

Aim	Objective	Action	Time-scale
Implement the recommendations outlined in the Mend the gap review for medical staff and extend these suggestions to both Senior and non-medical workforce	Collate specific actions to reduce and work to eliminate the existing gender pay gap.	Create a culture of accountability and commitment to gender at all levels of the organisation Promotion of coaching and mentoring opportunities	2024-2026
Support the development of our female leaders	Through the promotion of Senior Leadership Development Programmes Talent pipelines designed to ensure that opportunities foster the growth of career aspirations of women	Review current development and talent programmes that supports the development of women	2024 -2025
Determine if there is an interest in establishing a Woman's network	Offer networking and support opportunities through the development of a woman's network Raise awareness and promote initiatives that support women in the workplace.	Promote through the Inclusion Newsletter/Comms Planned webinars throughout the year Promote International woman day As part of international woman's day EDI nominate a female role model from within the Trust	March 2025

Actions are aligned with High Impact 3 of the NHS Equality, Diversity, and Inclusion (EDI) Improvement Plan.

7. Conclusion

The Gloucestershire Hospitals NHS Foundation Trust gender pay gap at **31 March 2023** is reported at:

- **Median gender pay gap, 19.1% in favour of male staff (21.7% in 2022)**
- **Mean gender pay gap is 25.7% in favour of male staff (28.2% in 2022)**

The figures reflect the **combined** gender pay gap of both medical and non-medical staff.

The People and OD Committee are asked to **NOTE** that the gender pay gap can be

objectively explained, when we consider the application of terms and conditions which are set nationally and reward length of service. Furthermore, there is no significant **(1.89%)** Gender Pay Gap reported across out Non-Medical workforce, which accounts for approximately **81.9%** of the total workforce as a result of the agenda for change framework.

The gender pay report continues to evidence the assumption that the overarching pay gap is associated with length of service of a number of senior male Doctors; with further analysis demonstrating that the number of females both entering the Medical workforce and existing staff within pay quartiles 1-3 will lead to a reverse in this pay gap in future years. The Committee are therefore advised that as such, the current pay gap is a consequence of the application nationally driven terms and conditions and Clinical Excellence Awards.

Author: EDI Team

Presenter: Circulated for Approval