

Our Gender Pay Gap Report 2020/2021

Executive Summary

As an organisation employing more than 250 staff the Trust is required under the Equality Act 2010, to publish information on its gender pay audit.

This report sets out the 2021 gender pay gap in comparison to 2020 data, provides and update on a key national report published on the disparity in pay between men and women in the medical workforce, alongside recommendations and actions for the Trust to address its gender pay gap.

In common with the NHS as a whole, our workforce is predominantly female, 73% of our workforce is female. Women outnumber men at every level of the organisation, except at band 1 and within our medical workforce where the split is approximately 50/50.

Our data for this year's report was collected on 31st March 2021. A note is below, to explain the statistical terminology.

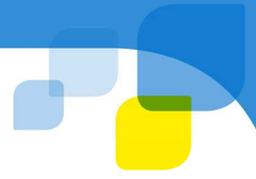
Key findings:

- A widening of the median pay gap, favouring women with women paid **2.49%** more on average than men. Last year's gap was 0.22% favouring men.
- The gender mean pay gap has seen little movement with a gap of **21.03%** favouring men from 21.72% in 2020. The median gap has seen a steady, but small decline each year.
- Marked improvement in the gender pay gap across bonus payments with **no gap** existing when looking at the median average bonus payments between men and women and a reduction of 21.02% of the mean average gap, to **14.20%** favouring men.
- A big swing in the median average bonus payments within non-medical staff, resulting in a gap favouring women of **19.29%**.
- In comparison with the acute Trust's within Bath, Swindon and Wiltshire ICS the Trust has the lowest median gender pay gap and the only one to report a gap-favouring women.
- As with previous years and reflecting the national picture, the biggest inequalities in pay lie within our medical workforce.

What is the 'Mean'?

The mean is the average hourly wage. It is calculated by adding up all the pay of all male employees and dividing it by the number of male employees. The same is then done for all the female employees.

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



What is the 'Median'?

It's the mid-point between the highest and lowest earners. The median gender gap therefore is the difference between the median hourly rate of pay of male full-pay relevant employees and that of female full-pay relevant employees.

Our results - 31st March 2021 snap shot

% of male and female staff employed by pay band as at 31st March 2021

At all levels the largest majority of employees are female, with the exception of band 1 AFC staff and Medical staff which have a 50/50 split.

Band Data

Band	Male	Female
Non AFC	0.0%	100.0%
Band 1	50.0%	50.0%
Band 2	30.4%	69.6%
Band 3	16.8%	83.2%
Band 4	18.0%	82.0%
Band 5	14.6%	85.4%
Band 6	13.5%	86.5%
Band 7	18.6%	81.4%
Band 8	24.4%	75.6%
Band 9	50.0%	50.0%
M&D	47.9%	52.1%
VSM	33.3%	66.7%

Proportion of men and women in each pay quartile (%)

Quartile	Male %	Female %
Lower	25.0%	75.0%
Lower Middle	25.3%	74.7%
Upper Middle	14.8%	85.2%
Upper	31.6%	68.4%

There has been little movement from 2020 to 2021 in terms of percentage of men/women in each band and the quartiles.

Gender pay gap as a MEAN average

Gender	Female 2020	Male 2020	Female 2021	Male 2021	% difference 2020	% difference 2021
Trust	£16.72	£21.36	£17.35	£21.97	21.72%	21.03%
Non-Medical	£15.38	£15.34	£15.95	£15.60	-0.31%	-2.24%
Medical	£34.10	£41.44	£36.02	£45.30	17.73%	20.48%

On average men earn £4.62 per hour more than women. When medical staff are removed, women earn on average 61p more per hour than men do, an increase of 57p. Men in the medical workforce earn on average £9.28 per hour more than women a worsening position than last year where men in the medical workforce earned £7.34 per hour more than women.



Gender pay gap as a **MEDIAN** average

Gender	Female 2020	Male 2020	Female 2021	Male 2021	% difference 2020	% difference 2021
Trust	£15.36	£15.39	£15.65	£15.27	0.22%	-2.49%
Non-Medical	£14.51	£12.87	£14.91	£12.98	-12.70%	-14.84%
Medical	£32.43	£41.27	£33.81	£43.49	21.42%	22.25%

The Trust median figure has swung to reflect an increase in the average median gap favouring women, with them earning on average 38p per hour more than men. This is not reflected in medical pay where men are paid on average £9.68 per hour more than women. When considering non-medical staff women are paid more than men, earning on average £1.93 more per hour.

Bonus Payments

As an NHS organisation the pay elements we have that fall under bonus pay criteria are, Local Clinical Excellence Awards, (LCEA), paid to Consultants and performance bonuses paid to the Executive Directors.

Average bonus gender pay gap as **MEAN** average

Gender	Male 2021	Female 2021	% difference 2020	% difference 2021
Trust	£14,348.24	£12,310.32	35.22%	14.20%
Non-Medical	£19,349.90	£21,658.28	44.80%	-11.93%
Medical	£14,277.79	£10,925.43	33.61%	23.48%

Bonus payments for non-medical staff have changed significantly, as highlighted in previous reports this figure can fluctuate given the small numbers of executives who receive bonuses, a change of just one person leaving a post and another filling it who is of a different gender can have a significant impact.

The gender pay gap for bonuses for medical staff, (local clinical excellence awards) continues to show a decreasing trend following the implementation of a new national policy and a steady rise in female doctors taking up consultant positions.

Average bonus gender pay gap as **MEDIAN** average

Gender	Male 2021	Female 2021	% difference 2020	% Difference 2021
Trust	£9,048.00	£9,048.00	22.18%	0.00%
Non-Medical	£19,349.90	£23,082.40	42.90%	-19.29%
Medical	£9,048.00	£6,032.04	33.33%	33.33%

As a Trust we have hit parity for the first time since gender pay gap reporting began, however when broken down into the different pay groups, (medical and non-medical) we can see that disparity still exists for both men and women.

Median bonus payments for medical staff have remained static for the previous 3 years, favouring men. Meanwhile there has been a big swing favouring women within the non –

medical staff group. Awards are given for recognition of excellent practice over and above contractual requirements.

Proportion of males and females receiving a bonus payment

Gender	Male	Female	% difference 2020	%difference 2021
Trust	4.10%	0.54%	4.73%	3.56%
Non-Medical	0.07%	0.07%	0	0.00%
Medical	18.93%	6.67%	14.67%	12.26%

The proportion of staff receiving bonuses has remained largely static, with a continuing trend towards an overall improvement in all scores.

The Medical workforce

The greatest disparity in pay arises within our Medical and Dental workforce and this has been the case since gender pay reporting has been undertaken and reflects the national picture. The Mend the Gap: The Independent Review into Gender Pay Gaps in Medicine in England', Chaired by Professor Dame Jane Dacre with Lead Researcher Professor Carol Woodhams was published in December 2020. Since its publication changes to the national local clinical excellence awards has meant we have continued to see a slow but steady decrease in the disparity between the male and female medical workforce.

The review looked at Hospital Doctors, GPs and Clinical Academics and came to the following conclusions:

- For hospital doctors: Mean gap 24.4% (RUH 20.48%) Median gap is 28.7%, (RUH 22.25%)
- The main reasons for pay difference are Age, Hours worked and Bonuses.
- Once hours are accounted for the national mean and median drop to 13.8% and 18.9% respectively
- Women are more likely to be part time
- Women are more likely to be the second career in relationships
- The gap widens as women age, not closing until women reach their 60s
- Whilst women are over-represented in non-surgical specialties, this is not driving gender gaps in basic pay.
- There is a seniority gap, which is accounted largely by family and structural factors, (i.e. Women taking time out to have children, or take on caring roles, inflexible training places) and workplace culture.
- About 20% of the pay gap for hospital consultants is down to LCEAs, (again male doctors more able to travel and partake in 'extra' activities/committees that lead to LCEAs being awarded, plus an overrepresentation of men at consultant level).

National recommendations for hospital doctors from the review.

- Offering flexible working, advertising all posts with the option of being on a part time basis.
- Reviewing pay setting arrangements and making greater use of job evaluation, (this might mean having shorter pay scales in hospitals for instance)
- Give greater attention to the distribution of additional work and extra payments (i.e. greater transparency for locum payments and waiting list initiatives to reduce inequity)



Satisfaction with levels of reward – Staff survey results (2020 data)

Survey Question	Male	Female
% staff stating they are satisfied or very satisfied with the recognition they receive for good work	66.1%	58.7%
% staff stating they are satisfied or very satisfied with the extent to which the Trust values their work	54.2%	49.2%
% satisfaction with level of pay	41%	36.1%
% of staff satisfied with opportunities for flexible working	57.2%	58.9%

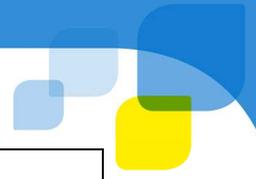
Taking Action

There have been no specific initiatives within the Trust to reduce the gender pay gap in the past year. The movement on the pay gap has been the result of staff movement in and out of the staff groups, coupled with the implementation of a revised clinical excellence award policy.

As part of the Bath, Swindon and Wiltshire ICS the EDI team are looking at how we can work across to the system. With respect to the gender pay gap, the three acute Trust's within the ICS, whilst having differing gaps share broadly similar themes in terms of reasons behind these gaps. It is recommended therefore that we seek to work together on a system wide approach to the gap. To that end, work has commenced to explore common themes and develop an action plan.

Additionally it is recommend that the Diversity and Inclusion Steering Committee on behalf of RUH take the following action to reduce the Gender Pay Gap further:

Action	Lead	Timescale
Review actions within the NHS People Plan; <ul style="list-style-type: none"> • Flexible working by default • Flexible working from day one • Normalising conversations around flexible working Additional communication around shared parental leave.	Associate Director for HR	June 2022
Continue to support and develop the Women's network which was established in 2021.	Equality and Diversity Officer	May 2022



<p>Work with the Women's staff network to identify how we may empower our female workforce.</p>		
<p>Work with System partners and within organisation to take action to increase representation within bandings 5-7.</p> <p>Specifically looking at representation at interview stage, (i.e. gender balanced panels)</p>	<p>Associate Director for HR and Equality and Diversity Officer</p>	<p>Work has commenced, reviewed Sept 2022</p>