

Gender Pay Gap Report 2018

1. What is the gender pay gap?

The gender pay gap (GPG) looks at the difference in the average pay between all men and women in an organisation, taking account of the full range of jobs and salaries.

The gender pay gap is **not** about equal pay for work of equal value i.e. paying men and women the same for doing the same or broadly similar jobs or for work of equal value. Our arrangements for ensuring equal pay for work of equal value are detailed in section 6.

This report is based on data as at 31 March 2018.

2. Gender Pay Gap - Average Pay

The figures reported below show West Suffolk NHS Foundation Trust's gender pay gap in two ways – as median and mean average hourly rates.

The mean calculates the total amount earned across the organisation, divided by the number of people employed. The median looks at all the salaries in the range and identifies the mid-point. *For example, in a team of 20 people five have a salary of £10k a year, five have a salary of £20k a year and ten have a salary of £30k a year. The mean salary is £22.5k and the median salary is £25k a year.*

Average hourly rates:

- 6.0% median average – the mid-point salary for women is 6% lower than for men.
- 23.5% mean average – overall men are paid almost a quarter more than women

What causes this gap?

- We have proportionately more men in more skilled, senior, higher paying jobs than we have women; in particular amongst senior management roles and senior medical staff.

How does this compare to last year?

- The 2018 median average gender pay gap is 2.1% lower than the 2017 median average gender pay gap which was 8.1%. This means the gap between the mid-point salary for women and men has reduced by 2.1% which is an improvement in the pay gap between men and women.
- The 2018 mean average gender pay gap is 0.7% lower than the 2017 median average gender pay gap which was 24.2%. This means that overall the amount by which men are paid more than women has reduced by less than 1%.

Comments

There is no obvious reason(s) for these slight reductions in the GPG. More detailed analysis of the data by pay band does not highlight any cause and the changes in the GPG at pay band level have been very small. One cause could be the TUPE transfer of community staff in October 2017.

3. Gender Pay Gap – Bonus Pay

What bonuses are paid to staff?

81 employees received 'bonus' pay. These are some of our medical consultants who get 'clinical excellence awards' (CEA) or discretionary points. These recognise and reward those consultants who contribute most towards the delivery of safe and high quality care to patients and to the continuous improvement of NHS services. These are counted as bonus payments when making calculations about gender pay.

There are nine levels of CEA and the range of payments is large (a level one award is worth £3016 a year and a level nine award is worth £36192 i.e. 12 times the value of a level one award). This means that relatively small changes in the number of consultants receiving the higher level awards can have a significant impact on the mean average as one award can increase or decrease the overall sum paid significantly.

Mean average bonus payments gender pay gap

The mean average male award was £9857 a reduction of £2273 in comparison with 31 March 2017. The mean average female award was £7563 also a slight reduction of £525 on the previous year.

The combined effect of this change in the distribution of awards for both male and female consultants is that the mean average bonus gender pay gap has reduced from 33.1% (i.e. male mean average bonus 33.1% higher than female mean average bonus) to 23.27%.

Median average bonus payments gender pay gap

Both male and female median bonus pay was £6032.04 at 31 March 2018 and there was no gender pay gap based on the median average bonus payment. The median gender pay gap in March 2017 was 33% (i.e. median male bonus was 33% higher than the median female bonus).

Comments

- There was a small increase in the number of both male (+5) and female (+7) consultants receiving CEA at 31 March 2018 by comparison to 31 March 2017. These consultants were paid the lower level awards and this had the effect of lowering both the mean and median averages.
- The mean average bonus paid to men remains higher than that paid to women because more male than female consultants still receive the highest level (and paying) CEA.
- When considering the median bonus GPG it should be noted that CEA are paid pro-rata to part time workers and this has the effect of reducing the median value. Since more female

consultants work part time than male consultants this reduces the median for women more than men.

- Learning from 2017 and 2018 GPG reports is that neither mean nor median bonus GPG figures are particularly helpful figures for identifying or monitoring any gender pay gap in Clinical Excellence Awards. One reason for this is that the numbers of staff in receipt of an award are relatively small and the differences in the levels of award great. This means small changes can have a big impact on the statistics.
- More useful measures are:

The number of male and female consultants in receipt of an award – the trend should be towards an equal number (consistent with the representation of males/females in the consultant workforce) and

An equal spread of levels of award amongst male and female recipients

Appendix A provides this data for 2017 and 2018. It is proposed that in addition to producing the GPG data we are legally required to provide, EBAC and the Trust Board should also monitor the data provided in **Appendix A** year on year. It shows that in 2018 female consultants made up 43% of the consultant workforce. 47% of those receiving CEA were female – a slight over-representation of females. The distribution of awards is still in favour of men at the higher levels.

4. What are we doing to close the gender pay gap?

We are committed to promoting greater equality, diversity and inclusion across the Trust. This means making sure men and women have equal opportunities on recruitment, pay, training and career progression. We have processes in place that help ensure gender equality including:

- A structured recruitment process using the national NHS jobs website, helping to support us make unbiased recruitment decisions.
- We use the national job evaluation scheme for all staff on agenda for change terms and conditions of employment. This makes sure all non-medical jobs are measured against the same criteria and weighting of job elements is consistent. Medical staff have national terms and conditions of service and pay arrangements (see section 6 below: Equal pay for work of equal value).
- An agreed, standard process is in place for consultant job planning to ensure it is bias free.
- All trust staff are encouraged to undertake unconscious bias training and we are making it mandatory for everyone who is involved in recruitment
- A range of family friendly policies, including for maternity, paternity, shared parental leave, and flexible working that help support work/life balance for women and men.
- Clinical Excellence Awards are made on the basis of national guidance set out by the Advisory Committee on Clinical Excellence Awards. An internal process is in place to monitor the distribution of awards. Additionally in 2018/19 we reviewed our policy and processes and made changes to ensure any scope for bias on any basis is identified and removed. The changes will come into effect in October 2019 and any impact will be seen from the GPG Report based on 31 March 2020 data.

5. Key statistics from our 2018 gender pay gap report

The reference (or snapshot) date for the gender pay gap data in this report is 31.3.18. 31 March each year is the date all public sector organisations must use.

- Difference in mean pay between male and female staff 23.5%
- Difference in median pay between male and female staff 6.00%
- Difference in mean bonus pay between male and female staff 23.27%
- Difference in median bonus pay between male and female employees - 0%
- The proportion of men receiving a bonus 5.1%
- The proportion of women receiving a bonus 1.1%
- Proportion of men and women working for the Trust by pay quartile

Quartile	Men %	Women %
Upper (higher pay)	27.7	72.3
Upper middle	13.5	86.5
Lower middle	17.3	82.7
Lower quartile	17.4	82.6

- Proportion people working for the Trust by gender*

Men %	Women %
19	81

6. How we ensure equal pay for work of equal value

West Suffolk NHSFT delivers equal pay through adopting nationally agreed terms and conditions for our workforce. These are the National NHS Agenda for Change Terms and Conditions of Service (AfC).

AfC is negotiated nationally by the NHS Staff Council, led by NHS Employers. The national NHS Staff Council has overall responsibility for the AfC pay system and has representatives from both employers and trade unions. AfC provides the framework for pay arrangements which are in place at West Suffolk NHSFT. Typically, AfC terms and conditions apply to nursing, allied health professionals and administration, management and clerical staff, which are the majority of the workforce.

Medical staff are employed on national terms and conditions of service and pay arrangements. These pay arrangements are negotiated nationally on behalf of employers by NHS Employers with the NHS trade unions. These terms and conditions include all Consultants, Medical and Dental staff and Doctors and Dentists in Training.

January 2019

Appendix A

Clinical Excellence Awards and Discretionary Points by gender and level

CEA Level	31-Mar-17						31-Mar-18					
	Female		Male		Total		Female		Male		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
1	8	38.10	13	61.90	21	30.00	12	42.86	16	57.14	28	34.57
2	8	61.54	5	38.46	13	18.57	9	52.94	8	47.06	17	20.99
3	6	60.00	4	40.00	10	14.29	6	60.00	4	40.00	10	12.35
4	4	50.00	4	50.00	8	11.43	5	50.00	5	50.00	10	12.35
5	2	40.00	3	60.00	5	7.14	2	66.67	1	33.33	3	3.70
6	1	50.00	1	50.00	2	2.86	1	25.00	3	75.00	4	4.94
7	3	60.00	2	40.00	5	7.14	3	60.00	2	40.00	5	6.17
8	0	0.00	1	100.00	1	1.43	0	0.00	0	0.00	0	0.00
9	0	0.00	5	100.00	5	7.14	0	0.00	4	100.00	4	4.94
Total	32	46%	38	54%	70	100.00	38	47%	43	53%	81	100.00

Consultant medical staff in post	31-Mar-17						31-Mar-18					
	Female Headcount		Male Headcount		Total		Female Headcount		Male Headcount		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	79	43%	104	57%	183	100	80	43%	106	57%	186	100

Discretionary point	31-Mar-17						31-Mar-18					
	Female		Male		Total		Female		Male		Total	
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
	1	100	0	0	1	100	1	100	0	0	1	100