



OD, Culture & Inclusion

Gender Pay Gap

Introduction

All organisations with 250 or more employees are mandated by the government to report annually on their gender pay gap. The gender pay gap is calculated as the percentage difference between average hourly earnings for men and women and organisations are required to publish information relating to pay for six specific measures outlined in this report.

Equal pay and gender pay

Equal pay means that men and women in the same employment who are performing equal work must receive equal pay, as set out in the Equality Act 2010. The gender pay gap is different to equal pay and is a measure that shows the difference in average earnings between men and women across an organisation or the labour market. It is expressed as a percentage of men's earnings.

UHNM's pay approach supports the fair treatment and reward of all staff irrespective of gender. This is in line with our Equality, Diversity and Inclusion policy. Remuneration to all staff, regardless of gender, is made in accordance with National Terms and Conditions.

This report fulfils the Trust's reporting requirements, analyses the figures in more detail and sets out what we are doing to close the gender pay gap in the organisation. The six measures are:

Median gender pay gap	This is the difference between the hourly pay of the median man and the hourly pay of the median woman. The median for each is the man or woman who is in the middle of a list of hourly pay ordered from highest to lowest paid. Medians are useful to indicate what the 'typical' situation is. They are not distorted by very high or low hourly pay.
Mean gender pay gap	The mean gender pay gap uses hourly pay of all employees to calculate the difference between the mean hourly pay of men, and the mean hourly pay of women. A mean involves adding up all of the numbers and dividing the result by how many numbers (employees) in the list. Mean averages are useful because they place the same value on every number they use, giving a good overall indication of gender pay but very high or low hourly pay can dominate and distort the figure.
Median bonus gender pay gap	This is the difference between the bonus pay of the median man and the bonus pay of the median woman. The median for each is the man or woman who is in the middle of a list of bonus pay ordered from highest to lowest paid.
Mean bonus gender pay gap	The mean gender bonus pay gap uses bonus pay of all relevant employees (which at UHNM is Consultant Medical staff in receipt of a Clinical Excellence Award) to calculate the difference between the mean bonus pay of men, and the mean bonus pay of women. A mean involves adding up all of the numbers and dividing the result by how many numbers (employees) in the list.
Proportion of males and females receiving a bonus	The proportions of relevant male and female employees who were paid a bonus payment. For UHNM this refers to local and national clinical excellence awards.
Proportion of males and females in each quartile band	The proportions of male and female relevant employees in the lower, lower middle, upper middle and upper pay quartile pay bands.

Our Gender Pay Gap Data

The data is a snapshot of pay taken on 31st March:

Based on Hourly Pay	2018	2019	2020	2021	2022	What this means
Median gender pay gap	10.3%	8.8%	12.6%	13.3%	15.9%	There has been a decrease in the percentage of women (by 1.5%), and an increase (of 1.5%) in the percentage of men in the upper pay quartiles while at the same time there has also been a small increase in the percentage of women, and decrease in the percentage of men in the lower pay quartiles which has resulted in the pay gap increasing.
Mean gender pay gap	28.1%	27.6%	27.7%	27.5%	28.3%	

We are confident that our gender pay gap is a result of the workforce distribution, rather than an equal pay issue. This is because we adhere to the Agenda for Change system, national terms and conditions of service (TCS) for Medical staff and, for very senior managers (VSMs), there is a specific VSM pay framework. The Trust also has a robust job evaluation process in place.

Bonus Pay Gap	2018	2019	2020	2021	2022	What this means
Median gender bonus gap	1.2%	29.2%	20.5%	19.4%	33.3%	The bonus payments used to calculate this bonus pay gap data relate to historically paid national and local CEA awards that are recorded on ESR. The number of consultants (both male and female), in receipt of a historically allocated Clinical Excellence Award has reduced. With only a very small proportion of employees receiving clinical excellence awards any fluctuation in the profile can impact on the pay gap. This is the final year of a change in local allocation of awards due to the pandemic, which is the automatic allocation to all eligible consultants (see note below).
Mean gender bonus gap	1.5%	11.0%	19.1%	19.5%	24.5%	

At UHNM bonus payments relate only to Clinical Excellence Award (CEA) payments made to eligible Medical Consultant Staff. CEA's recognise and reward NHS consultant medical staff who perform 'over and above' the standard expected of their role and who can demonstrate achievements in developing and delivering high quality care, and commitment to the continuous improvement of the NHS.

There are two award types - Local and National. Both have eligibility criteria which means that not all consultants can apply (the criteria is explained in our Clinical Excellence Award Policy HR47). Due to the pandemic the scheme was amended to an automatic allocation of the award which is paid to all eligible consultants in March of 2020, 2021 and 2022. At March 2022 there were 440 eligible consultants of which 121 (28%) were female and 319 (73%) were male all receiving the same monetary allocation regardless of contracted hours of £3,871.80. This payment has been paid as a non-consolidated payment and not as bonus payments and is therefore excluded from the gender pay gap report.

	Female	Male
Number of employees receiving bonus pay (i.e. a Clinical Excellence Award) as recorded on ESR	40 (0.4% of all female employees in the organisation)	161 (5.6% of all male employees in the organisation)

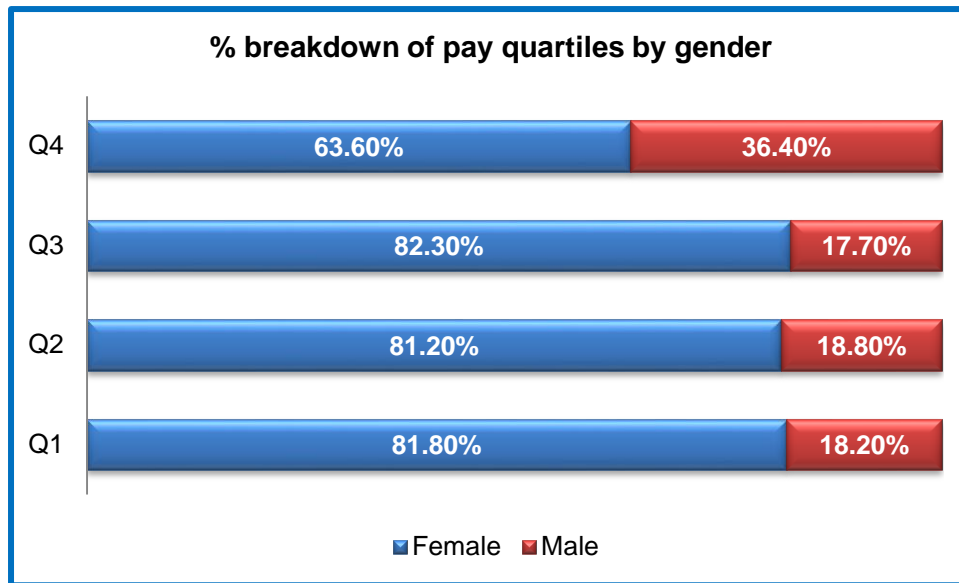
The proportion of male and female workforce in each pay quartile at 31st March 2022:

Quartile 1: percentage of employees in the lower pay quartile

Quartile 2: percentage of employees in the lower middle pay quartile

Quartile 3: percentage of employees in the upper middle pay quartile

Quartile 4: percentage of employees in the upper pay quartile



This data shows that the percentage of women in the most highly paid roles has fallen by 1.5% compared to March 2021 and increased in the lower and lower to middle quartiles.

Our workforce is 78 per cent female; therefore ideally women should make up 78 per cent of each pay quartile. Women are least represented in our medical and dental staff group, which is within the upper pay quartile, and this is reflected in the data above.

Having a predominantly female workforce means that even small fluctuations in the proportion of male to female employees in each quartile, or in receipt of bonus pay will have a significant impact on our gender pay gap.

Supporting Gender Equality at UHNM:

- We ensure the consistent application of Agenda for Change job evaluation rules through the job evaluation process including consistency panels
- We use a Values Based approach in our recruitment processes
- We use a transparent structured approach to shortlisting and interviews with agreed criteria to reduce bias in the recruitment process and we provide recruitment training to our managers
- UHNM promotes careers and roles within the organisation and the wider NHS through our Widening Participation strategy and this includes breaking down traditional stereotypes and demonstrating female role models
- We actively promote and publicise our commitment to flexible working and agile working options for all staff and through the provision of a range of family friendly policies and benefits including shared parental leave and paternity leave and staff self rostering practices
- We promote our internal and system leadership development programmes to all staff and monitor applications to ensure all protected groups are represented
- We provide career coaching and mentoring

- We ensure all staff have a Personal Development Review, which uses the Maximising Potential Tool as an inclusive approach to identifying talent
- Our Executive board membership is 70% female

What is our Staff Survey telling us?

The following information demonstrates UHNM responses to the work-life balance questions in the Staff Survey. It tells us that there is no significant difference between the responses of women and men in our organisation, but that UHNM performs below the national average.

Question	2018	2019	2020	2021	2022	National Average
Satisfied with opportunities for flexible working patterns	48%	48%	52%	46%	48%	53%
Organisation is committed to helping balance work and home life	-	-	-	39%	37%	44%
Achieve a good balance between work and home life	-	-	-	48%	49%	52%
Can approach immediate manager to talk openly about flexible working	-	-	-	60%	61%	68%

The following questions are a breakdown of the work-life balance, flexible working and fair opportunities for career progression and promotion questions by gender.

Question	UHNM	Female	Male
Achieve a good balance between work and home life	49%	49.7%	47.8%
Can approach immediate manager to talk openly about flexible working	60%	61.2%	61.3%
Organisation acts fairly: career progression	55.6%	57.4%	53.4%

What is the likelihood of men and women being appointed from shortlisting?

	Shortlisted	Appointed	% appointed from shortlisting
Men	1276	336	26.3%
Women	3459	662	19.1%
Not stated	21	5	23.8%
Relative likelihood of men being appointed from shortlisting compared to women = 1.38			

Using the same methodology used in the workforce race and disability equality standards, we have analysed the likelihood of women and men being appointed from shortlisting. This tells us that men are 1.38 times more likely to be appointed from shortlisting compared to women. A ratio of 1.0 indicates that there is no difference in the likelihood of appointment from shortlisting.

Progress from our previous Gender Pay Gap Report

The following actions have, by formalising our commitment to flexible working at recruitment stage and enhanced family friendly policies, and the support for aspiring women leaders in our organisation, demonstrated our inclusive approach to tackling the gender pay gap:

- Continued a ‘flexible by default’ approach with all jobs advertised as available for flexible working unless there is a strong justification not to
- Further enhanced our Values Based Recruitment approach with the introduction of equality related exploratory questions
- Embedded a requirement for diverse recruitment panels for AfC Band 6 and above roles
- The system wide High Potential Scheme for aspiring executive leaders programme has a gender split for UHNM participants of 66.7% female and 33.3% men for the latest cohort.
- We have continued to run our Connects leadership programmes, and the gender breakdown of participants is detailed below:

UHNM leadership course and participants	Female 2021-22	Male 2021-22	Female 2022-23	Male 2022-23
Silver Connects Award	91%	9%	79%	21%
Gold Connects Award	67%	33%	75%	25%
Platinum Connects Award	57%	43%	64%	36%

- Continued our focus on menopause with the creation of a menopause guidance document and the promoting the normalising of menopause conversations and the support and adjustments available for workers experiencing menopausal symptoms through our Menopause Café programme
- Embedded the Agile Working Policy
- Creation of a Carer’s Passport designed for staff who care for family or friends who have a disability, illness or who need support in later life. The passport has been designed with the intent of offering assistance to colleagues who have caring responsibilities which may affect their work now or may do in the future. It is a ‘live’ document offering the assistance to carry out an open conversation with colleagues/line managers which relates to relevant Trust policies and allows access to the right support and help when it is needed it
- Promoted national women’s network events and celebrated UHNM women role models in our 2022 International Women’s Day webinar

Proposed Actions to reduce the Gender Pay Gap:

Whilst evidence shows that nationally there has been a continued negative impact of Covid-19 on the gender pay gap (with women taking a disproportional share of the economic hardship caused by the virus, taking a greater responsibility for childcare and more likely than men to work fewer hours and be away from work temporarily or drop out of the labour market altogether since the pandemic struck).

Well-designed flexible working is key to enable women to reconcile work and caring responsibilities. It can enable women to remain in work and stay in roles that reflect their skills, thereby potentially reducing the gender pay gap. It is important to normalise flexible working by boosting its use in all positions and levels of seniority, this will help to challenge the stereotype of women as carers and may also enable more men to work flexibly, share caring responsibilities more equally with their partners, which can, in turn, support women’s progression.

Our gender pay gap data will be used to help understand underlying causes for the gender pay gap so that the Trust can take suitable steps to minimise it. Whilst structural changes to the NHS workforce will take time to work through, we are prioritising the following areas that will support the NHS People Plan aspirations of making flexible working and inclusive talent management a reality for our workforce and our UHNM People Strategy priorities of:

We will look after our people by supporting our people to be healthy and well, both physically and psychologically, and when unwell ensuring they are supported.

We will grow and develop our workforce for the future by attracting, recruiting and retaining our people.

We will create a sense of belonging where we are kind and respectful to each other by creating a positive and inclusive culture which is reinforced through our Being Kind programme.

We will develop our people practices and systems by promoting and using new technologies and equipping our people with digital awareness and skills.

Action / Recommendation	Timescale
1. Launch the UHNM Menopause Guidance and continue with Menopause Café	Q1 2023/24
2. Progress implementation of the UHNM revised inclusive talent management approach and begin our inclusive recruitment task and finish group	Q2 2023/24
3. We will focus on increasing line manager understanding and application of our flexible and agile working policies via bite size webinar sessions commencing on International Women's Day 2023	Q4 2022/23
4. Undertake targeted work with our medical workforce to understand specific barriers for women in the medical profession at UHNM. We will do this by holding listening events with women doctors at all levels.	Q4 2023/24
5. Establish a UHNM Women's Network, facilitated by the OD, Culture & Inclusion service to ensure women have a voice in the organisation and identify and respond to the specific needs of a majority female workforce (e.g. menopause support) and promote the role of Male Allies	Q2 2023/24

This report must be published on the UHNM website and the data reported on a designated government website at www.gov.uk/genderpaygap

1 Explaining the Gender Pay gap:

Our gender pay gap is influenced by the make-up of our workforce which has:

- A greater proportion of male employees in the upper pay quartile compared to lower quartiles and
- A greater proportion of female employees in the lower pay quartiles compared to the upper quartile

Having a predominantly female workforce means that even small fluctuations in the proportion of male to female employees in each quartile will have a significant impact on our gender pay gap

An example of how a Gender Pay Gap can come about:

- ~ An organisation comprises 10 staff and 1 manager
- ~ The 10 staff are 9 females and 1 male and they all earn exactly £50,000 per year so they are all on equal pay
- ~ The manager, who is a man, earns £100,000 per year
- ~ The average salary for women in this organisation is £50,000
- ~ The average salary for men is $(£50,000 + £100,000 / 2) = £75,000$
- ~ The gender pay gap is therefore £25,000 or 50%

2 Explaining the Data

The data is a snapshot of pay taken on 31st March 2020 with the data presented in line with six key indicators:

- Average gender pay gap as a mean average
- Average gender pay gap as a median average
- Average bonus gender pay gap as a mean average
- Average bonus gender pay gap as a median average
- Proportion of males and females receiving a bonus payment
- Proportion of males and females when divided into four quartile pay bands

It is important to note that the gender pay gap may vary by occupation, age group and even working patterns.

Note: The Trust does use agency workers who are not included in the data because they are part of the headcount of the agency company that provides them

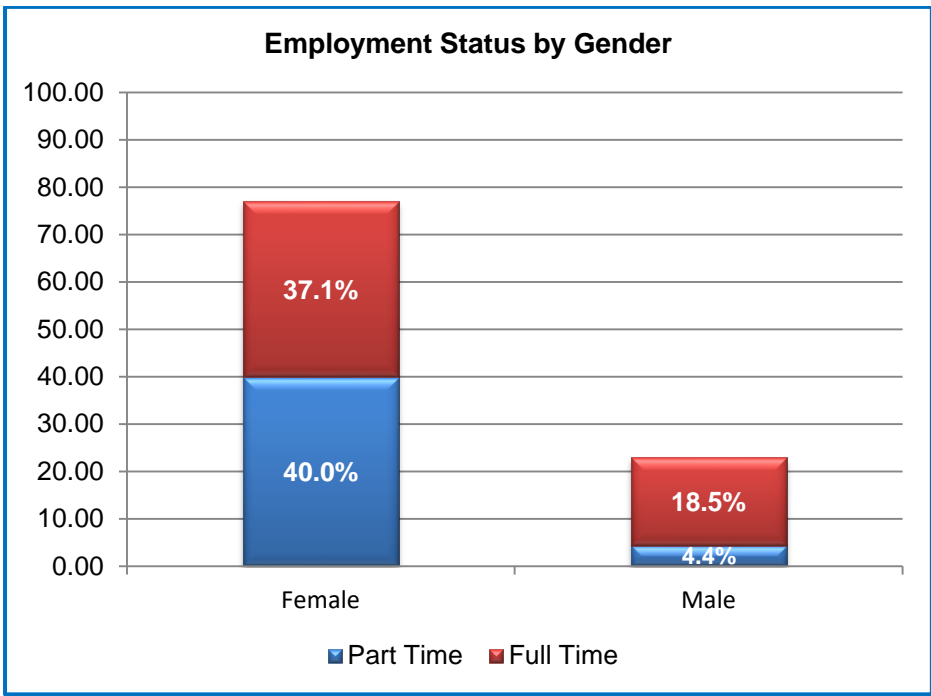
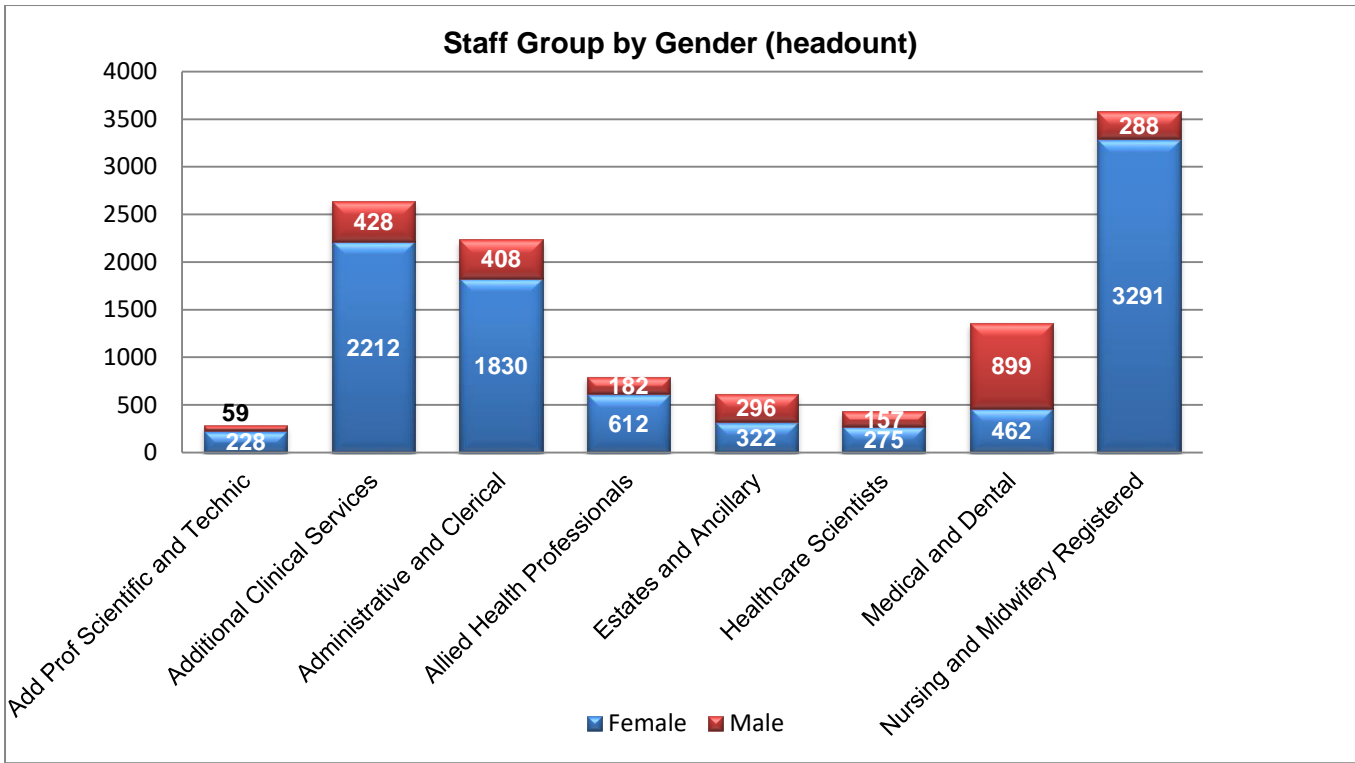
3 How our workforce was made up (as at 31st March 2022)

UHNH is typical of any NHS Trust in that it has a higher number of females than males in its workforce. From a total headcount of 11,513; 78% were female compared to 22% men. This is unchanged on the previous year.

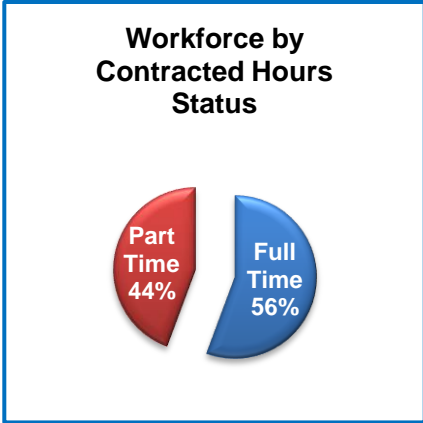
Staff Group	Female	Male
Add Prof Scientific and Technical	79.4%	20.6%
Additional Clinical Services	83.8%	16.2%
Administrative and Clerical	81.8%	18.2%
Allied Health Professionals	77.1%	22.9%
Estates and Ancillary	52.1%	47.9%
Healthcare Scientists	63.7%	36.3%
Medical and Dental	34.0%	66.0%
Nursing and Midwifery Registered	92.0%	8.0%
Students	100%	0%
Grand Total	78%	22%

Payscale	Female	Male
B2	80.73%	19.27%
B3	84.87%	15.13%
B4	82.14%	17.86%
B5	87.15%	12.85%
B6	84.26%	15.74%
B7	81.01%	18.99%
B8a	77.75%	22.25%
B8b	60.75%	39.25%
B8c	65.00%	35.00%
B8d	55.00%	45.00%
B9	66.67%	33.33%
Grand Total	78%	22%

The percentage of women in the medical and dental staff group has fallen by 2% on the previous year.

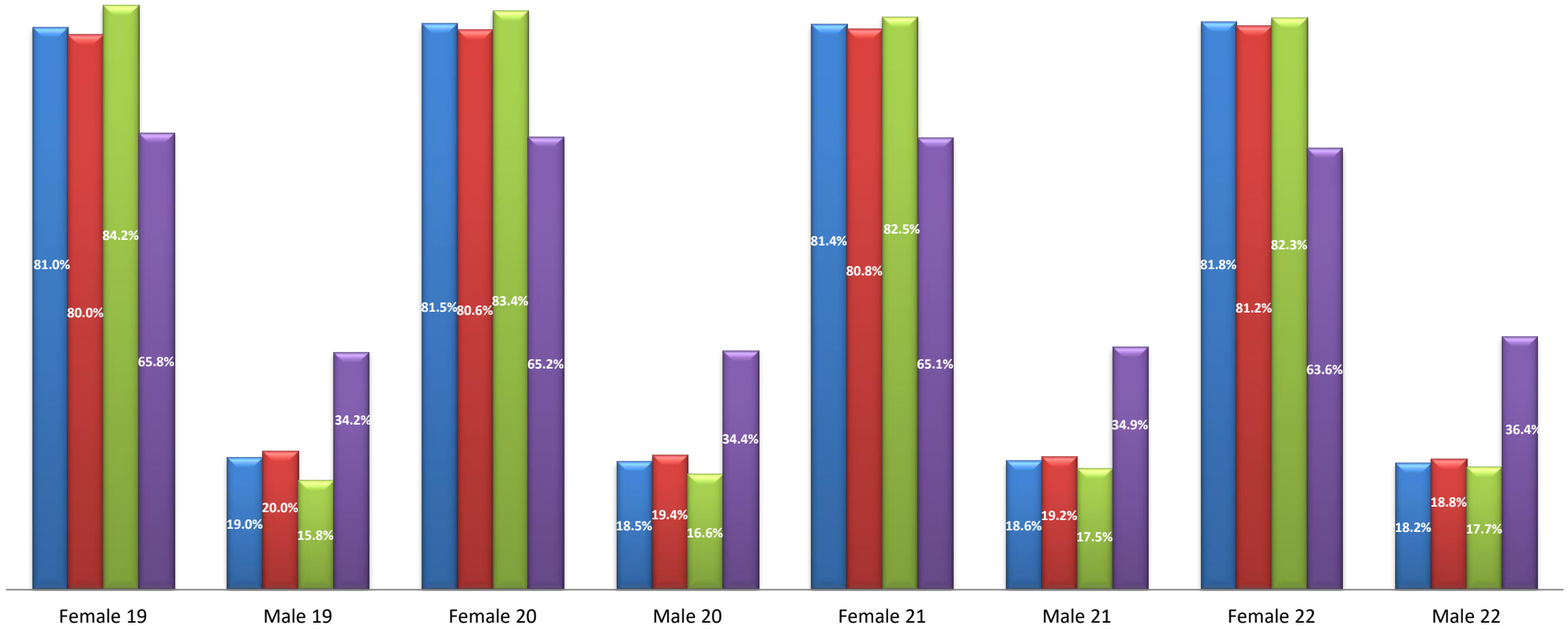


This data tells us that more employees are working full time compared to 2021, with an increase of 0.5% in full time working.




% of Employees in Each Quartile by Gender

■ Quartile 1
 ■ Quartile 2
 ■ Quartile 3
 ■ Quartile 4



How do we compare with other similar organisations?

We can compare our gender pay performance against our Model Hospital recommended peers using the gender pay gap data from the last report (**31st March 2021** snapshot), which is available from the Model Hospital website.

Pay Gap Metrics	Data period	Provider value	Peer average 	National value	National value method	Chart
Average gender hourly pay gap	2021/22	 27.5%	27.5%	20.2%	Provider median	
Median gender hourly pay gap	2021/22	 13.3%	13.7%	8.1%	Provider median	
Proportion of males in lower quartile of hourly pay	2021/22	 18.6%	17.3%	19.0%	Provider median	
Proportion of females in lower quartile of hourly pay	2021/22	 81.4%	82.7%	81.1%	Provider median	
Proportion of males in top quartile of hourly pay	2021/22	 34.9%	31.2%	32.0%	Provider median	
Proportion of females in top quartile of hourly pay	2021/22	 65.1%	68.8%	68.0%	Provider median	