

GENDER PAY REPORT 2021

EXECUTIVE SUMMARY

The gender pay gap is about the difference between men and women's average pay within an organisation. This report sets out the current status of gender pay in the Trust in the pay period up to 31 March 2020.

The Trust's mean and median gender bonus pay gap has increased. Proportionally, significantly more male staff are in receipt of a bonus compared to females; the difference in the Trust's mean and median bonus payments is strongly influenced by the pay and gender make-up of the Medical and Dental Staff Group.

The report summarises the action plan to address the imbalance in pay and close the gap. The effectiveness of these actions is reviewed by the HR Department and overseen by the People Committee, a committee of the Board.

GENDER PAY GAP REPORT

1. INTRODUCTION

In 2017, legislation was introduced that requires UK organisations that employ 250 or more employees to report and publish specific details about their gender pay. Public organisations are covered by the Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017, which came into force on 31 March 2017. These regulations underpin the Public Sector Equality Duty and require relevant organisations to annually publish their gender pay gap by 30 March on their website and the designated Government website at: www.gov.uk/genderpaygap

Due to the continuing impact of the COVID 19 pandemic, the Equalities and Human Rights Commission (EHRC) has extended the deadline for all employers to report until 5 October 2021.

There is no change to the usual reporting requirements which must show:

- the mean and median gender pay gaps;
- the mean and median gender bonus gaps;
- the proportion of males and females who received bonuses; and
- the proportion of males and females in each pay quartile.

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 jobs, similar jobs or work of equal value. It is unlawful to pay people unequally because they are male or female.

The Trust is committed to ensuring our workforce is representative of the community it serves. We aim to attract and retain talented staff from a wide range of backgrounds and with diverse skills and experience to operate in a workplace which is underpinned by #FlourishAtNewcastleHospitals – our cornerstone programme to enable all staff to liberate their potential. We regularly publish information on the wider diversity of our workforce, including the Trust's Annual Report and Accounts, Public Sector Equality Duty report, Workforce Race Equality Standard report and Workforce Disability Equality Standard report.

2. OUR COMMITMENT TO EQUALITY, DIVERSITY AND INCLUSION

Our aim is to be the recognised employer and educator of choice in the North East and to enable all staff to liberate their potential. Our organisation supports people from different backgrounds, with different perspectives and different ways of working to succeed and help us provide the best possible service to our patients.

We are committed to advancing equality, recognising diversity and promoting social inclusion. We recognise our responsibility to provide equal opportunities, eliminate discrimination and foster good relations in our activities as an employer, service provider and partner. The measures we will take are set out in our local People Plan.

Salaries within the Trust for staff employed on Agenda for Change are determined through the NHS Job Evaluation Handbook and the NHS Terms and Conditions of Service Handbook (Agenda for Change). Salaries for Medical and Dental Staff are in accordance with NHS terms and conditions of service for this staff group.

Staff undertaking the same job are paid the same irrespective of gender.

Newcastle Hospitals is an equal pay employer.

3. DECLARATION

I confirm this report is accurate to the best of my knowledge and belief. It reflects a snapshot of our organisation on 31 March 2020. We have a number of actions in place to reduce our gender pay gap. We will publish data by 30 March 2021 as originally required by the regulations.



Signed:

Name: Dame Jackie Daniel

Designation: Chief Executive Officer

Date: 7th April 2021

4. OUR GENDER PAY GAP DATA

4.1 Gender profile

Profile	Male 2021	Female 2021	Male 2020	Female 2020
Overall	22%	78%	22%	78%
All staff (excluding M&D)	17%	74%	17%	74%
M&D	5.2%	3.9%	5.2%	3.9%

The Trust's gender profile is predominantly female which has not changed in the last year.

4.2 Gender pay

Profile	Male 2021	Female 2021	Pay Gap 2021	Male 2020	Female 2020	Pay Gap 2020
Mean hourly pay rate (all staff)	£21.49	£16.13	24.91%	£20.92	£15.64	25.2%
Median hourly pay rate (all staff)	£15.56	£14.93	4.0%	£15.14	£14.34	5.3%

The mean and median hourly pay rates both show that male staff in the Trust are paid more than female staff. Compared to last year, the mean gap has reduced by 0.29% and the median by 1.3%. Using the median value, a female earns 96p for every £1 a male earns – last year it was 95p.

The Trust's overall mean gender pay gap is strongly influenced by the pay and gender make-up of the Medical and Dental Staff Group (i.e. Doctors and Dentists). This group is predominantly male and their higher pay relative to other staff, increases the level of male average pay compared to females.

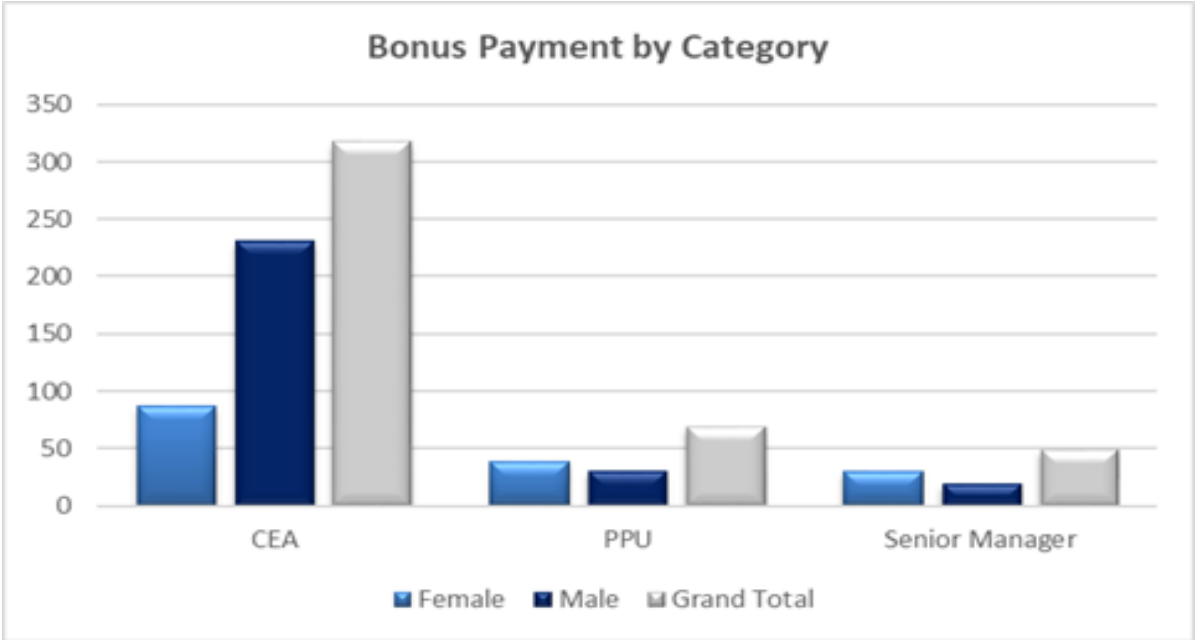
4.3 Gender bonus pay

The Trust has four payments classed as bonus for the purposes of gender pay reporting: Clinical Excellence Awards (CEAs) for Medical and Dental Staff; Excellence Awards for senior staff employed on a Trust Senior Staff Contract; discretionary performance related pay bonus for Executive Directors/Very Senior Managers (VSM), and performance bonus for staff in the Pharmacy Production Unit (PPU).

Profile	Male 2021	Female 2021	Bonus pay gap 2021	Male 2020	Female 2020	Bonus pay gap 2020
Mean bonus pay per annum	£15,075	£4,721	68.9%	£16,220	£5,930	64.4%
Median bonus pay per annum	£8,225	£1,985	75.9%	£9,048	£2,951	67.4%
Proportion of staff in receipt of bonus	6.85%	1.13%		6.4%	1.0%	

The Trust’s mean and median gender bonus pay gap has increased. Proportionally, significantly more male staff are in receipt of bonus compared to females.

The difference in the Trust’s mean and median bonus payments is strongly influenced by the pay and gender make-up of the Medical and Dental Staff Group. This group is predominantly male and their higher bonus payments relative to other staff significantly increases the level of male average bonus pay compared to females.



Bonus	Male	Female	Grand Total
CEA – M&D	230	87	317
Performance Award – PPU	31	38	69
Excellence Award for Senior Staff & discretionary performance bonus for Executive Director/Very Senior Manager	19	30	49
Grand Total	280	155	435

The total financial values of bonus received for males is £3,542,647.25 and for females is £670,388.

Percentage of males in receipt of bonus is 84%; percentage of females is 16%.

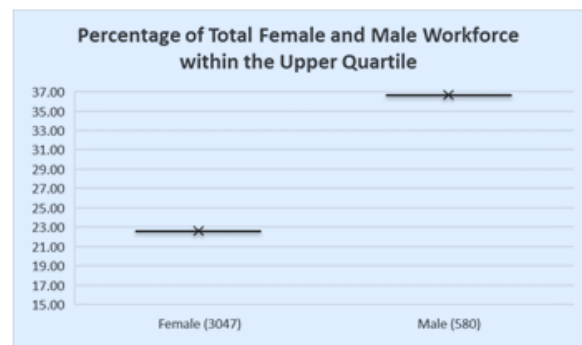
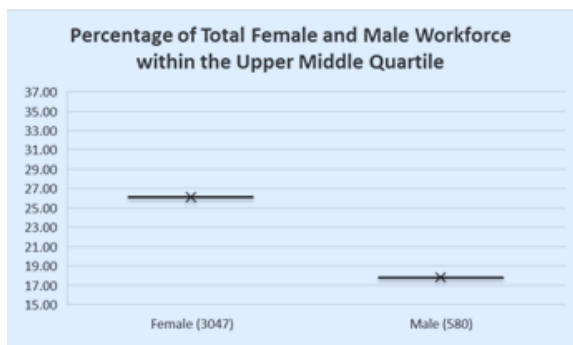
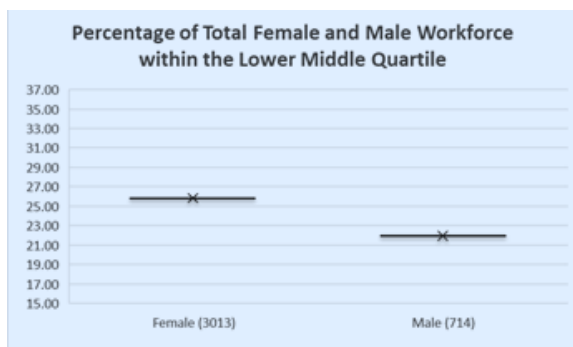
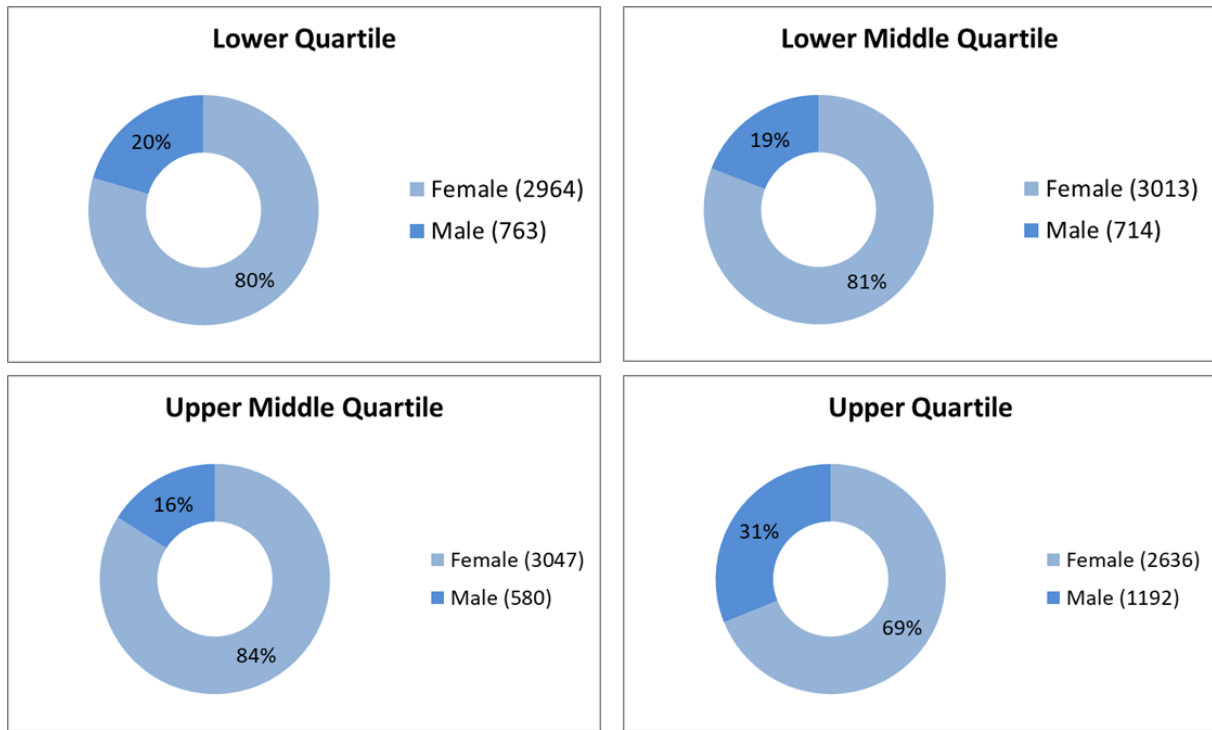
96.22% of all bonus payments relate to Clinical Excellence Awards (CEAs).

86% of CEA payments are attributed to men; 14% to women.

Of the National CEAs, females are represented in the Bronze category to the value of £58,510.4 compared to a male value of £1,376,570.25

4.4 Pay distribution by quartiles

The data below is achieved by dividing the workforce into four equal parts (quartiles). All staff are ranked from the lowest hourly rate of pay to the highest. The rank order is then divided into four sections with an equal number of staff in each.



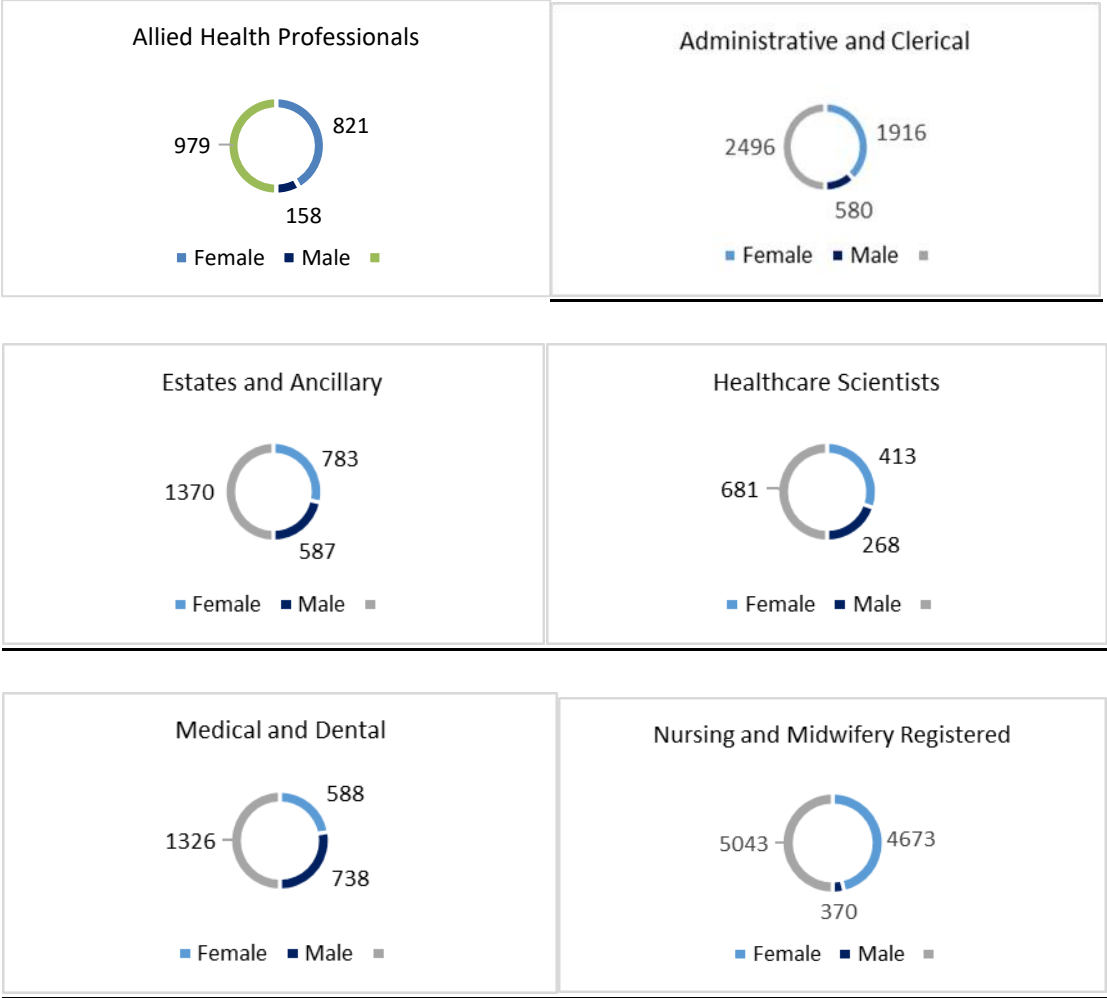
The highest variance is in the upper middle quartile where 16% of staff are male and 84% are female; the lowest is in the upper quartile where 31% are male and 69% are female.

80.5% (5,977) of all staff in the lower and lower middle quartiles are female compared to 76.5% (5,683) in the upper middle and upper pay quartiles.

19.5% (1,477) of all staff in the lower and lower middle quartiles are male compared to 23.5% (1,772) in the upper middle and upper pay quartiles.

A key reason for the Trust’s gender pay gap in favour of males is that proportionally more males hold senior positions.

4.5 Gender profile by staff group



Management staff are in general, included in the Administrative and Clerical staff group. The majority of females are Nursing and Midwifery registered (4,673) followed by Administrative and Clerical (1,916). The majority of males are Medical and Dental (738) followed by Estates and Ancillary. The gender profile is currently stereotypical.

4.6 **Gender profile by pay band/scale**

PAY SCALE	Female % (within pay scale)	Male % (within pay scale)
Band 1	67	33
Band 2	75	25
Band 3	79	21
Band 4	82	18
Band 5	86	14
Band 6	84	16
Band 7	81	19
Band 8 - Range A	75	25
Band 8 - Range B	62	38
Band 8 - Range C	56	44
Band 8 - Range D	67	33
Band 9	100	0
Consultant	40	60
Junior Doctor	49	51
Senior Staff Contract	61	39
Specialty Doctor/AS	67	33

5. **ACTIVITIES THAT SUPPORT CLOSING THE GENDER PAY GAP**

The Trust undertakes a wide range of activity to ensure that our processes and systems attract, retain and support people from all backgrounds. Many of these activities will contribute to closing the gender pay gap – these are set out below and include updates on previous actions. The effectiveness of these actions is reviewed by the HR Department and overseen by the People Committee, a committee of the Board.

5.1 **Recruiting, retaining and developing a diverse workforce**

- Introduced mandatory training on recruitment best practice, including designing selection criteria, drafting job adverts and assessing fairly.
- Implemented online recruitment management systems (Trac and NHS Jobs) to provide a 'blind' recruitment solution that ensures all personal information including gender is not visible to those making selection decisions until after the interview stage.
- Promotion of male employment in female orientated roles i.e. nursing.
- Actions to improve mixed gender selection panels and our next steps include positive action on panels for posts at band 6 and above to ensure they are ethnically diverse.
- Strategic aim to become the most flexible employer in the NHS over the next three years.
- Placement provider for NHS graduate management programme trainees.
- Implemented a holistic Health and Wellbeing Strategy.
- Implemented an Agile Working policy, encourage flexible working and part time working options available to all staff, irrespective of gender.
- Reviewed flexible working data by band.
- Enabled homeworking for staff who are able to work from home.

- Promotion of family friendly policies/special leave and carers provisions.
- Promotion of shared parental leave to men.
- Development of Health and Carer passports to ease transfer of role across the organisation and the health and care system.
- Building our Trust-wide coaching offer and exploring mentoring options.
- Delivered specific campaigns to recruit for diversity, such as Integrated Covid Hub North East (ICHNE).

5.2 Progression and career paths

- Delivery of systems-wide leadership development programmes ensuring diversity of participants.
- Undertake an annual talent round to track progression into and within the Trust. This includes a review of diversity.
- Deliver internal talent development programmes across a range of grades and for staff from diverse ethnic backgrounds and staff with a disability.
- Offer a range of apprenticeship programmes from entry to degree level of learning and development.
- Work with our Staff Networks on the design and implementation of specific initiatives.
- Published a report (Surash-Pearce Report) on the ethnicity pay gap within the Trust.
- Delivered a reverse mentoring programme for senior managers, including Executive level.

5.3 Performance Management

- Implemented an appraisal policy which includes assessment of performance and behaviours, production of a personal development plan and career conversations.
- Embedded a single system and process of performance appraisal, review and moderation for senior staff employed on a Trust Senior staff Contract.
- Reviewed diversity outcomes in our Staff Networks.

5.4 Local Clinical Excellence Awards (LCEA)

- Refreshed composition of consultant representatives on LCEA Committee to be more reflective of diversity in the Consultant body.
- Representatives no longer voted to the Committee by the Consultant Staff Committee.
- Positive action welcoming applications to sit on the Committee from previously under-represented groups via a self-nomination process.
- Active support and promotion from Clinical Directors to encourage applications from female Consultants.
- Anonymised 'front page' on each CEA application being introduced before sharing applications with Committee.
- Scoring and criteria changed to assess what can be achieved in contracted hours (e.g. part-time) rather than as previously, against a full time equivalent.
- EDI training to be provided for Committee members.
- Advice and guidance made available to all applicants from local level 9 and national award holders.

- Virtual information sessions put in place by local level 9 and national award holders (four are female Consultants) to provide guidance to potential applicants and answer questions.
- Mechanism put in place to provide feedback to applicants prior to their submission to avoid 'underselling' their achievements.

6. NEXT STEPS

We recognise there are still a number of improvements to be made and we will endeavour to develop a range of activities over the next 12 months to advance gender pay. These include:

- Increasing the frequency of recruitment reports by demographics for scrutiny and discussion.
- Exploring how we can better promote our vacancies in senior positions to women and organisations that support women.
- Explore the likelihood of being appointed to pay bands featured in the quartiles to understand the barriers in more detail.
- Exploring how we can better support female talent. For example, encourage the next generation of female leaders by establishing an internal task and finish group to explore how we can better support women into middle and senior management roles.
- Exploring further opportunities for more flexible or alternative shift working across the organisation and explore how this could be introduced into a wider range of roles.
- Rolling out leadership development programmes throughout the Trust to staff in band 6 and below.
- Working with other NHS and partners to learn from best practice and explore opportunities to develop joint activities.
- Review our policy and process to ensure there is no gender bias in the starting salaries and remuneration packages of new employees, including very senior staff, and regularly monitor.
- We are cognisant of the recommendations of the report 'Mend the Gap: The Independent Review into Gender Pay Gaps in Medicine' published in December 2020 and the government's announcement that it will establish an implementation panel to help address the structural barriers outlined.

7. CONCLUSION

The gap in our mean and median pay and particularly bonus pay, shows there is more work to be done. Whilst we do not have an equal pay issue, we will continue to take steps to reduce our pay gap and explore best practice.

Dee Fawcett
 Director of HR
 15 March 2021