

Gender Pay Gap Report 2022

1. Introduction

- 1.1. As with all other employers with more than 250 staff, the Trust is required to report data relating to the Gender Pay Gap. The data reported in this paper shows the pay gap as at 31st March 2022, as required by the Regulations.
- 1.2. Whilst both equal pay and the gender gap deal with the disparity of pay women receive in the workplace, they are two different issues:
 - Equal pay means that men and women in the same employment performing equal work must receive equal pay, as set out in the Equality Act 2010.
 - The gender pay gap is a measure of the difference between men's and women's average earnings across an organisation. It is expressed as a percentage of earnings and represents the difference between the mean hourly rate of ordinary pay of male and female employees, and the difference between the median hourly rate of ordinary pay of male and female employees.

2. Gender Pay Gap

- 2.1. In common with many organisations (including other NHS Trusts) MEH has a gender pay gap. In 2022 the average pay for a male employee was £4.50 (17.36%) higher than the average female hourly rate. The median hourly rate gap was slightly lower at £4.21 (17.88%) per hour.

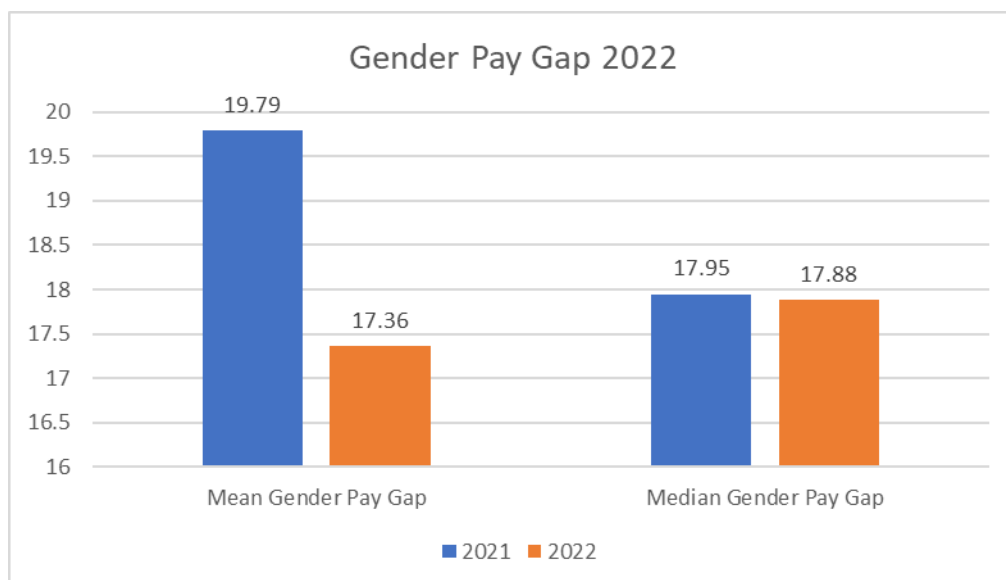


Figure 1: Mean and median gender pay gap 2022 vs 2021

- 2.2. The cause of the gender pay gap is multifaceted. Our data shows there are more women in lower paid roles /occupations, see staff group breakdowns below. Women are also more likely to work part-time (which is generally less well paid than full-time work on a per hour basis), and to take time out of the labour force for caring responsibilities. These factors limit

women's labour market experience and progression; the gender pay gap widens significantly after women have children.

Staff Overview	Headcount		% in Band	
Staff Group	Female	Male	Female	Male
Add Prof Scientific & Technical	165	68	71%	29%
Additional Clinical Services	257	104	71%	29%
Administrative and Clerical	529	236	69%	31%
Allied Health Professionals	39	11	78%	22%
Estates & Ancillary	3	31	9%	91%
Healthcare Scientists	31	26	54%	46%
Medical Staffing	158	206	44%	56%
Nursing & Midwifery	354	71	83%	17%
Student	0	0	0%	0%
Grand Total	1536	753	67%	33%

Table 1: Staff Group Breakdown AfC

Staff Overview	Headcount		% in Band	
Staff Group	Female	Male	Female	Male
Speciality Doctor	23	17	58%	43%
Speciality Registrar	22	45	33%	67%
Trust Grade Doctor - Career Grade Level	47	41	53%	47%
Consultant	66	103	40%	60%
Grand Total	158	206	44%	56%

Table 2: Staff Group Breakdown Medical

- 2.3. Whilst women make up 67% of our workforce, they are overrepresented in the lower, lower middle and upper middle pay quartiles and underrepresented in the upper pay quartile.

Quartile	Female	Male	Female %	Male %
0-25%	404	164	71.13%	28.87%
25-50%	406	158	71.99%	28.01%
50-75%	422	153	73.39%	26.61%
75-100%	304	278	52.23%	47.77%

Table 3: Gender by pay quartile

3. Medical vs. non-medical Gender Pay Gap

- 3.1. When considering the data on a more granular level, it is clear that the main driver of the gender pay gap at MEH is the difference our consultant workforce makes on pay across the organisation.

	Female		Male		GPG	
Band Groupings	Mean Hrly Rate	Median Hrly Rate	Mean Hrly Rate	Median Hrly Rate	Mean GPG	Median GPG
Band 1-4	£13.49	£13.49	£13.50	£13.43	0.07%	-0.45%
Band 5-7	£22.12	£22.78	£22.34	£23.59	0.98%	3.43%
Band 8-9	£34.18	£30.85	£34.50	£31.10	0.93%	0.80%
Medical staffing/Consultant	£36.84	£36.70	£39.61	£42.45	6.99%	13.55%

Table 4: Medical vs. non-medical gender pay gap

- 3.2. Whilst we have a fairly equal number of men and women at a medical grade (56% and 44% respectively), the split at consultant grade widens to 60% and 40% in favour of men. And the women in the medical grades form part of a much larger population of women when looking at the gap at the organisational level (as the Trust is 67% female). Consequently, their effect on female average pay is less than male consultant pay is on male average pay.

4. Bonus Gender Pay Gap

- 4.1. The bonus gender pay gap is driven by the Clinical Excellence Awards (CEAs), which our medical consultants are eligible for.
- 4.2. For the period 2021/2022 the mean bonus gender pay gap was 2.66%, this has improved from the period 2020/2021, when it was 18.98%. The median was 0%, again an improvement on 2021 when it was 60.06%.
- 4.3. It should be noted that in 2021/2022 the Trust was instructed to distribute the CEA budget for that period equally across all consultant colleagues. As such, everyone received a CEA of at least £3,742. This is the primary reason for the equalising of the median bonus gender pay gap and reduction in the mean bonus gender pay gap.
- 4.4. In the 2021/2022 period 13.41% of male colleagues received a bonus, compared with 4.10% of female colleagues. This is driven by the fact that the consultant population is 60% male versus 40% female, contrasted with an organisational distribution of 33% male and 67% female.

5. Ethnicity Pay Gap (EPG)

- 5.1. Whilst not required to report on it formally, we continue our practice of analysing our pay data by ethnicity as well as gender.
- 5.2. The mean EPG has reduced from 15.48% in 2021 to 13.20% in 2022. The biggest reduction in the EPG was for Medical Consultant/Non-Consultant which was 9.35% in 2021 compared to 6.92% in 2022, a reduction in gap of 2.43%.

- 5.3. Table 5 below shows that EPG is primarily driven by pay at the AfC Bands 8-9 and also within the medical consultant workforce. It should be noted that our representation rates for Black, Asian and Minority Ethnic colleagues worsen after Band 7, and decline further at Bands 8c and 8d. This is the primary driver of the pay gap noted in Bands 8-9.

	BME		White		EPG	
Band Groupings	Mean Hrly Rate	Median Hrly Rate	Mean Hrly Rate	Median Hrly Rate	Mean GPG	Median GPG
Band 1-4	£13.45	£13.49	£13.65	£13.49	1.47%	0.00%
Band 5-7	£22.27	£23.53	£22.34	£23.59	0.31%	0.25%
Band 8-9	£32.71	£30.85	£35.28	£31.64	7.28%	2.50%
Medical staffing/Consultant/VSM/NEDs	£37.95	£35.39	£40.77	£42.85	6.92%	17.41%

Table 5: Pay by ethnicity, analysed by pay band groupings as of 31 March 2022

- 5.4. In 2022, the mean bonus pay gap for our Black, Asian and Minority Ethnic colleagues was 13.67%, meanwhile the median was 0%.

Ethnicity	Mean Pay Value Rate	Median Pay Value Rate
White	£ 8,369.36	£ 3,742.00
BME	£ 7,225.57	£ 3,742.00
EPG	13.67%	0.00%

Table 6: Bonus pay by ethnicity

6. Benchmarking

- 6.1. Benchmarking data is not yet available for the Integrated Care System (ICS) of North Central London (NCL) since all trust have until 30th March 2023 to report their figures.

7. Recommendations

7.1. The recommendations below are designed to help us better understand the drivers of our gender pay gap and to take targeted action to close the gap. Whilst recommendations are proposed to be completed within the following 12 months, it should be noted that significant improvements are unlikely to be realised in this timeframe as some of the GPG relates to historical issues regarding representation within medical staffing and length of service, which will only be corrected over time.

Action	Lead
To undertake a deep dive analysis of the GPG and EPG for our Medical staffing, including a breakdown by length of service, to understand where the gap is at its highest and worsening to identify root causes and further recommendations	Workforce Planning Lead
Produce an EDI dashboard on Qlik Sense that will include Pay gap report for gender and race to ensure regular review on our current position to enable timely actions to address emerging trends to take place	Workforce Planning Lead
Introduce Menopause support offer, including Line Manager guidance and awareness to support and retain women affected	H&W Advisor and HR Officer
Establish a Women's Staff Network to better understand the experience of our female workforce, and what would make a difference to career progression for this group	EDI Manager
Audit the number of applications for salary agreement at Recruitment for AfC and Medical staffing to establish any practices that contribute to worsening GPG or EPG	Recruitment Manager, Medical Recruitment & ED&I team