



South Tees Hospitals
NHS Foundation Trust

Gender Pay Gap

Annual Report 2021

South Tees Hospitals NHS Foundation
Trust

Purpose of Report

The purpose of the reports is to ensure the People Committee acknowledge the Trust's Gender Pay Gap Results (2020) and to confirm their approval

Background

In order to meet the requirement for 2020, Trusts are required to publish their Gender Pay Gap data (as at 31 March 2020) no later than 5 October 2021. This has been extended from the original deadline (30 March 2021) due to the ongoing Covid-19 pandemic. This is a statutory requirement for all organisations with more than 250 employees.

For 2020, the Trust is reporting a gender pay gap which indicates that on average, male employees are paid 31.57%, more than females. This is a slight increase from the 2019 results which were reported as 29.91%.

Although this does not breach any legislation requirements such as equal pay, it does create a risk of gender inequality, which may lead to difficulties in attracting and retaining female employees.

Introduction

As set out in the NHS Long Term Plan, respect, equality and diversity are central to changing culture and are at the heart of the NHS workforce implementation plan.

The requirement to undertake gender pay gap reporting became mandatory for all public sector organisations from 31 March 2017, in accordance with the Equality Act 2010 (Gender Pay Gap Information) Regulations 2017.

The Trust is required to report and publish its statutory calculations to the government equalities office every year, showing how large the pay gap is between our male and female employees. The gender pay gap reporting duties only applies to 'relevant employees' employed on the snapshot date of 31 March in the relevant year.

This report includes each of the statutory requirements as detailed within the legislation:

- 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 receiving a bonus payment and proportion of females receiving a bonus payment
- Proportion of males and females, when divided into four groups ordered from lowest to highest pay

What does the Trust need to do?

In order to meet the requirement for 2020, the Trust is required to publish our data (as at the snap shot date of 31 March 2020) no later than 5 October 2021. There has been a six-month suspension to the enforcement of gender pay gap regulations from the original reporting date of 30 March 2020 due to the ongoing Covid-19 pandemic.

Gender Pay Gap analysis is incorporated within the Workforce Profile Dashboard within the Electronic Staff Record (ESR) and this provides the data required for Gender Pay Gap reporting.

For differences in rates of pay and bonuses, a positive percentage indicates that men receive a higher rate of pay than women and a negative percentage indicates that male employees receive a lower rate of pay than women.

Gender pay gap reporting is not a report on equal pay, as equal pay is the pay differences between men and women who carry out the same jobs, similar jobs or work of equal value. It is possible to have equality of pay and yet still have a gender pay gap. The NHS uses Agenda for Change to ensure equal pay for those staff carrying out the same job, on the same band with incremental progression through the salary scale based upon length in post and not gender.

Gender Pay Gap Results (2020)

A summary of the Gender Pay Gap information for 2020 for South Tees Hospitals NHS Foundation Trust is shown in the table below. The results from the 2019 gender pay gap report are included as a comparator.

Gender Pay Gap Reporting Indicators	2019	2020	Change
1. Difference in hourly rate of pay – mean (average)	29.91%	31.57%	+1.66%
2. Difference in hourly rate of pay – median (middle)	21.23%	19.56%	-1.67%
3. Difference in Bonus Pay – mean (average)	35.08%	37.32%	+2.24%
4. Difference in bonus pay – median (middle)	33.33%	12.5%	-20.83%
5. % of male employees who received bonus pay	10.52%	9.8%	-0.72%
6. % of female employees who receive bonus pay	0.52%	0.47%	-0.05%
7. % of Employees by Pay Quartile:			
7(a) Upper Quartile (Q4)	-	31.36%	31.55%
Male		68.64%	68.45%
- Female			
7(b) Upper Middle Quartile (Q3)	-	13.66%	12.83%
Male		86.34%	87.17%
- Female			
7(c) Lower Middle Quartile (Q2)	-	11.59%	12.68%
Male		88.41%	87.32%

	- Female			
7(d)	Lower Quartile (Q1)	-	16.59%	15.70%
	Male		83.41%	84.30%
				+0.89%
	- Female			

The above table represents the high level data which must be reported to the government's equalities office by 5 October 2021.

Gender Pay Gap

This section of the report is focused on the Trust's Gender Pay Gap %, which is reported as being an average of 31.57% for 2020 – a slight increase from the figure of 29.91% as reported in 2019.

Workforce Gender Split

The current gender split within the Trust's overall workforce continues to show 81.44% female and 18.56% male. The Trust has 2.57% more females working within the organisation, as compared to the national average of female workers within the NHS as a whole (78.87% female and 21.13% male).

The proportion of females and males employed within each pay band is shown in the table below:

Band	Female	Male
Band 1	58.97%	41.03%
Band 2	83.96%	16.04%
Band 3	89.76%	10.24%
Band 4	87.62%	12.38%
Band 5	90.98%	9.02%
Band 6	87.40%	12.60%
Band 7	85.22%	14.78%
Band 8a	78.60%	21.40%
Band 8b	66.67%	33.33%
Band 8c	72.73%	27.27%
Band 8d	33.33%	66.67%
Band 9	75.00%	25.00%
Medical and Dental Staff	35.54%	64.46%
Other	68.97%	31.03%
Grand Total	81.81%	18.19%

Women have traditionally been attracted to roles in healthcare, and primarily the nursing and midwifery profession and support roles such as Health Care Assistant/Therapy Assistant, due to the flexibility and family friendly policies offered within the NHS.

Analysis of the Trust's workforce profile shows that there is higher representation of male workers within our medical workforce, which traditionally where roles that predominantly attracted men, as later analysis will show the medical workforce is now attracting a much

high percentage of females into the medical profession. However, the legacy of having a high percentage of males within the medical workforce has a significant and adverse impact. These are the highest paid roles within the organisation, and it is not surprising that the Trust is reported as having a gender pay gap.

In Bands 2 to 7, there is a higher percentage of female staff as compared to our Trust average of 81.81%.

There are two ways of reducing the gap and this includes: increasing the number of female workers within the medical profession, and; increasing the number of male workers who are employed in the lower graded roles.

It is noted that the Trust does not directly employ a number estates and ancillary roles on the James Cook University Hospital site following the outsourcing of these services to Serco. These roles did account for a high proportion of Band 1 and 2 within the Trust, and predominantly attracted a higher number of male candidates for vacancies due to the nature of the work. This reduced the number of male workers within the lower grades and therefore has a direct impact on the Trust's gender pay gap %. Similarly a high proportion of job roles within Bands 1 to 7 consist of health care assistants, nurses and administrative support which traditionally attract a high number of female candidates for vacancies.

Overview of Medical and Non-Medical Staff

Men account for 64.56% of all Trust medical staff. These roles are the highest paid workers of the organisation.

The data provided below breaks this information down further, to show the separate average hourly rates for medical staff, and those staff employed on agenda for change terms and conditions.

Medical Staff

Gender	Average Hourly Rate	Median Hourly Rate
	(mean)	
Male	£32.60	£44.38
Female	£28.86	£35.80
Difference	£3.74	£8.58
Pay Gap %	11.46%	19.33%

Non-Medical Staff

Gender	Average Hourly Rate	Median Hourly Rate
	(mean)	
Male	£13.91	£13.48
Female	£13.15	£14.07
Difference	£0.76	- £0.59
Pay Gap %	5.48%	- 4.39%

The variance of £3.74 between male and female medical staff indicates that, overall, men earn 11.46% more than women.

The variance of £0.76 between male and female staff employed on agenda for change terms and conditions indicates that, overall, men earn 5.48% more than women.

Medical Staff Gender Profile (Detailed)

The gender pay gap is attributable to a number of factors; however it is primarily impacted by the high number of male staff in the medical and dental staff group.

This section of the report examines the Trust's medical workforce in more detail, by grade, length of service and WTE.

Medical Staff by Grade

The Trust's gender profile for medical staff is shown in the table below. This includes all grades of medical staff; however, it excludes trainees who are on rotation to the Trust from the Lead Employer Trust as these staff are not directly employed by the Trust.

The information has been broken down to show the gender profile by grade.

Medical Staff by Role/Grade	Female	Male	Total
Medical Director Function (includes Clinical Leads) * not counted in the total figure as they are reflected in the Consultant figure	0	5	5
Clinical Director – Medical Staff Group * not counted in the total figure as they are reflected in the Consultant figure	7	22	29
Consultant	131	343	474
Associate Specialist	4	14	18
Specialty Doctor	22	23	45
Dental Officer	2	1	3
Specialty Registrar	22	23	45
Foundation Year 2	35	24	59
Foundation Year 1	19	29	48
Other	5	6	11
Grand Total	284	515	799

The analysis shows that the gender split appears to be slightly more balanced within the lower grades of our medical workforce, which is reflective of the fact that a higher number of females are entering the medical profession.

Analysis of the WTE for Medical Staff

Whilst the figures show that there is a higher proportion of male medical staff working within the Trust, the number of females working on a part-time basis is only slightly higher than the number of males.

However, when this figure is expressed as an overall percentage of males and females, this is notably higher with 23.59% of female medical staff working on a part-time basis, as compared to 12.23% of male medical staff.

Full time/Part time	Female	Male	Total
Full Time	217	452	669
Part Time	67	63	130
Total	284	515	799

If we break this information down even further, we can see in the table below that we have no male doctors under the age of 40 working on a part-time basis, as compared to 10

female doctors. The data suggests this difference could be due to carer/dependent responsibilities.

When we compare the age profile of male medical staff working part time this shows a higher proportion of male staff within the 61-70 (70%) age bracket, which could be due to staff taking flexible retirement with reduced hours on return to work.

Age	Female	Male	Total
21-25	24	27	51
26-30	58	39	97
31-35	30	44	74
36-40	46	59	105
41-45	41	83	124
46-50	44	89	133
51-55	28	67	95
56-60	13	60	73
61-65	0	30	30
66-70	0	10	10
>=71 Years	0	7	7
Grand Total	284	515	799

Breakdown of Medical Staff in relation to age and length of service by Gender

A further breakdown is shown in the tables below relating to the age profile and length of service for medical staff.

Length of Service	Female	Male	Total
Less than 5 years	203	292	495
5 to 10 years	36	85	121
10 to 15 years	23	59	82
15 to 20 years	16	44	60
20 to 25 years	3	29	32
Total	3	6	9

The gender pay gap is likely to reduce in the future given the larger number of female staff in the medical and dental workforce in the younger age brackets, e.g. those who are under 30 are 55.41% female and 44.59% male.

Gender Bonus Pay Gap

This section of the report is focused on the Trust's Gender Bonus Pay Gap %, which is reported as being an average of 37.32% for 2020, an increase of 2.24% since the 2019 report.

The Trust does not operate a bonus scheme, however consultant medical staff are eligible to apply for clinical excellence awards (CEA), which are considered to be a bonus

payment and therefore form part of the gender pay gap calculations. The table below provides a breakdown of the average mean and median rate of bonus pay (CEAs).

Medical Staff Only:

Gender	Average Bonus Pay	Median Bonus Pay
Male	£12,752.13	£6,032.04
Female	£7,992.82	£5,277.96
Difference	£4,759.32	£754.08
Bonus Pay Gap %	37.32%	12.50%

As our consultant medical workforce are predominantly male, the results show that male consultants earn a higher average rate of bonus pay (CEAs) than female consultants.

The Bonus Pay Gap has slightly increased from 35.08% as reported in 2019, to 37.32% for 2020.

The table below shows the number of CEA applications received for the 2019 Awards Round, including the number of successful applicants, split by gender.

Gender	Number of Eligible Consultants	Applications Received (CEA 2019)
Male	268	33
Female	104	8
Total	372	41

This shows that of the 41 applications received as part of the 2019 awards round, only 8 applications were from female consultants. This is disappointing so will be an area to develop within the action plan, with the aim of encouraging more female applicants to apply.

It is noted that there has been a significant decrease in the overall number of CEA applications received for 2019 was 41 compared to 90 in 2018 (49 less), which we believe is attributable to the implications of pension taxation.

As in previous years, the analysis indicates that much of the Trust's bonus pay gap is explained simply by the larger number of male consultants rather than by any perceived discrimination in favour of men in the scoring process.

What do the results tell us?

The results show that on average male employees earn a higher rate of pay and a higher average rate of bonus pay (CEAs) than female employees. The median hourly rate of pay and the bonus pay shows a reduction of -1.67% and -20.83% respectively against the previous year's outturn which demonstrates that over time the gender pay gap is reducing as female medical staff start to increase their length of service and progress into 'career grade' roles.

The average pay gap is lower amongst the non-medical workforce in comparison to medical staffing. This is because the proportion of female staff employed by the Trust is higher than the number of male staff with a high proportion of women being employed across all pay bands. However there are still a higher number of females employed within Band 1 that will be contributing to the hourly rate of pay gap 5.48% for male employees.

The median pay gap is higher amongst medical staffing in comparison to non-medical staffing. Since the proportion of male medical staff working in 'career grade' roles is higher than females, it is reasonable to conclude that male doctors earn a higher rate of pay and bonuses than female doctors.

Taking all of the information into consideration, we acknowledge that there could be greater female representation in our senior clinical roles. However, the consultant workforce has a greater proportion of males to females across the NHS, which limits the pool of available applicants to these types of roles. However, as our results indicate number of female medical staff is increasing in the younger age profile.

The Trust has a robust recruitment process that has equality and diversity embedded into its processes. We are also in the process of implementing values based recruitment across the organisation. The Trust will continue to recruit in a non- gender biased manner to ensure that adverts and applicants are recruited in a fair, open and transparent manner.

Further investigation will be given to the internal movement and promotion of staff, in particular reviewing the gender split for internal progression to determine if there are any imbalances or barriers to women being promoted, given the over representation of women in the lower quartile and under representation in high quartiles.

Benchmarking

Due to the temporary change in the required date to publish our Gender Pay Gap Data due to the ongoing Covid-19 pandemic, as at March 2021, only two Trusts within the North East and North Cumbria Integrated Care System (ICS) has published their Gender Pay Gap results for 2020 and this is Tees, Esk and Wear Valleys NHS Foundation Trust and North Tees and Hartlepool Foundation Trust..

Once we have further information across the ICS we will collate benchmarking data for 2020.

Next Steps

The Trust is committed to continuing to address the gender and bonus pay gaps and we will work to develop a range of activities over the next 12 months to advance gender pay. Most notably, this will focus on the development of a Women's Staff Network which we aim to launch in 2021. We will commit to inviting expressions of interest from those Trust employees who are willing to take up the challenge of the role of Network Chair.

We believe that by having a Women's Staff network we will offer a place for staff to come together, share experiences and facilitate learning and development. The network will also assist in the shaping and delivery of organisational strategy and policy, working with us to improve staff experience on specific issues and adding more depth to our Gender Pay Gap Action Plan.

The Trust is committed to reducing the Gender Pay Gap within our organisation and we have undertaken numerous activities which promote equality of opportunity and develop a culture of diversity and inclusivity for all staff. This includes:

- The Trust has actively engaged with the regional network groups that have recently been implemented within the North East and North Cumbria ICS. This was originally taken forward as part of the Great Place to Work Programme and more recently this has developed into the ICS Women's Network.
- We are a Disability Confident employer and encourage applications for employment from individuals who may have a disability and/or a long term condition.
- We have significantly promoted our Flexible Working Policy over the last 12 months to ensure that we actively promote the flexible working opportunities which exist across the organisation and to make it easier for staff to request a flexible working arrangement. This has been particularly beneficial to our majority female workforce who have caring responsibilities due to the uncertainty in continuity of care provisions during the pandemic.
- We have developed and launched the Trust's new Agile Working Policy. This alongside of our Flexible Working Policy has created new ways of working that enable a much larger proportion of the workforce to work from home, enables more mobile working, hot-desking and remote working. This is having significant benefits to a wide range of staff including our staff in mobile roles and those in office based environments.
- All of our full-time positions are advertised as being 'up to full-time hours' to encourage applications from individuals who may only wish to work on a part-time basis.
- We are working with our colleagues within the Communications and Marketing team to develop a year-round campaign to promote our equal opportunities strategy and raise awareness of the many good initiatives that we have in place within the organisation. We want our staff to have a voice in the organisation – to share their experiences so that we can listen and act on staff feedback.
- We have just developed a programme of leadership and management development events that enable positive action for our aspiring women leaders.
- Non-Executive Director appointed as the Trust's Health and Wellbeing Guardian in accordance with the requirements of the People Plan.
- We have actively engaged with our entire female Medical workforce prior to the recruitment commencing of the new Clinical Director posts supporting the role out of the new collaborative structure. This provided the offer of support and mentoring from the existing female Clinical Directors to encourage more applications from the female workforce.

The above actions demonstrate our strong commitment to the promoting equal opportunities at all levels of the organisation and reducing our gender pay gap. However, we can further evidence our commitment via a self-assessment tool which has been developed by NHS Employers. The tool considers a range of six indicators which can then form the basis of the Trust's Gender Pay Gap Action Plan.

The self-assessment has indicated that we have appropriate processes in place in the following areas:

Branding/Communication/Transparency

- ✓ We encourage salary negotiation by showing salary ranges when advertising vacancies.

Recruitment and promotion processes

- ✓ We provide good-quality interview training to our line managers.
- ✓ We support progression for part-time and flexible workers.
- ✓ We give recruiters structured interview templates so they give every candidate an equal chance.

Maternity and paternity and parental leave policies

- ✓ We actively support women on maternity leave and encourage line managers to ensure staff use keeping in touch days as a stepping stone to creating a positive return to work experience.
- ✓ We actively promote the existence of a shared parental leave policy and encourage new parents to take advantage of the scheme.

Wellbeing and retention

- ✓ We offer and actively promote a range of opportunities for flexible working to all staff, to suit their parental and caring responsibilities and commitments outside of work.
- ✓ We actively analyse our staff survey data from a gender perspective by comparing the experiences of our male and female staff, particularly around the themes of equality, diversity and inclusion, line management and appraisals.

Supporting female staff

- ✓ We actively support our female staff in considering and applying for clinical excellence awards (if appropriate) and other opportunities to seek recognition for their work.
- ✓ We are in the process of developing a Women's staff network which is aimed at improving the experience of our female workforce and supporting their professional and personal development.
- ✓ We have published our gender pay gap data on our website and produced a narrative that clearly explains the issues and what we are doing to address them.

Data analysis

- ✓ We fully understand our gender pay gap data and have analysed it to identify patterns and trends within service areas, departments and occupations, and across other protected characteristics.

All of the above evidence provides assurance that the Trust takes the matter of gender pay seriously and we have already implemented a number of practices which will have a positive impact in this area. It is noted that many of these have been implemented as areas of good practice and not just as a means of promoting gender pay – this is because we consider them to be ‘the right thing to do’.

Despite all of the current good practice within exists within the Trust, we cannot be complacent and the self-assessment has indicated that there is still more that we can do to promote gender pay, specifically in the following areas:

- We are transparent about our promotion, pay and reward processes.
- We consider the language, images and branding that we use to promote and advertise roles and careers within our organisation.
- We actively target women who have not returned to the organisation after maternity leave and encourage them to return in a way that works for them.
- We identify and support aspiring women leaders within our organisation by providing them with opportunities for development and career progression.

Change will require a significant cultural shift within the organisation, in terms of our overall workforce gender profile and we are mindful that this will not happen overnight. With more females entering the medical profession, this should have a positive impact on the gender pay gap in future years, however it can take 9+ years for a medical student to train to become a consultant following graduation.

Whilst we work towards achieving gender balance within the medical workforce, we will continue to promote the activities and good practice that we already undertake, including undertaking fair and transparent recruitment processes, delivery of unconscious bias training and promotion of various leadership and development opportunities which exist across the Trust.

Recommendation

The People Committee are requested to acknowledge the Trust’s Gender Pay Gap Results (2020) and to confirm their approval for the results to be published to the Government Equalities Office and the Trust’s internet site by the deadline of 5 October 2021.

