

Gender Pay Gap

2020 Report, Published September 2021



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Introduction

This report provides an update on University Hospitals Plymouth NHS Trust's (UHP) gender pay gap for 2020. Gender pay gap (GPG) reporting considers the difference between men and women's average pay within an organisation. This is different from equal pay reporting which focuses on men and women earning equal pay for the same (or equivalent) work.

Background

There is national guidance and requirements that all organisations need to follow when reporting their GPG. The feedback is always taken as a snapshot on the last day of the financial year, 31st March. Organisations must look at their data and present it in a particular way. The analysis will cover:-

- Mean average gender pay gap which is the difference between the average pay of all women and all men.
- Median average gender pay gap which is the difference in pay between the middle man and middle woman if you were to line up all employees in the organisation according to pay.

Pay includes basic pay, full paid leave including annual, sick, maternity, paternity, adoption or parental leave, bonus pay, area and other allowances and shift premium pay.

Pay does not include overtime pay, expenses (payments made to reimburse expenditure wholly and necessarily incurred in the course of employment, e.g. mileage for use of vehicle), remuneration in lieu of leave, the value of salary sacrifice schemes, benefits in kind (e.g. child care vouchers), redundancy pay and tax credits.

There are two sets of national terms and conditions for NHS colleagues – Agenda for Change (AfC) which cover all staff groups exceptional medical and dental and National Medical and Dental terms and conditions which cover are medical colleagues. AfC does not include bonus pay although Consultants are able to receive Clinical Excellent Awards (CEAs) if they meeting the criterial. There are national and local CEAs awards which recognise and reward NHS consultants in England who perform over and above the standard expected of their role. Awards are given for quality and excellence, acknowledging exceptional personal contributions. To be considered for an award, eligible doctors must demonstrate achievements in developing and delivering high-quality patient care and commitment to the continuous improvement of the NHS. Local CEAs are agreed and administered within the Trust on an annual basis. The national CEA (NCEA) scheme is administered by the Advisory Committee on Clinical Excellence Awards (ACCEA) and is managed on the committee's behalf by a full-time secretariat in the Department of Health and Social Care (DHSC).

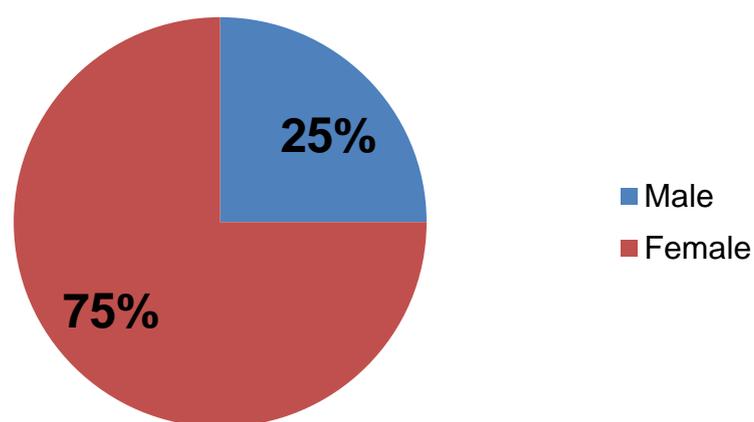
The guidance on the reporting of the percentage of staff receiving bonuses has altered and this is now to be represented as a percentage of all staff as opposed to just those eligible (i.e. medics).

UHP's Feedback

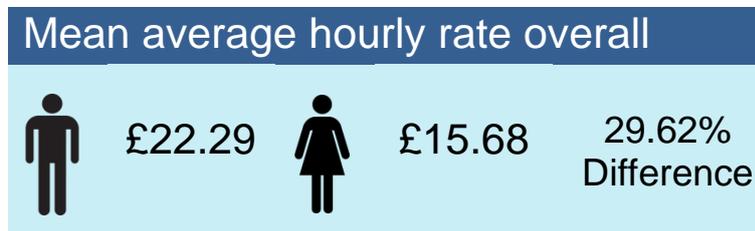
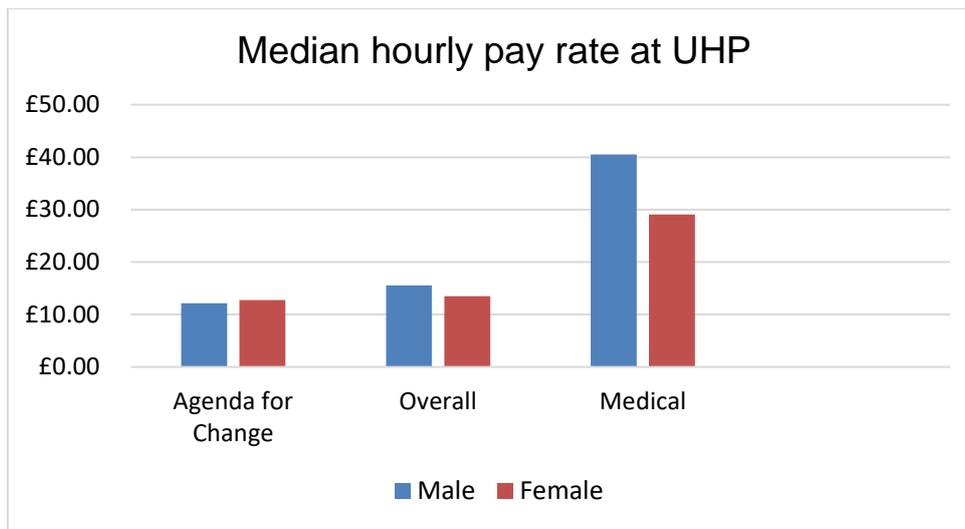
This year's feedback is based on data taken as a snapshot on the 31st March 2020. The latest data shows UHP's median GPG position has notably reduced from 18.25% in 2019 to 13.18%. The mean GPG shows a reduction to 29.62%, previously 31.97% in 2019). Changes that will have influenced this include:-

- The size of the workforce has increased by 1,334 which relates to the TUPE transfer of Serco colleagues to the Trust. The transfer involved around 600 colleagues which has increased the number of colleagues paid at band 2 level. The split between male and female colleagues at this level has changed with a 2% increase in male colleagues which will have an impact on the overall GPG for the Trust.
- There has also been a notable increase in colleagues who are work in band 5 roles and links to international nursing recruitment campaigns.
- The percentage of women in consultant roles has increased by 2% to 30%. UHP have seen a gradually increase year on year since 2018. (Nationally according to NHS Employers the gender of consultants is 65% male and 35% female).
- Overall there are more men in the most senior roles of the organisation. More men receive clinical excellent awards and at a higher amount.
- UHP's gap is driven by the medical workforce. The gap is in favour of women in relation to colleagues who are paid through Agenda for Change (median).
- Overall there is large differential between both the likelihood and amount of bonus pay with 6.35% of male staff receiving bonus pay (7.82% reported in 2019) in comparison to 0.65% of female staff (0.72% reported in 2019). This is reflective of the fact that there are more male medics who are eligible to apply for CEA awards although female medics remain less likely to apply for a CEA.

Overall workforce split at UHP



Median & mean pay gap



EDI Objectives

The Trust's EDI objectives include actions that will work towards addressing the GPG:-

Widen exposure and career pathways for disadvantaged groups	Implement a Reverse Mentoring process for staff from disadvantaged groups (such as BAME) with Trust Executives and Senior Medical and Nursing staff, with an aim to increase exposure and opportunity for staff and provide learning opportunities for senior colleagues through insightful conversations.
Develop and support women/BAME staff into medical leadership roles	Develop and provide a bespoke menu of support and development for Women and those from BAME backgrounds to ensure the widest pool of internal candidates are prepared, for when medical leadership opportunities arise.
Recruitment panels are gender balanced to maximise fairness	Job interview panels across the UHP to be gender balanced with a target of 80% of all interview panels being balanced by 1 st January 2021 and 90% by 31 st March 2021
Open up career Conversations development for disadvantaged groups as a priority	Actively promote the Trust's 'Career Conversations' development programme, with the first cohort being prioritised for staff from disadvantaged groups, to enable career progression.
Create greater diversity on recruitment panels for senior leadership roles	Mandate broader diversity on senior leader interview panels (8C+) to include BAME representation at every panel.