

Our Gender Pay Gap Report 2018/2019

What is gender pay gap reporting?

From 2017 onwards, any UK organisation employing 250 or more employees has to publicly report on its gender pay gap in six different ways:

- The mean and median gender pay gaps
- The mean and median gender bonus gaps
- The proportion of men and women who received bonuses
- The number of men and women according to quartile pay bands

The gender pay gap shows the difference in the average earnings between all men and women in an organisation.

The mean gender gap is the difference between the mean hourly rate of pay of male full-pay relevant employees and that of female full-pay relevant employees.

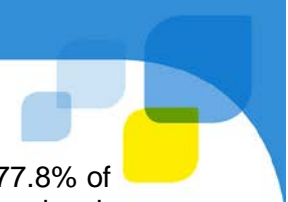
The median gender gap is the difference between the median hourly rate of pay of male full-pay relevant employees and that of female full-pay relevant employees.

Gender pay gap reporting is not about equal pay. Equal pay is about the differences in the actual earnings of men and women doing equal work. It is unlawful to pay people unequally because they are a man or a woman. The RUH Bath NHS Foundation Trust is an equal opportunities employer.

Our Gender pay gap data

We collected our data on 31st March 2018. The figures show that the RUH has an average gender pay gap of 2.75% (median) favouring men. The average mean gender pay gap is 21.89% favouring men.

In 2017 our pay gap report highlighted a median gap of 2.86% favouring women and a mean gender pay of 19.7% favouring men.



In common with the NHS as a whole, our organisation is predominantly female, 77.8% of our workforce is female it is also the case that women outnumber men at every level, except very senior manager level where the split is 50/50.

When comparing 2017 and 2018 figures we can see a small improvement in the gap between our male and female medical workforce with the mean gap going from 20.28% to 18.74% and the bonus gap reducing from 49.11% to 38.08%.

The breakdown of the proportion of males and females in each banding is provided in the table below, followed by the proportion of men and women in each pay quartile.

% of male and female staff employed by pay band as at 31st March 2018

At all levels the largest majority of employees are female, with the exception of Very Senior Managers where there are even numbers of women and men.

Band	Male	Female
Non AFC	0.0%	100.0%
Band 1	48.7%	51.3%
Band 2	23.1%	76.9%
Band 3	12.6%	87.4%
Band 4	18.9%	81.1%
Band 5	14.1%	85.9%

Band	Male	Female
Band 6	12.4%	87.6%
Band 7	16.3%	83.7%
Band 8	27.5%	72.5%
Band 9	33.3%	66.7%
M&D	51.5%	48.5%
VSM	50.00%	50.00%

Proportion of men and women in each pay quartile (%)

Quartile	Male	Female
Lower	24.6%	75.4%
Lower Middle	21.4%	78.6%
Upper Middle	15.3%	84.7%
Upper	31.8%	68.2%

There has been little movement from 2017 to 2018 in terms of percentage of men/women in each band and the quartiles. The biggest shift has been in band 9; in 2017 75% of posts at this level were held by men, this has dropped to 33.3%. It should be noted that there are very small numbers of staff at this level, (less than 10).

Our results - 31st March 2018 snap shot

There is a gap of 21.89% favouring males in our mean average gap. However when the Medical and Dental staff in our workforce are excluded, the mean gender gap closes and on average women earn 4.97% more than men. The medical workforce mean gender pay gap has closed by 1.54% with men earning a mean average of 18.74% more than female colleagues.

Average gender pay gap as a MEAN average

Gender	Male 2018	Female 2018	% difference 2018	% difference 2017
Trust	£20.3016	£15.8575	21.89%	19.70%
Non-Medical	£13.9186	£14.6114	(-4.97%)	(-8.13)
Medical	£40.2307	£32.6922	18.74%	20.28%

The gap between male and female pay has widened slightly by 2.19%, though when we exclude medical staff, women are paid on average more than men and this gap has narrowed from last year's figures.

Average gender pay gap as a MEDIAN average

Gender	Male 2018	Female 2018	% difference 2018	% difference 2017
Trust	£14.6832	£14.2801	2.75%	(-2.86)
Non-Medical	£11.9048	£13.6819	(-14.93%)	(-17.09)
Medical	£40.0000	£31.0854	22.29%	25.75%

Our Trust median figure shows that women are on average paid 40p less per hour than men. When medical staff are removed women earn £1.77 more per hour than their male colleagues.

Bonus Payments

As an NHS organisation the pay elements we have that fall under bonus pay criteria are, Employer Based Awards, (paid to Consultants) and performance bonuses paid to the Executive Directors.

Average bonus gender pay gap as MEAN average

Mean Bonus Payment	Male 2018	Female 2018	% difference 2018	% difference 2017
Trust	£16,436.96	£10,139.96	38.31%	47.55%
Non-Medical	£21,362.00	£10,126.26	52.60%	36.42%
Medical	£16,376.90	£10,141.38	38.08%	49.11%



Average bonus gender pay gap as MEDIAN average

Median Bonus Payment	Male	Female	% difference 2018	% difference 2017
Trust	£11,053.64	£8,287.11	25.03%	27.40%
Non-Medical	£21,362.00	£10,180.80	52.34%	37.78%
Medical	£10,047.07	£7,232.40	28.01%	43.32%

The average bonus payment data shows a disparity between both mean and median pay for men and women. At Consultant level the gender split is 63% male to 37% female.

Awards are given for recognition of excellent practice over and above contractual requirements. All eligible consultants are written to and invited to apply. Our Employer Based award data for the past two years, shows that both male and female Consultants applied for an award in equal proportion and that of those awarded, these were equally spread between both men and women.

The data shows a significant reduction in the gap between women and men in the medical workforce receiving a bonus though the resulting overall gap has remained broadly similar, with a marginal improvement of 2%.

Proportion of males and females receiving a bonus payment

Gender	Male	Female	% difference 2018	% difference 2017
Trust	5.92%	0.67%	5.25%	5.29%
Non-Medical	0.07%	0.09%	(0.02%)	0.02%
Medical	23.77%	8.15%	15.62%	17.82%

The proportion of staff receiving bonuses has remained static, with a slight reduction in the overall number of medical workforce receiving a bonus.

The Medical workforce

The greatest disparity in pay arises within our Medical and Dental workforce. As part of the action plan following last year's gender pay gap audit, further work has been undertaken to understand the differences between male and female pay in the medical workforce, reviewing the last 5 years of data for medical pay.

The analysis has shown that more men hold an Employer Based Award*, (EBA), though it is important to note the Trust has identified that men and women are applying in proportionately even numbers and receiving awards in equal numbers. Men hold more awards because there are more men in post and historically there have been significantly more male consultants than female.

A revised national policy upon which the RUH's local policy follows should lead to an improvement in the bonus gap over time. However, it remains that EBAs are based on work done over and above a consultants every day work and women are still predominantly more likely to be working part time and have commitments outside of the workplace which may prevent them giving additional time to extra projects.



The analysis of medical workforce pay also highlights a second element of disparity. The gap in full time pay over the last five years has decreased year on year at consultant level to 2.91% but the gap between working hours has been widening slightly, with men working on average 1% more hours per week than their female counterparts. This means when reviewing the pro rata salaries of male and female consultants a wider pay gap of 15.94% is seen.

Furthermore, more women enter the medical profession but are not remaining in equal numbers as they progress in their careers, with 74% of posts being held by women at foundation level in 2018, this figure decreases at every level of medical grade until 36% (as at March 2018) of consultant posts are held by women.

Taking Action

Following last year's gender pay gap report the Trust undertook the following actions:

- Reviewed the Trust's Employer Based Award (EBA) policy and revised it in line with the new National Guidelines
- Undertook an audit of the past two years EBA, looking at proportion of male to female applicants for the awards, numbers of staff awarded and the process by which applications were graded and reviewed. The audit revealed no gender bias in the process of granting awards and showed proportionally the same number of men and women applied for and were successful in attaining an award.
- Audit also revealed that more male consultants hold an award than female, reflecting the fact that there are more male consultants than female. Of particular note, of the 9 national awards, (as the name suggests these are awards applied for separately by a national committee) 8 were awarded to men. This is significant, as national EBAs are worth substantially more than local based awards.
- Increased the frequency of gender pay updates to DISCo, (the Trust's Diversity and Inclusion Steering Committee) and the Strategic Workforce Committee for scrutiny and discussion.

Action for 2019

It is recommended therefore the action plan for 2019 focusses on exploring opportunities for more flexible or alternative shift working across the organisation and how this could be introduced into a wider range of roles, including those at senior medical level.

The Trust will review its exit and retention data to understand why female medical staff are leaving the Trust in proportionately larger numbers than their male counterparts.

Continue working with other NHS organisations and partners to learn from best practice and explore opportunities to develop joint activities.



Footnote:

*Employer Based Awards (now called Local clinical excellence awards)

LCEAs are awards which are applied for annually to reward those Consultants & Dentists who have delivered beyond the expectations of their role and who have made a significant contribution to the delivery of a safe, high quality and continuously improving patient centred experience including those who have done so through their contribution to academic medicine.

Any substantive consultant who has been in post for 12 months or more is eligible to apply for an award and can apply for further awards on an annual basis, (additional awards are given for different work, a consultant cannot receive multiple awards for the same piece of work).

Consultants have to complete an application for an award which is reviewed by their clinical lead and the clinical lead for their division prior to submission to the awards committee.

The value of the awards is set out each year in the national medical and dental pay circular. These can be found on the NHS employers website.

To ensure a fair and robust process the committee has between ten and fifteen members, of whom at least 50% will be substantive Consultants employed by the Trust. The composition of the LCEA Committee is made up of the following:

- Chief Executive (or a representative as chairman & elected by CEO)
- Up to two other Management representatives, including the Medical Director;
- Three lay representatives with one from outside of the Trust. Up to nine Consultants reflecting an appropriate range of specialties, gender and minorities, one of which should be a non-award holder; An HR Representative who will act as the secretary to the Employer Based Awards Committee, (non-scoring).

Awards once granted are reviewed every 3 years in line with the terms and conditions for consultants as to whether the consultant continues to receive the award.

In addition to local awards there are National Clinical Excellence Awards which are centrally administered by Advisory Committee on Clinical Excellence Awards (ACCEA). Information regarding the National Clinical Excellence Awards is disseminated annually by the Trust's Medical Director in association with the Trust's Human Resources Directorate.