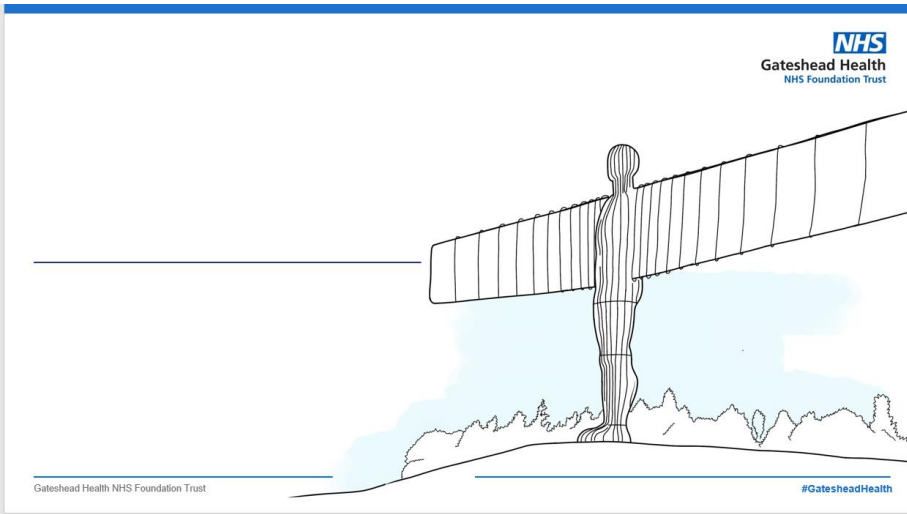


# Gender Pay Gap Report

## 2023

### Gateshead Health NHS Foundation Trust



## **1. About the Trust**

Based in the North East of England Gateshead Health NHS Trust provides a range of hospital and community health services from our leading facilities, including the Queen Elizabeth Hospital, Blaydon urgent care centre and Bensham Hospital, all within Gateshead.

Established in 2005, we were one of the first foundation trusts in the country and since then have consistently achieved the highest levels of care for patients.

We now employ around 5044 staff and currently provide 444 hospital beds across the Gateshead region.

### **Specialist services**

Alongside a full range of local hospital and community services, we provide specialist services, including: -

- A breast screening service for Gateshead, South Tyneside, Sunderland and parts of Durham. The Trust offers superb standards of treatment – from scanning and diagnosis to treatment.
- The North-Eastern hub for the National Bowel Cancer and AAA Screening Programmes, covering a population of around seven million people.
- Cutting edge care in our state-of-the-art facilities. Including our Emergency Care Centre, Pathology Centre of Excellence and the Peter Smith Surgery Centre.
- Our maternity services are rated among the very best in the country and our work treating gynaecological cancers has built up a national and international reputation. We also run the Gateshead Fertility Centre, one of the top ten IVF clinics in the country, which has created hundreds of new families in the North East over the last decade.
- We have robotic surgery capacity for the first time which will allow for new services to be offered like robotic keyhole surgery.
- Treatment for gynaecological cancers which have built up a positive reputation nationally and internationally. Services are now provided up to the Scottish borders, through to Cumbria and as far down as Whitby.
- We are an active partner in the “Gateshead Cares” system board and are committed to the Alliance Agreement which underpins collaborative system-wide-working and accountability in Gateshead.

## 2. Gender Pay Gap reporting requirements

The gender pay gap legislation introduced in April 2017 requires UK employers with 250 employees or more publish data about their gender pay gap using six different measures:

- **Mean gender pay gap:** the difference between the mean hourly rate of pay of male and that of female full-pay relevant employees.
- **Median gender pay gap:** the difference between the median hourly rate of pay of male and that of female full-pay relevant employees
- **Mean bonus gap:** the difference between the mean bonus pay paid to male and that paid to female relevant employees
- **Median bonus gap:** the difference between the median bonus pay paid to male and that paid to female relevant employees
- **Bonus proportions:** the proportions of male and female relevant employees who were paid bonus pay
- **Quartile pay bands:** the proportions of male and female full-pay relevant employees in the lower, lower middle, upper middle and upper quartile pay bands. (CIPD)

The gender pay gap differs from equal pay as it is concerned with the differences in the average pay between men and women over a period of time no matter what their role is. Equal pay deals with the pay differences between men and women who carry out the same or similar jobs.

Our gender pay gap report data has been produced using a number of set reports available through the ESR (Electronic Staff Record) system. This is a national NHS tool for generating gender pay gap information and by default takes into account a large number NHS pay and bonus pay elements when generating reports.

### 3. Workforce data

The legislation requires us as an employer to calculate the gender pay gap using a snap shot of data collated on 31 March 2022 for ordinary pay and bonus pay calculations are based on a reference period of 12 months (1 April 2021 – 31 March 2022).

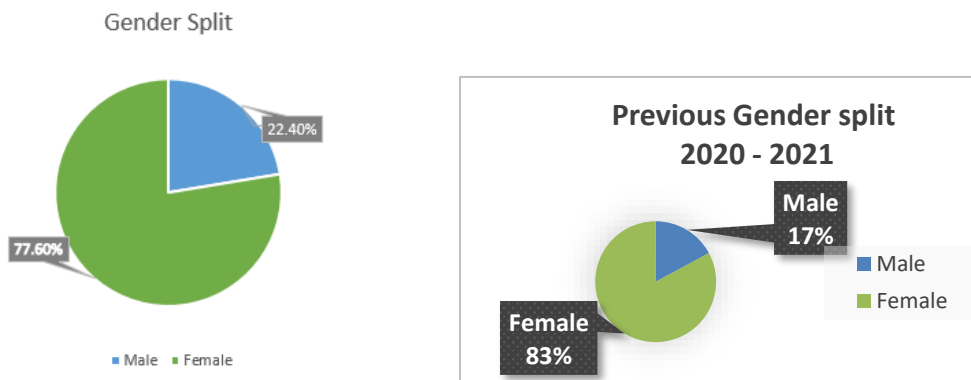
What is included in the calculations:-

- Basic pay (ordinary pay)
- Full paid leave including annual leave, sick, maternity, paternity, adoption or parental leave (ordinary pay)
- On call allowances and shift premium payments (ordinary pay)
- Additional programmed activities for Consultants (ordinary pay)
- Clinical Excellence Awards for Consultants (bonus)

What is excluded from the calculations:-

- Any member of staff who is not receiving full pay when the 'snap shot' data is taken. For example those employees on statutory maternity pay, sick pay or parental leave.
- Overtime pay (including Waiting List Initiatives)
- Expenses, for example mileage for use of vehicle
- Salary sacrifice schemes

#### Gender split - 2021 – 2022



From the above you can see that in the current reference period there is movement within our gender split. With the male gender establishment increasing and female gender establishment decreasing. However note our overall Trust establishment across our workforce has increased.

#### 4 Ordinary pay

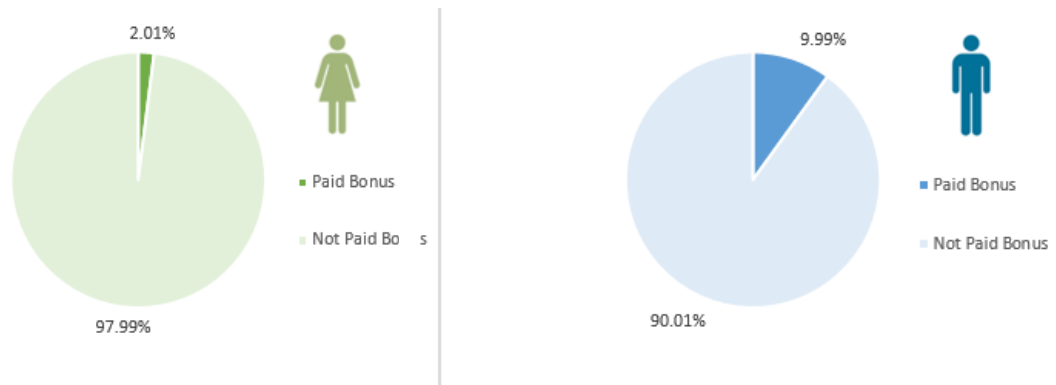
The ordinary pay element is calculated after any salary sacrifice deductions are made, therefore lowering the actual pay. The gender split for such schemes will therefore affect the ordinary pay element.

<b>Salary Sacrifice scheme</b>	<b>Female 2022</b>	<b>Male 2022</b>
Payments for Nursery	0.31%	0.87%
Childcare Vouchers	0.92%	2.00%
Lease Cars	1.46%	1.21%
White Goods	1.70%	2.27%
Cycle to Work Scheme	0.24%	0.37%

Higher % of Males have salary sacrifice pay reductions for nursery payments, childcare vouchers white goods and cycle to work scheme.

## 5 Bonus pay

In our Trust, the only group to receive a bonus payment is the Consultant body in relation to Clinical Excellence Awards. The proportion of male and female employees who received these payments in the reference period are outlined below.



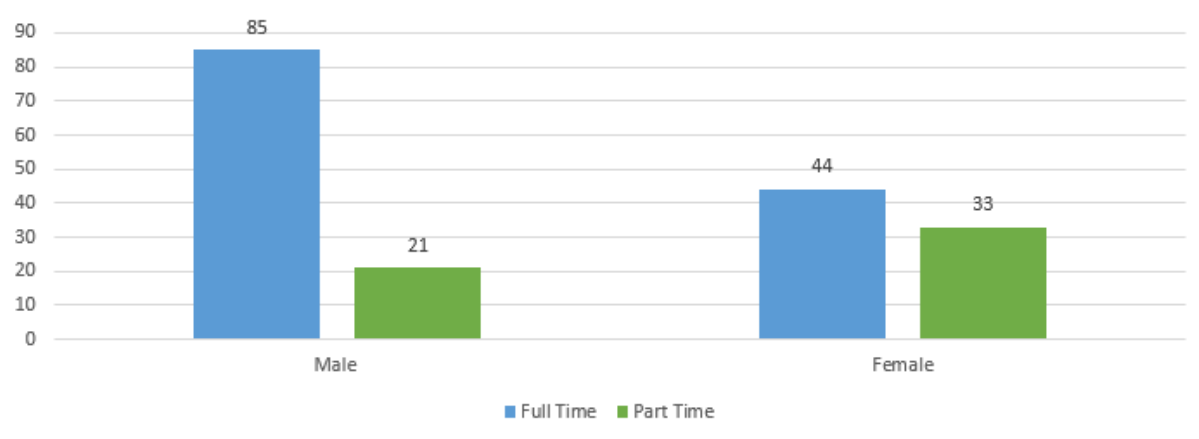
A lower percentage of our female staff received a bonus payment than our male staff. 2.01% of female staff received a bonus payment as opposed to 9.99% of our male workforce, however noting that the bonus payments are within our medical workforce and we have a higher number of male employees within the medical establishment.

### Median Bonus Paid

Gender	Avg. Pay	Median Pay
Male	8,810.22	3,864.40
Female	6,128.91	3,864.40
Difference	2,681.31	0.00
Pay Gap %	30.43	0.00

We can see a 30.43% pay gap difference in the Median Bonus Paid.

**Gender and 'hours worked' split of employees receiving a bonus 2021-2022:**



We see a higher percentage of our female workforce working part time in comparison to our Male Workforce.

- 57.14% female staffing establishment are working full time
- 42.86%. female staffing establishment are working part time
- ***In comparison,***
- 80.18% Male staffing establishment working full time
- 19.82%.Male workforce working part time is.

You can see there is a clear difference in our gender split WTE however noting the male staffing establishment within the medical workforce receiving a bonus is higher.

**Mean and Median Bonus Gap**

Pay and Bonus pay gap	Mean 2022	Mean 2021	Mean 2020	Mean 2019	Median 2022	Median 2021	Median 2020	Median 2019
Ordinary Pay	28.29%	27.25%	28.39%	29.83%	12.73%	12.17%	12.21%	16.26%
Bonus	30.43%	47.60%	45.38%	44.5%	0.00%	69.37%	60.82%	53.9%

The above table shows our mean and median gender pay gap based on hourly rates of pay as at the snapshot dates for the last four years.

**Ordinary Pay** – We see little difference across the reference periods for both the Mean and Median values

**Bonus Pay** - We see an Increase in bonus pay across the reference periods Mean and Median Values

The median bonus pay value has been identified from the Medical and Dental Consultant cohort. This median point figure has been identified as 0.00% in 2022 as the overarching payment was shared amongst all eligible consultants who had, had an appraisal in the previous 12 months. A number of individuals also receive payments month on month from the previous Clinical Excellence award scheme which identifies the overarching bonus pay gap of **30.43%**. *(Reference figure from Median Bonus Paid table above)*

## 6 Quartile pay bands

The proportion of male and female full-pay relevant employees in the equally sized lower, lower middle, upper middle and upper quartile pay bands is as follows:

	2022	2021	2020	2019	2022	2021	2020	2019
Quartile	Female	Female	Female	Female	Male	Male	Male	Male
Upper	73.84%	73.98%	74.75%	70.55%	26.16%	26.02%	25.25%	29.45%
Upper Middle	83.13%	84.96%	83.27%	84.7%	16.87%	15.04%	16.73%	15.3%
Lower Middle	81.57%	86.31%	85.84%	85.84%	18.43%	13.69%	14.16%	14.16%
Lower	73.84%	86.19%	87.22%	88.0%	26.16%	13.81%	12.78%	12.0%

## Summary analysis of Quartile pay bands

77.6% of our workforce is female. We can see from above in 2022 there has been a significant decrease in the percentage of female staff in the lower quartile and an increase in percentage in our male workforce within the lower quartile. There has been little change in comparison with the snapshot dates across the last 3 years with the biggest differences across the male and female percentage in the lower quartile and then for our male workforce seeing a significant change in the lower middle quartile. It's important to note there are more male employees in certain occupations that fall into the upper quartile, for example consultants.

You can see over the 4 year period (Above) there is a higher percentage of female staff in comparison to male staff across all of the quartiles, although you can see an upward trajectory within the male quartiles and a downward trajectory within the female quartiles. Further analysis can be undertaken to identify what roles male and female staff carry out.



## **7 Action to reduce the pay and bonus gap**

### **Recruitment and Retention**

The NHS People Plan sets the strategic framework for the development and improvement of a number of issues, including recruitment. In addition to the actions in the NHS People Plan the Trust is also responding to the six priorities identified by NHSEI for improving equality, diversity and inclusion through overhauling recruitment practices and the actions identified in respect of recruitment and selection as a result of our WRES and WDES reports.

- More focus on selection processes, not just interviews. Rather than relying only on interviews, ask candidates to perform tasks they would be expected to perform in the role they are applying for. Use their performance on those tasks to assess their suitability for the role. Standardise the tasks and how they are scored to ensure fairness across candidates and we use one standard scoring matrix for all interviews and assessments.
- Improving the diversity of recruitment panels. We are working with our staff networks to train a more diverse group of people to be involved in our recruitment and selection processes.
- We implemented a recruitment management system (Trac) to provide a recruitment solution which ensures no personal information is available to recruiters until the interview stage.
- We have develop improved reporting from Trac in relation to the progression of candidates between the recruitment stages based on protected characteristics i.e. from application to shortlist, shortlist to interview and interview to appointment.
- We are a placement provider for the NHS graduate training scheme and work with other partners such as Kickstart and Project Choice.
- We have implemented an agile working approach, encouraging flexible and part time working options. We have also enabled home working for those staff who are able.
- Flexible working is a key programme of work, ensuring that we offer opportunities to improve the range of flexible working opportunities available in different roles and across professional groups to encourage a diverse range of potential candidates.

### **Inclusive Recruitment**

Gateshead Health have a working group set up and we are currently working through identified actions. We have delivered recruitment and section training to all Cultural Ambassadors to enable them to participate in at least one interview panel per month and we also plan to involve the staff networking group members to deliver recruitment & selection training in partnership with the Resourcing Manager.

### **Strategic Focus**

We have introduced an Equality, Diversity and Human Rights Programme Board, the aim of which is to support the delivery of Gateshead NHS FT's work on Equality and Diversity which seeks to ensure that all members of staff (Clinical and Non-Clinical) are treated in a fair and

equitably manner. The Trust will actively work to ensure that all members of staff are enabled to reach their full potential. The board will also;

- Act as champions for monitoring and implementing EDI recommendations arising from National Initiatives e.g. The Workforce Race Equality Standard, The Workforce Disability Equality Standard, Gender and Ethnicity Pay Gaps, The Equality Delivery System.
- Act as the body responsible for ensuring coherence and synchronicity for EDI agenda across the Trust.
- Receive and review equality data presented in respect of recruitment, workforce, service delivery, achievement of staff, potential barriers to achievement and progression.

Leading and Managing Well at Gateshead are two significant leadership development programmes which are accessible to all and have a focus on developing a culture of compassionate leadership and just and restorative learning culture principles, included in these programmes is a focus on diversity and inclusion and ensuring access to opportunities for all employees at Gateshead.

To date we have had 271 delegates attended Managing Well **236 Female and 35 Male**. We have had 43 delegates attending Leading well of which **5 were male and 38 were female**.

### **Staff Networks**

We work closely with our staff networks who represent our BAME, disabled, female and LGBTQ+ groups across the medical and non-medical workforce to ensure we offer equality of opportunity as an employer and accessible opportunities to all of our employees. The womens network is the most newly formed network group and is sponsored at an executive level by the Medical Director and group Director of Finance/Deputy Chief Executive. The staff networks have also helped in helping in raising the profile's not only of the networks but also the awareness of inequalities in respect of the individual Networks. There is ongoing work around how the voices of the Network can be integrated into the work around the WRES and WDES metrics

### **Clinical Excellence Awards**

During 2022 the application of CEA awards was changed nationally in response to the pressures faced by all of our medical workforce in responding to Covid-19. The decision was to pay an equal proportion of the funding available to all eligible consultants.

### **Flexible Working**

The NHS People Plan sets the strategic framework for the development and improvement of a number of issues, including flexible working. The Trust is working towards implementing all of the required action including;

- Advertise and offer all jobs as having flexible working options, such as part-time work, remote working, job sharing or compressed hours
- Allow people to work flexibly, where possible
- Encourage senior leaders to role model working flexibly and to champion flexible working
- Encourage all to work flexibly, so that it isn't seen as only a female benefit
- Flexible Working is available to all

## Engagement

The Gender Pay Gap reports are shared and discussed with our staff network groups and at the relevant formal forums with elected representatives. Any potential issues relating to gender equality within the Trust identified as an action moving forward.

## Ways to remove the Gender Pay Gap

The Office for National Statistics (ONS) report indicates that... *'the gender pay gap among full-time employees grew slightly from 7.7% in April 2021 to 8.3% in April 2022. Pre-pandemic, in April 2019, the gap was 9.0%. Earning for men who work full time grew at a higher rate (5%) than women's wages (6%) in 2021 – 2022 ...'* Source : Annual survey of Hours and Earnings (ASHE) figures

When reviewing our local data this correlates within the quartiles identified within the report.

## Statement

I confirm that Gateshead Health NHS Foundation Trust is committed to the principle of gender pay equality and has prepared this report in line with mandatory requirements.

Name:

Job Title: Chief Executive Officer

Signature:

Date:

**If you require a copy of this report in a different format please contact the People and OD team at [ghnt.pod@nhs.net](mailto:ghnt.pod@nhs.net)**

## Appendix 1

### Action Planning

The Trust is committed to ensuring that there is an equitable workforce reflecting the communities served. To work towards achieving this we will undertake the following:

Areas and Objectives	Action	Lead	Timescales	Resources	Outcomes and Impact
Talent management	Assess the Trust's current provision of talent management programmes in order to support employees to progress.	POD / Leadership Team	Develop plan within the next 3 months  Offer and manage availability	Collect data around current provision  Manage information around provision and publicise	Show a year on year improvement in respect of gender role splits
Leadership roles	Engage with the Leadership academy to assess what leadership programmes are on offer or can be tailored for both men and women (full time AND part time) to progress into leadership roles.	POD/ /Leadership Team	As above	As above	Show a year on year improvement around accessing leadership and management roles and address discrepancies as and when they arise
Recruitment and Selection	Explore how we can attract more men into the organisation at the lower bands to create an even gender balance.	Recruitment Team	Gather data to assess which areas are under/ over represented in terms of gender split	Develop a plan for rolling out training or refresh training within the next 3 months on	Show an increase / equitable take up of roles

			Review and refresh R and S process to ensure all panel members have a clarity of understating where inequalities can arise	an ongoing basis	
Leave Entitlements	Continue to raise awareness of shared parental leave entitlements and flexible working opportunities through our training and communications.	POD /Team	Embed information into the Managing well programmes Offer specific tailored training programmes	Roll out within the next 2 months	Monitor the application and take up of leave. Ensure provision of Equity
General review cross referenced to the EDI KPI metrics	Undertake an annual review of the gender split across all bands as part of the annual Public Sector Equality Duty process and take action where appropriate.	POD / EDI	Gather data to assess which areas are under/ over represented in terms of gender split Cross reference this to the WRES / WDES KPI's	Start process within the next 2 months	Ensure that the PSED is being addressed and that there is equity across all Pay Bands
Mainstreaming awards	Offer workshop sessions to Consultants to encourage CEA applications from across the workforce.	Medical Workforce/ POD	Gather data to assess which areas are under/ over represented in terms of gender split Cross reference this to the WRES / WDES KPI's	Agree process to roll out within the next 3 months	Clarity of EDI cross referenced to CEA