

Gender Pay Gap Report

(Airedale NHS Foundation Trust - 31 March 2021 snapshot)

1.0 Introduction

Gender Pay Gap (GPG) reporting legislation requires employers with 250 or more employees to publish statutory calculations every year showing how large the pay gap is between male and female employees.

It is important to highlight the difference between equal pay and gender pay gap. Equal pay deals with the pay **differences between men and women who carry out the same jobs, similar jobs or work of equal value**. It is unlawful to pay people unequally because they are a man or a woman. The gender pay gap shows the **difference in the average pay between all men and women in a workforce**. It is entirely possible to have a significant gender pay gap whilst having complete pay equality.

The GPG results for the year ending 31st March 2021 must be published on the Trusts own website and submitted nationally by 30th March 2022.

2.0 Reporting requirements

For the purposes of gender pay reporting, the definition of who is included as an employee is defined in the Equality Act 2010. This is known as an 'extended' definition which includes:

- employment under a contract of employment, a contract of apprenticeship or a contract personally to do work

All employees of Airedale NHS Foundation Trust who were employed and on full pay on the snapshot date (31st March 2021) are included. Bank staff who worked a shift on that date are also included. For Consultants we include within 'pay' those payments made for Additional Programmed Activities (APA's), as well as Clinical Excellence Awards (CEA's).

Employees who are on half or nil absence or maternity leave, hosted staff and agency staff are not included.

In line with the guidance, earnings in the GPG calculations do not include: Overtime pay, Redundancy or termination pay, pay in lieu of annual leave, Interest free loans, expenses and reduced pay leave.

It is important for the Trust to be sensitive to how an employee chooses to self-identify in terms of their gender. The Trust has based our reporting on the gender identification an employee has provided. In cases where an employee does not self-identify as either gender, the Trust has omitted the individual from the calculations.

3.0 The Gender Pay Gap Data

The Trust is required to report annually on the gender pay gap in six different ways:

- the mean gender pay gap;

- the median gender pay gap;
- the mean gender bonus gap;
- the median gender bonus gap;
- the proportion of men and women who received bonuses; and
- the number of men and women according to quartile pay bands

The gender pay gap shows the difference in average earnings between all male full-pay relevant employees and all female full-pay relevant employees in the organisation.

The employee's eligible for inclusion in the report as at the 31st March 2021 was 3314 (The report will include anyone who received payment in March so it may include some staff who are receiving full pay whilst on maternity/adoption leave). The workforce gender split at the time was as follows, female – 2724 (82.20%), male – 590 (17.80%).

There has been a total workforce increase since the previous year of reporting as at 31st March 2019 where the total workforce was 3129. The workforce gender split for the previous year of reporting was as follows female – 2562 (81.8%), male – 567 (18.1%). The difference in gender shows an increase in both the female and male workforce with females increasing by 6.3% and males increasing by 4.1% against the total workforce.

It is a common theme for Acute Trusts that Medical and Dental staff have a substantial impact on the Trusts Gender Pay Gap, as individuals in this staff group tend to be paid higher salaries than other staff groups.

The Trust employs 55 female consultants and 94 male consultants, because the Trust employs fewer men overall, the number of male consultants as a proportion of the overall male workforce is 15.93% and 2.84% of the overall workforce. Compared to female consultants who make up 2.02% of the overall Female workforce and 1.65% of the overall workforce.

3.1 Mean and Median Gender Pay Gap

The below table provides the GPG reporting information with appropriate comparisons to previous years.

	2018 Women's earnings are:	2019 Women's earnings are:	2020 Women's earnings are:	2021 Women's earnings are:	Progress from 2020 to 2021
Mean gender pay gap in hourly pay	37.1% lower	34.81% lower	33.3% lower	30.33% lower	
Median gender pay gap in hourly pay	22.8% lower	24.6% lower	26.9% lower	27.61% lower	
Difference in mean bonus payments	32.0% lower	21.3% lower	18.9% lower	20.85% lower	
Difference in median bonus payments	33.3% lower	33.3% lower	38.9% lower	33.89% lower	

The data shows that the mean GPG has positively reduced from the previous year, one of the reasons for this is due to an increase in overall employed females across GPG quartiles. The median GPG has increased due to an increase in the number of males in the upper quartile.

3.2 Pay Gap by Hourly Rate

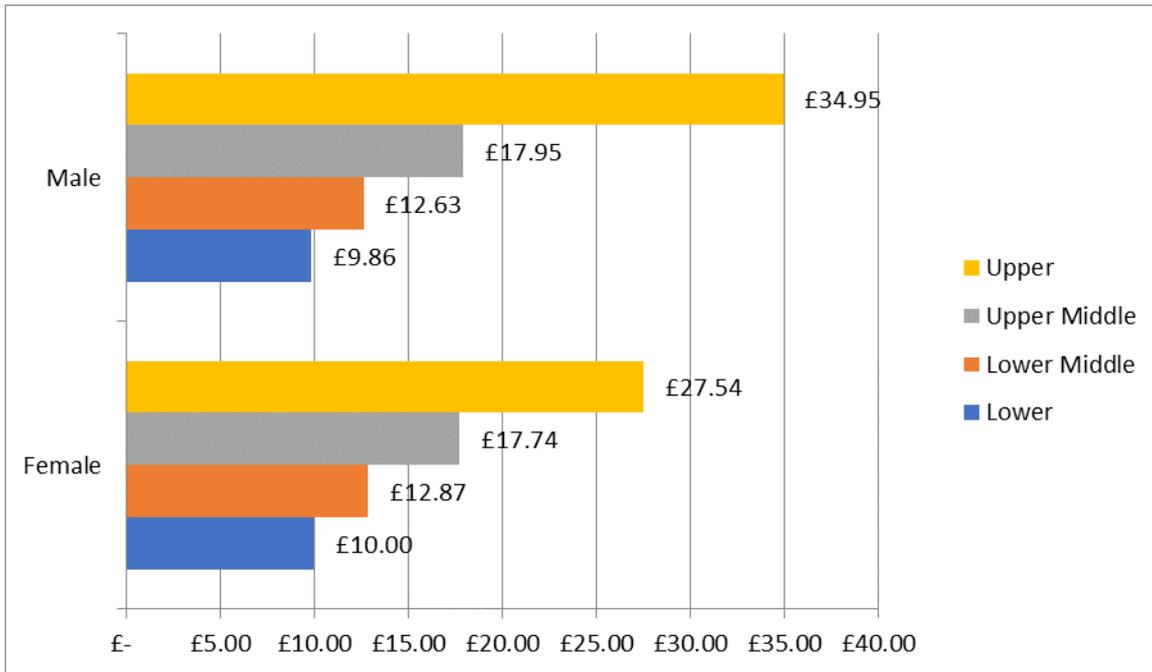
In order to further understand the factors driving the overall GPG, the below chart provides further analysis on the mean and median hourly rate of males compared to females.



3.3 Gender Pay Gap by Quartile

The table and graph below show the GPG by quartile for male and female employees as well as the gender split in each of these quartiles.

Quartile	Male			Female			Total
	Headcount	% Headcount	Mean (Average) Hourly Pay	Headcount	% Headcount	Mean (Average) Hourly Pay	
Lower	94	11.35%	£9.86	734	88.65%	£10.00	828
Lower Middle	108	13.03%	£12.63	721	86.97%	£12.87	829
Upper Middle	117	14.13%	£17.95	711	85.87%	£17.74	828
Upper	271	32.69%	£34.95	558	67.31%	£27.54	829
Total	590	17.80%	£23.50	2724	82.80%	£16.37	3314



Quartile Ranges

Lower = £4.11 to £10.98 per hour.

Lower Middle = £10.98 to £15.35 per hour.

Upper Middle = £15.37 to £20.60 per hour.

Upper = £20.60 to £150.00 (bank ratea are included) per hour.

The Trust has an overall gender split of 82.20% female and 17.80% male. Compared to the overall gender split for the Trust there is a disproportionate number of males, 32.69% in the higher paid quartile (quartile 4) and only 67.31% female. This is a contributing factor to Airedale's GPG. Further analysis shows:

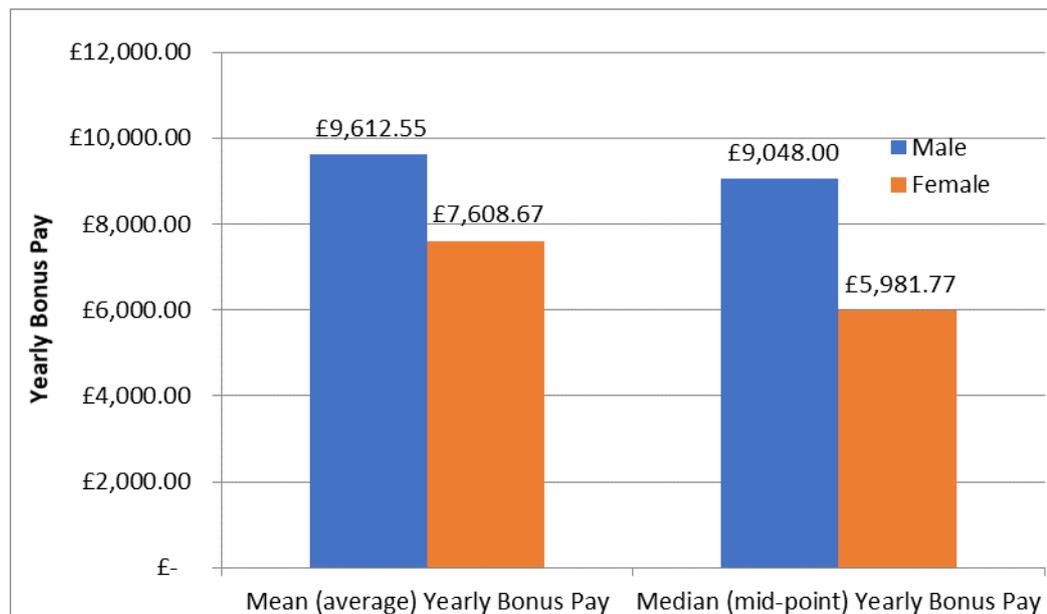
- The table and graph above show that in quartile 1 – Lower, female employees are paid more than male employees giving a gender pay gap of -1.42% or -£0.14p.
- In quartile 2 – lower middle, male employees are paid less than female employees giving a gender pay gap of -1.90% or -£0.24p.
- In quartile 3 – upper middle, male employees are paid slightly more than female employees giving a gender pay gap of 1.17% of £0.21p.
- In quartile 4 – upper, the gender pay increases to 21.20% or £7.41.

It is important to reference section 3.0 above where the impact of the medical workforce is detailed, signalling a higher proportion of male consultants overall, despite a total of 9 new Consultants joining the Trust in the last 12 months, 6 of whom were female.

3.4 Mean and Median Bonus Pay Gap

The below table provides data on the number of colleagues receiving a bonus which has decreased from the previous year's bonus pay which was for males and females 7% and 0.9% respectively. Bonus gap information is also shown.

Gender	Mean (average) Yearly Bonus Pay	Median (mid-point) Yearly Bonus Pay	% Receiving Bonus
Male	£9,612.55	£9,048.00	4.85%
Female	£7,608.67	£5,981.77	0.76%
£s difference	£2,003.88	£3,066.23	
% difference	20.85%	33.89%	



Bonus pay only includes Consultants Clinical Excellence Awards (CEAs) and discretionary points. As the awards for 2021 were distributed evenly the gap is driven by historic consolidated CEA payments and national awards.

The median bonus pay gap has decreased from the previous year which was 38.89%, there is an upward trajectory in the mean bonus pay gap of 20.85% for 2021 compared to 19% for 2020, 21% in 2019 and 32% in 2018.

The distribution of CEA awards over the last three years can be seen below:

Year	Male	Female
2019	65	40
2020	66	42
2021	62	45

4.0 Conclusion

Airedale is typical of most NHS Trust's, in that it has a higher number of females than males in its workforce – of the 3314 employees counted as part of the gender pay gap reporting, 2724 were female compared to 590 male.

The figure for the median pay gap is usually considered to be more representative of gender pay gap across the workforce, this has increased from 26.9% in 2020 to 27.61% in 2021. However there has been a reduction in the mean GPG from 33.3% in 2020 30.33% in 2021.

The mean gender pay gap for the whole of the Public Sector economy is 14.09% (ONS at October 2021). At 30.33% the Trust's mean gender pay gap is therefore, above that for the wider public sector. A comparison with other NHS Trusts can be undertaken when data is published externally.

In considering the quartile figures earlier in this report the chart shows that there are a higher proportionate percentage of males in the upper quartile than in the others when compared to the overall male headcount. This is the main contributing factor in the overall gender pay gap.

The Trust must also take into account that the pay of medical and dental colleagues has a significant contributing factor to the gender pay gap, which is seen across other acute providers in comparison. Medical and dental employees account for 21.19% of the GPG as a result of the higher proportion of males in Consultant and higher paid medical roles.

The Bonus pay gap is also driven by the higher proportion of males in receipt of CEA's as well as the fact they are in receipt of the high-level CEA's.

5.0 Reducing the Gender Pay Gap

The Trust is committed to being an inclusive employer and taking positive steps to reduce the pay gap on a continual basis. A refreshed approach to addressing the gap is now being reviewed through the gender network.

The Trust has a Gender Staff Network made up of a diverse range of staff representatives including medical colleagues. The Trust also supports an Inclusion Group which is a sub-committee of the People Committee. These groups will be asked to focus on the following actions:

Further training for staff focused around recruitment

Enhanced training will be developed and delivered to raise awareness of the potential for bias and individuals responsibilities under the Equality Act 2010. This will also include the promotion of fair and non-discriminatory people practices. The HR Business Partner Team are refreshing the manager skills training aligned with the Trust's People Strategy for 2022/23 and the training will sit side by side to the leadership development programme, incorporating inclusion as a golden thread into its content.

Flexible working

We recognise the importance of flexible working to all staff groups and particularly those with caring responsibilities, male and female. The Trust will be reviewing the commitment for 'flexibility from day one' as outlined in the NHS People Plan this ongoing piece of work will need to be developed during 2022/23. This approach will also support the attraction of females into leadership positions and those that are less than full time across the Trust.

Management of Clinical Excellence Awards

In collaboration with members of our JLNC and Gender Staff Network we will review the CEA process and discuss innovative ways to address any barriers women may have in applying for

CEAs. There is continued commitment across the Trust support those who work less than full time, who now receive a full award in line with other colleagues.

Impact for Medical Workforce

The Gender Staff Network will receive further detail on the medical gender pay gap and discuss a plan on how they wish to address certain aspects, including access to training, CEAs, flexible working arrangements, ability to access leadership position and a consultant mentorship programme.

Gender Staff Network

There will be a focus in helping the continued development of the gender network including developing a clear structure and terms of reference for the group. This will be supported through the appointment of a formal chair enabling the work of the group to have clear focus and direction.

6.0 Recommendations

The People Committee are asked to

- a) Review and discuss the content of this report
- b) Identify any additional areas of focus or actions not already documented
- c) Approve the publication of this report on the Trust and Government website as delegated by the Trust Board.