

## **Barnsley Hospital NHS Foundation Trust**

### **Gender Pay Gap Report 2020**

#### **Executive Summary**

All UK employers have a legal requirement to publish their gender pay data on an annual basis.

The gender pay gap calculation is based on the average hourly rate paid to men and women. This calculation makes use of two types of averages; a mean average and a median average. In simple terms, the mean is the average hourly rate and the median is the mid-point hourly rate for men and for women in the workforce.

The mean figure is the figure most commonly used.

The report for Barnsley Hospital NHS Foundation Trust reviews the latest data set, which covers the 12 months period ending 31 March 2020.

#### **Our Overall results:**

Overall, across our entire workforce our mean gender pay gap is 39%. This means that the average hourly pay rate for men is 39% higher than for women. This rate has increased since the last reporting period ending 31 March 2019.

Our overall median gender pay gap is 25% - this means that the mid-point hourly rate for men is 25% higher than for women.

However, this overall figure represents the combined data for our Medical and Dental staff group and all other staff groups.

A further analysis of the figures shows:

- For Medical and Dental staff, the mean gender pay gap is 24%
- For all other staff who are not medical or dental (which is our largest workforce group), the mean gender pay gap is 11%. See table 2 below.

Our proportion of male and female staff should be taken into account when looking at our gender pay gap, as should the age range of our male and female workforce, as members of staff who have enjoyed long careers in the NHS can often be higher up the pay point scales than those who are just starting their careers.

In Barnsley, whilst we have a higher proportion of female staff in our workforce, we also have a significant proportion of our male workforce who are now at the point in their careers where they are senior medical staff and therefore are higher up the pay grades than some more junior members of staff. This is reflected in our overall gender pay gap and, as a trust, we recognise that this is a generational and societal issue. We know that an increasing number of women are choosing medicine as a

career and our figures this year show that we have the same percentage of female junior doctors as male

Over the last 6 years, we have seen an increase in the number of female consultants working at the Trust and as a result, our consultant profile gender gap is reducing:

Table 1

as at 31 March	Female	% Female	Male	% Male	Total	
2020	62	30.85%	139	69.15%	201	MD
2019	56	28.57%	140	71.43%	196	MD
2018	48	28.40%	121	71.60%	169	MD
2017	45	28.48%	113	71.52%	158	MD
2016	41	28.28%	104	71.72%	145	MD CD
2015	41	28.08%	105	71.92%	146	MD CD

Table 2

	Non- medical & dental staff mean hourly rate (£)	Medical & dental staff mean hourly rate (£)	Overall workforce mean hourly rate (£)
Men	15.80	44.31	25.63
Women	14.62	33.54	15.55
Mean gender pay gap %	11%	24%	39%

The proportion of male and female employees in the lowest pay quartile is 87% female and 13% male, compared to the proportion of male and female employees in the highest pay quartile which is 66% female and 34% male. (The quartile information is created by sorting all employees by their hourly rate of pay and then splitting the list into 4 equal parts to create 4 pay quartiles).

The gender pay gap data we report also includes bonus payments. The consultants' clinical excellence awards (CEAs) are included in the bonus pay calculation. Following publication of previous results, we have undertaken proactive communications, publicity and training support has been offered to female and male consultants on how to apply for CEAs. In recent years we have seen more female consultants being awarded new CEAs; 2018 award round – 19 awarded, 11 male and 8 females. 2019 award round – 11 awarded, 8 male and 3 females.

Our mean gender bonus pay gap has increased since the last reporting period ending 31 March 2019 from 38% to 51%.

Our median gender bonus pay gap has also increased since the last reporting period ending 31 March 2019 from 60% to 74%.

### **Gender Pay and Equal Pay – the difference:**

It is important to be clear about the difference between gender pay and equal pay. The solutions to equal pay and gender pay are different. Closing the gender pay gap is a broader societal as well as organisational issue. Equal pay is specific to men and women doing comparable roles for different pay.

Though we have a gender pay gap due to our disproportionate representation of men and women within the workforce (as reflected across the NHS), we are confident that we pay equally and fairly in accordance with the nationally recognised Agenda for Change and Medical & Dental pay structures and our locally recognised Senior Manager and Director pay structures.

### **Our future intentions:**

As a trust we are committed to supporting the career progression and ensuring equal opportunities for women and men within our workforce. Our inhouse talent management programme is designed to nurture our future leaders regardless of their gender.

We have a range of family friendly policies, supporting childcare, flexible working, fair rostering and leave provision. We have published a number of toolkits to help managers in applying these policies for our staff and have held a series of policy training sessions for managers.

At our equality and inclusion conference in February 2019 we launched our Carers Charter. This set out the work we commenced in 2019 to raise awareness and increase recognition of staff who are carers, to identify what issues they face, leading to improved engagement and retention.

We welcome this report and the findings. The data has given us the opportunity to understand what else we can do to further reduce our gender pay gap. Ultimately, our aim is to ensure that men and women have equal opportunities in the workforce at all levels.

## Gender Pay Gap Detailed Results

Our gender pay gap results (based on the hourly pay rates our employees received on 31 March 2020) are as follows:

- Our mean gender pay gap is 39%
- Our median gender pay gap is 25%
- Our mean bonus gender pay gap is 51%
- Our median bonus gender pay gap is 74%
- Our proportion of males receiving a bonus payment is 7%
- Our proportion of females receiving a bonus payment is 0.7%
- Our proportion of males and females in each quartile pay band is;

Pay Quartile	Female %	Male %
1	87	13
2	86	14
3	89	11
4	66	34

### **The reasons behind our gender pay gap -**

- The mean and median gender pay gap can be explained by the observation that while men make up only 18% of the workforce, there is a disproportionate number of males, 34% in the highest paid quartile.
- The Trust's mean gender pay gap is 39% in favour of men (women earn 39% less than men) compared to the national average of 16.2% in favour of men (source: Annual Survey of Hours and Earnings, Office for National Statistics, 2019).
- There is a mean gender pay gap in the Non-medical & Dental staff groups (11%). There is a mean gender pay gap of 24% in the Medical & Dental staff group.
- The table below shows Agenda for Change pay bands 2 to 8b split by gender and average hourly rate:

Band	Female	Male	AveHourly Rate Female	Ave Hourly Rate Male
2	532	71	10.20	9.98
3	406	46	10.76	10.89
4	173	24	11.59	10.56
5	602	76	14.98	14.12
6	464	69	18.01	17.50
7	247	51	20.65	19.80
8a	78	21	24.54	23.76
8b	14	11	27.65	28.39

- The female average hourly rate is higher in all AfC pay bands except band 3 and 8b, where the male average hourly rate is higher by only 0.13p and 0.74p.
- As at 31 March 2020 there were 18 female (60%) and 12 male (40%) employees on Local Senior Manager or Exec/Non-Exec Director pay scales, compared to 47% of very senior manager roles in the NHS held by women (NHS Employers data from NHS Digital workforce statistics 2018).
- There were 52 female (32%) and 109 male (68%) M&D consultants, compared to 63% of consultants who are men and 37% of consultants who are women in the NHS (NHS Employers data from the NHS Digital workforce statistics 2018). There were 26 female (58%) and 19 male (42%) foundation doctors.
- The gender split by age shows the majority of female doctors are young (of those aged 21 – 40, 51% are female compared to 49% male) and the majority of male doctors are older (of those aged 41 and over, 73% are male and 27% are female).
- In the reporting period, there were 81 medical staff (23 women and 58 men) who received Clinical Excellence Awards and Discretionary Points Awards which accounts for 60% of all bonuses awarded. There were 52 staff (45 women and 7 men) who received Long Service Awards in the form of monetary awards which accounts for 39% of all bonuses awarded. 8% of the total number of 'relevant employees' received bonus pay.

- In the gender split of the number of CEA Awards paid in 2019 and 2020, there has been a decrease of 6 female award recipients compared to a decrease of 20 male award recipients.

### **Reducing our gender pay gap:**

#### ➤ **Female consultants applying for Clinical Excellence Awards (CEAs)**

In recent years, proactive communications, publicity and training support has been offered to female and male consultants on how to apply for CEAs.

We have seen more female consultants being awarded new CEAs; 2018 award round – 19 awarded, 11 male and 8 females. 2019 award round – 11 awarded, 8 male and 3 females.

#### ➤ **Supporting flexible working and ensuring fair rostering**

93% of part time workers are female, compared to 74% of full-time workers who are female;

	Female	Male	% Female Working	% Male Working
Part time	1236	88	93%	7%
Full time	1448	501	74%	26%

The gender pay gap results show that men’s average hourly rate is higher for both part time and full time workers;

	Female	Male	Aver Hourly Rate	Aver Hourly Rate Male
Part time	1238	88	£15.18	£26.19
Full time	1448	501	£15.87	£25.53

As at 31 March 2020, there were 95 women on maternity leave and no women on adoption leave. There were no men on adoption or maternity support (paternity leave). There were no women or men on shared parental leave.

Seven changed post after returning from maternity leave, 12 are still on maternity leave 12.63%, 80 came back to the same post 84.21% and 8 have now left 8.42%.

These results tell us that the provision and fair access to part time and flexible working opportunities are important to support the needs and retention of our workforce.

In 2019 we commenced a review of our policy, procedure and approach to offering flexible working opportunities to ensure fair access for all, and to enable better monitoring, reporting and recording of flexible working numbers and arrangements.

We also launched the rostering policy and fair rostering top tips at a series of drop in training sessions for managers.

### ➤ **Launch of Carers Charter**

Our Carers Charter was launched at our equality and inclusion conference in February 2019. This set out the work we commenced in 2019 to raise awareness and increase recognition for staff who are carers, to identify what issues they face, leading to improved engagement and retention.

### **Sharing our gender pay gap with our employees**

It is important to share and explain our gender pay gap and our action plan to reduce the gap with our employees, trade union representatives and managers in advance of the external publication date. In particular to be clear about the difference between gender pay and equal pay. The solutions to equal pay and gender pay are different. Closing the gender pay gap is a broader societal as well as organisational issue. Though we have a gender pay gap due to our disproportionate representation of men and women within the workforce (as reflected across the NHS), we are confident that we pay fairly in accordance with the nationally recognised Agenda for Change and Medical & Dental pay structures and our locally recognised Senior Manager and Director pay structures.

It is proposed to share the information with the Joint Partnership Form and the Joint Local Negotiating Committee and explain what the data shows. Also to agree an internal communications message for distribution and briefing all staff.

### **The difference between gender pay and equal pay**

It is important to be clear about the difference between gender pay and equal pay. The solutions to equal pay and gender pay are different. Closing the gender pay gap is a broader societal as well as organisational issue.

Though we have a gender pay gap due to our disproportionate representation of men and women within the workforce (as reflected across the NHS), we are confident that we pay fairly in accordance with the nationally recognised Agenda for Change and Medical & Dental pay structures and our locally recognised Senior Manager and Director pay structures.

As part of the introduction of the Agenda for Change modernised NHS pay structure in 2004 was the development of the NHS Job Evaluation Scheme as a means of determining pay bands for posts. The key feature in both the design and implementation of this scheme was to ensure equal pay for work of equal value. The scheme has been tested legally and has been found to be equal pay compliant. The process involves use of job descriptions and person specifications which accurately reflect the demands of the job. Jobs are then locally matched to national benchmark profiles or locally evaluated and consistency checked by trained matching panel members and job evaluators consisting of management and staff side representatives working in partnership. The jobs are scored against a sufficiently

large number of weighted factors (16) to ensure that all significant job features have been measured fairly. This includes specific factors to ensure that features of predominantly female jobs are fairly measured, for example communication and relationship skills, physical skills, responsibilities for patients and emotional effort. Scoring and weighting has been designed in accordance with a set of gender neutral principles, rather than with the aim of achieving a particular outcome, for example all responsibility factors are equally weighted to avoid one form of responsibility being viewed as more important than others.

The NHS Staff Council job evaluation handbook provides guidance and advice on the NHS job evaluation scheme, which has been used to shape the Trust's locally agreed job evaluation policy and procedure.

## **Conclusion**

The People, Finance and Performance Committee is asked to approve the report and action plan for external publication on the designated government website and the Trust's website by the reporting deadline of 5<sup>th</sup> October 2021 (extended from 30<sup>th</sup> March 2021 due to the on-going impact of the Covid-19 pandemic).

**Gender Pay Gap Data**

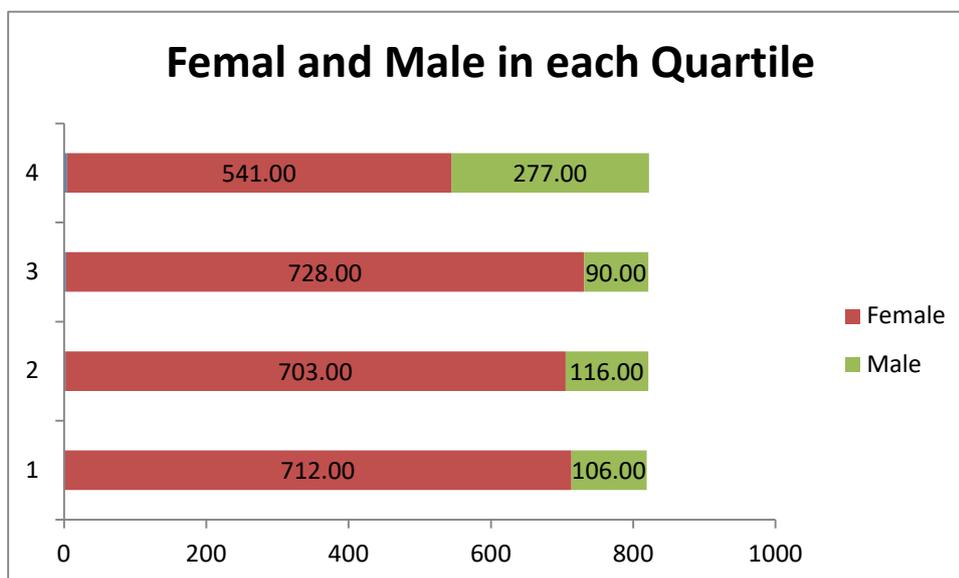
Data from ESR as at 31 March 2020

Data based on 3273 Full Pay Relevant Employees.

A “ Full Pay Relevant Employee” is any employee who is employed on the snapshot date (31 March 2020) and who is paid their usual full basic pay during the relevant pay period (1 – 31 March 2020).

**Proportions of male and female employees in each pay quartile based on Ordinary Pay**

Quartile	Female	Male	Female %	Male %
1	712.00	106.00	87.04	12.96
2	703.00	116.00	85.84	14.16
3	728.00	90.00	89.00	11.00
4	541.00	277.00	66.14	33.86



**Key Points:**

- Ordinary pay includes basic pay, allowances, pay for leave, shift premium pay and on call pay.
- In order to create the quartile information all staff are sorted by their hourly rate of pay, this list is then split into 4 equal parts (where possible).

- To calculate the hourly pay, the employee's bonus payments (this includes clinical excellence awards, discretionary points awards and long service awards) are added to their ordinary pay and this is divided by the employee's number of working hours.
- To calculate the number of working hours the on call units worked and basic hours are added together. This inflates the units worked which then lowers the hourly pay. For example 162.95 basic hours plus 48.00 on call weekend plus 121.00 on call weekday equals 331.95 units worked divided by the pay value £4301.41 equals an hourly pay of £12.96
- Elements of salary sacrifice have been removed

Gender	Avg. Hourly Rate	Median Hourly Rate
Male	25.6300	18.4909
Female	15.5500	13.9400
Difference	10.0800	4.5509
Pay Gap %	39.3289%	24.6115%



### Key Points:

- The mean hourly and the median hourly rate of pay is calculated from a specific pay period, in this case it is 1st of March to 31st March 2020. The hourly rate is calculated for each employee based on 'ordinary pay' which includes basic pay, allowances and shift premium pay. The median rate is calculated by selecting the average hourly rate at the mid-point for each gender group.

- The percentage variance for the mean hourly rate of pay is 39.32%. This calculation is based on the mean hourly rate of 2686 female staff compared to 589 male staff; because the average is calculated over different numbers of staff (there are over 4 times more female staff), some variance is to be expected.

- The data includes both staff on Agenda for Change and staff on non-Agenda for Change terms and conditions (see sections below for a breakdown of Medical & Dental Staff and Non-Medical & Dental Staff gender pay gap results).

**Within each Quartile by Gender working Part time or Full time :**

Quartile 1

	Female	Male	% Female Working	%Male Working
Part time	331	16	95.39	4.61
Full time	381	90	80.89	19.11

Quartile 2

	Female	Male	% Female Working	%Male Working
Part time	322	14	95.83	4.17
Full time	381	102	78.88	21.12

Quartile 3

	Female	Male	% Female Working	%Male Working
Part time	358	12	96.76	3.24
Full time	370	78	82.59	17.41

Quartile 4

	Female	Male	% Female Working	%Male Working
Part time	225	46	83.03	16.97
Full time	316	231	57.77	42.23

### Key Points:

Proportion of part time workers who are female is consistent throughout pay quartiles 1 to 3 (95 – 96%). There are less full time workers who are female in quartile 4 (58%) compared to the lower pay quartiles.

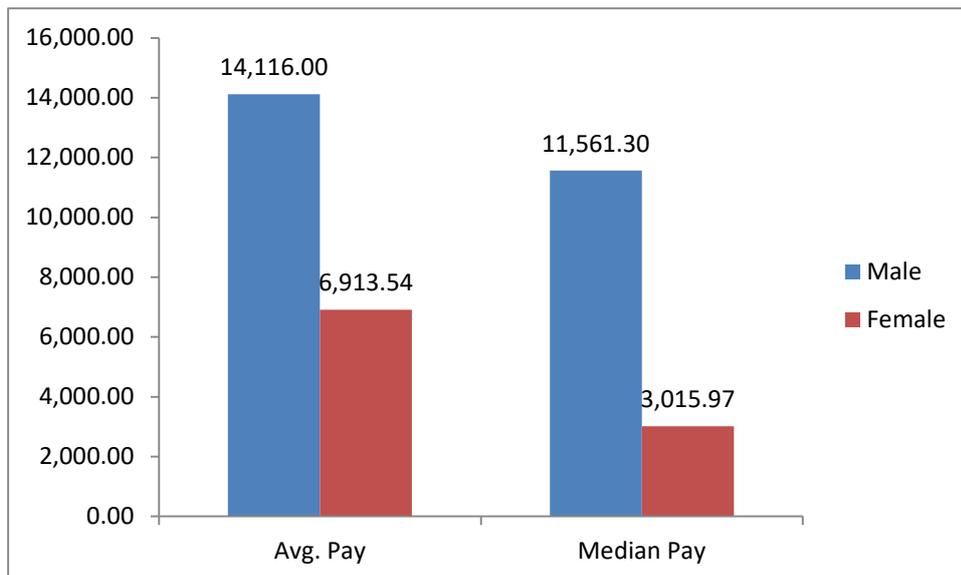
### Mean and Median Gender Bonus Pay Gap Results

Data based on **3578** Relevant Employees.

“Relevant Employees” are all employees who are employed on the snapshot date (31 March 2020) and this term includes full-pay relevant employees and also other employees employed on the snapshot date but on less than full pay because of leave (which has reduced pay).

Gender	Avg. Pay	Median Pay
Male	14,116.00	11,561.30
Female	6,913.54	3,015.97
Difference	7,202.45	8,545.33
Pay Gap %	51.02	73.91

The bonus period is a twelve month period that ends on the snapshot date. And will always be the preceding twelve months.



### Proportion of male and female employees who received bonus pay

Gender	Employees Paid Bonus	Total Relevant Employees	%
Female	19	2889	0.66
Male	47	6.82	8.79

### **Key Points:**

- The gender pay gap calculations make use of two types of averages; a mean average and a median average.
- Mean averages give a good overall indication of the gender pay gap, but very large or small pay rates or bonuses can 'dominate' and distort the answer. For example, mean averages can be useful where most employees in an organisation receive a bonus but could be less useful in an organisation where the vast majority of bonus pay is received by a small number of employees (as is the case here).
- Median averages are useful to indicate what the 'typical' situation is i.e. in the middle of an organisation and are not distorted by very large or small pay rates or bonuses. However, this means that not all gender pay gap issues will be picked up.
- The bonus pay criteria includes Clinical Excellence Awards (CEAs) and Discretionary Points Awards paid to 19 female and 47 male medical staff during 1<sup>st</sup> April 2019 and 31<sup>st</sup> March 2020. It also includes Long Service Awards (monetary awards in the form of shopping vouchers) given in 2020 for service gained in 2019. 45 Females and 7 Males received a Long Service Award (LSA). Therefore the number of employees who received a bonus payment is small, the value and type of bonus payments received is varied with more men receiving the higher value CEAs and more women receiving the lower value LSAs and this has distorted the figure.
- The Clinical Excellence Awards payments have been included in the bonus pay calculation (and the average hourly rate calculation) because the payments are subject to eligible applicants demonstrating that they are performing 'over and above' the standards expected in their role. Also in accordance with the Trust's Local Employer Based Awards (Clinical Excellence Awards) Policy the awards are subject to application for renewal every 5 years.
- This calculation expresses the number of staff receiving bonus pay as a percentage of the total number of staff in each gender group.

### **Mean and Median Gender Bonus Pay Gap Results excluding Long Service Awards**

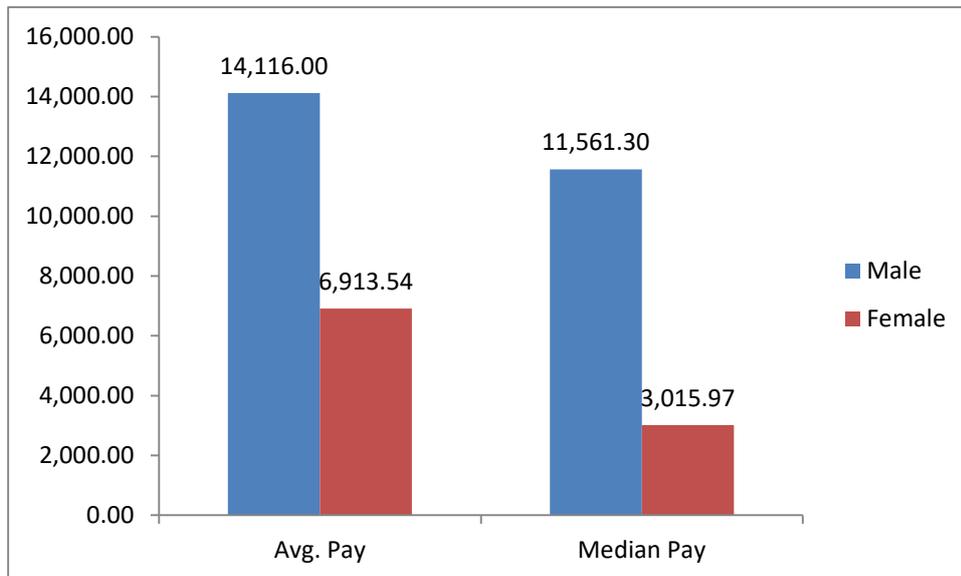
The Trust formally recognises and rewards long serving employees' commitment and loyalty to the national health service by way of its Long Service Awards scheme. The awards take the form of certificates and badges from 10 years' service and then

at every 5 years' service intervals until 40 years' service. In addition a monetary award (in the form of shopping vouchers) to the value of £250 is made at 25 years' service and £150 at 40 years' service and this is presented to the recipient at an annual long service awards ceremony.

The award is therefore designed so as not to be anything that relates to productivity, performance or incentive, but more recognition for long service.

If long service monetary awards are excluded, the mean bonus pay gap increases from 37.90% to 51.02% and the median bonus pay gap increases from 59.92% to 73.91%.

Gender	Mean bonus Pay excl LSA	Median Bonus Pay excl LSA
Male	£ 14116.00	£ 11561.30
Female	£ 6913.54	£ 3015.97
Difference	£ 7202.45	£ 8545.33
Pay Gap %	51.02%	73.91%



Gender	Employees Paid Bonus excl LSA	Total Relevant Employees	%
Female	19	2889	0.66
Male	47	6891	6.82

**Non - Medical and Dental Gender Pay Gap Results**

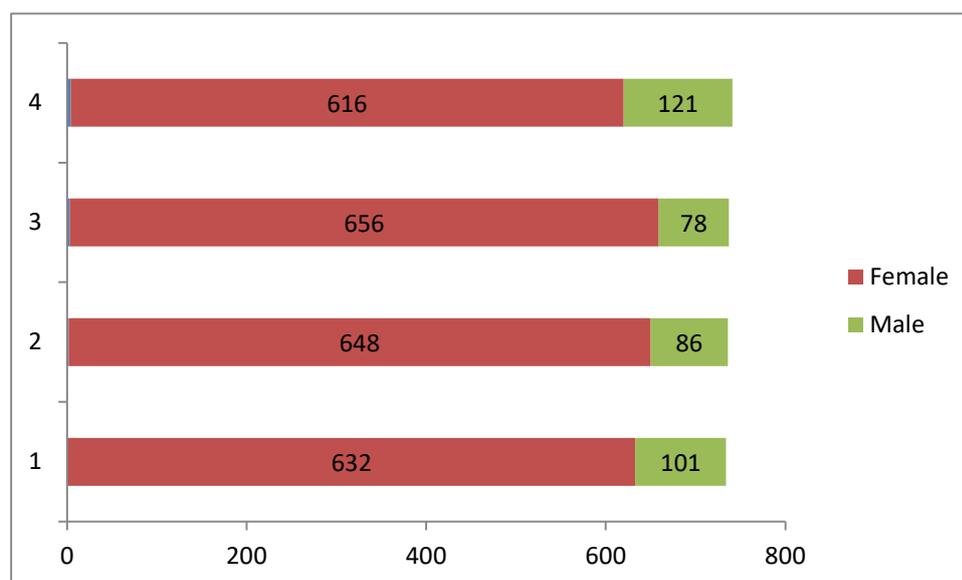
Data from ESR as at 31 March 2020

Data based on **2938** Full Pay Relevant Employees.

A “ Full Pay Relevant Employee” is any employee who is employed on the snapshot date (31 March 2020) and who is paid their usual full basic pay during the relevant pay period (1 – 31 March 2020).

**Proportions of male and female employees in each pay quartile based on Ordinary Pay**

Quartile	Female	Male	% Female	% Male	Grand Total
1	632	101	86.22%	13.78%	733
2	648	86	88.28%	11.72%	734
3	656	78	89.37%	10.63%	734
4	616	121	83.58%	16.42%	737



**Mean and Median Gender Pay Gap Results**

Gender	Mean Hourly Rate	Median Hourly Rate
Male	£ 15.73	£ 13.78
Female	£ 14.59	£ 13.41
Difference	£ 1.78	£ 0.37
Pay Gap %	11.32%	2.69 %



**Key Points:**

- The percentage variance for the mean hourly rate of pay is 11.32%. This calculation is based on the average hourly rate of 2552 female staff compared to 386 male staff; because the average is calculated over different numbers of staff, some variance is to be expected.

**Medical and Dental Gender Pay Gap Results**

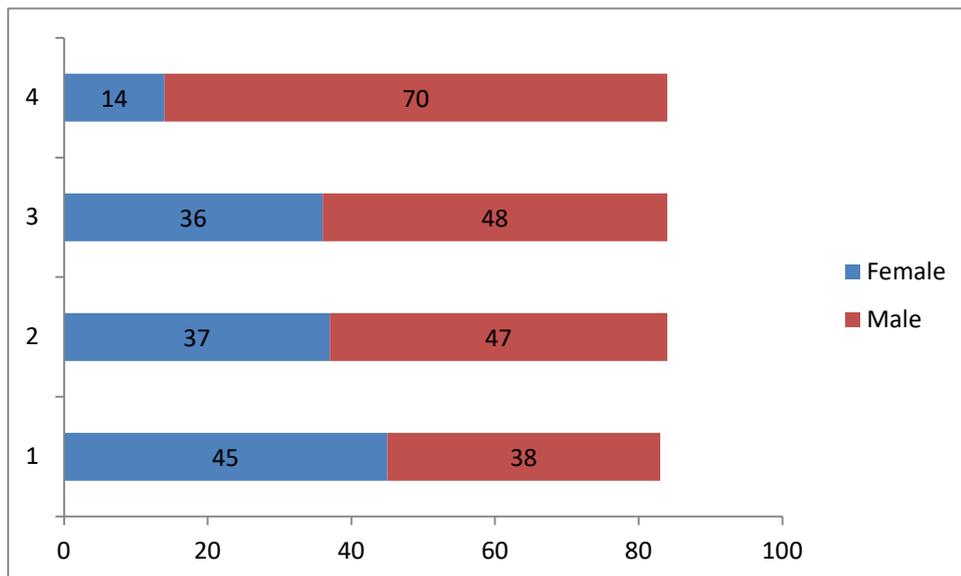
Data from ESR as at 31 March 2020

Data based on 335 Full Pay Relevant Employees.

A “ Full Pay Relevant Employee” is any employee who is employed on the snapshot date (31 March 2020) and who is paid their usual full basic pay during the relevant pay period (1 – 31 March 2020).

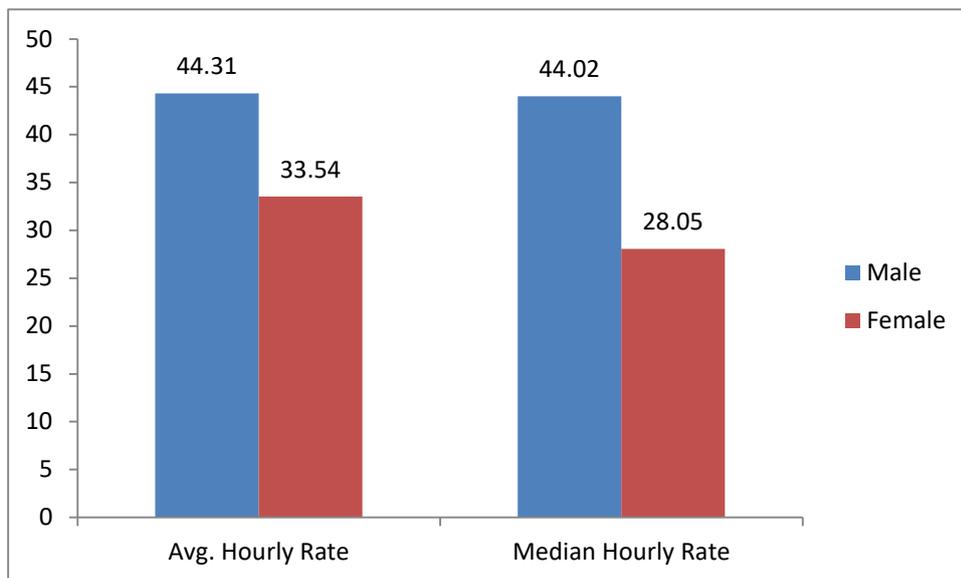
**Proportions of male and female employees in each pay quartile based on Ordinary Pay**

Quartile	Female	Male	% Female	% Male
1	45	38	54.22%	45.78%
2	37	47	44.05%	55.95%
3	36	48	42.86%	57.14%
4	14	70	16.67%	83.33%



## Mean and Median Gender Pay Gap Results

Gender	Avg. Hourly Rate	Median Hourly Rate
Male	£44.31	£44.42
Female	33.54	£28.05
Difference	£10.77	£15.97
Pay Gap %	24.31%	35.95%



### **Key Points:**

- The percentage variance for the mean hourly rate of pay is 24%. This calculation is based on the average hourly rate of 132 female staff compared to 203 male staff; because the average is calculated over different numbers of staff, some variance is to be expected.