

# Gender Pay Gap Report, Supporting Statement

## 01/03/2018

### 1 GENDER PAY GAP CALCULATIONS

#### 1.1 Mean and Median Hourly Rates (All staff groups)

Gender	Average (mean) Hourly Rate	Median Hourly Rate
Male	21.8078	16.4418
Female	14.5524	12.5616
Difference	7.2554	3.8802
Pay Gap %	33.27%	23.60%

#### 1.2 Number of employees per quartile

Quartile	Female	Male	Female %	Male %
1 (lower)	866	156	84.74	15.26
2 (lower middle)	932	160	85.35	14.65
3 (upper middle)	908	151	85.74	14.26
4 (upper)	688	372	64.91	35.09

1.3 The calculation on bonuses is not relevant to this Trust, as staff are not paid bonuses. Awards that may be perceived as bonuses (Clinical Excellence Award, for example) are fully incorporated into pay, and under the definitions of the regulation are pay not bonuses.

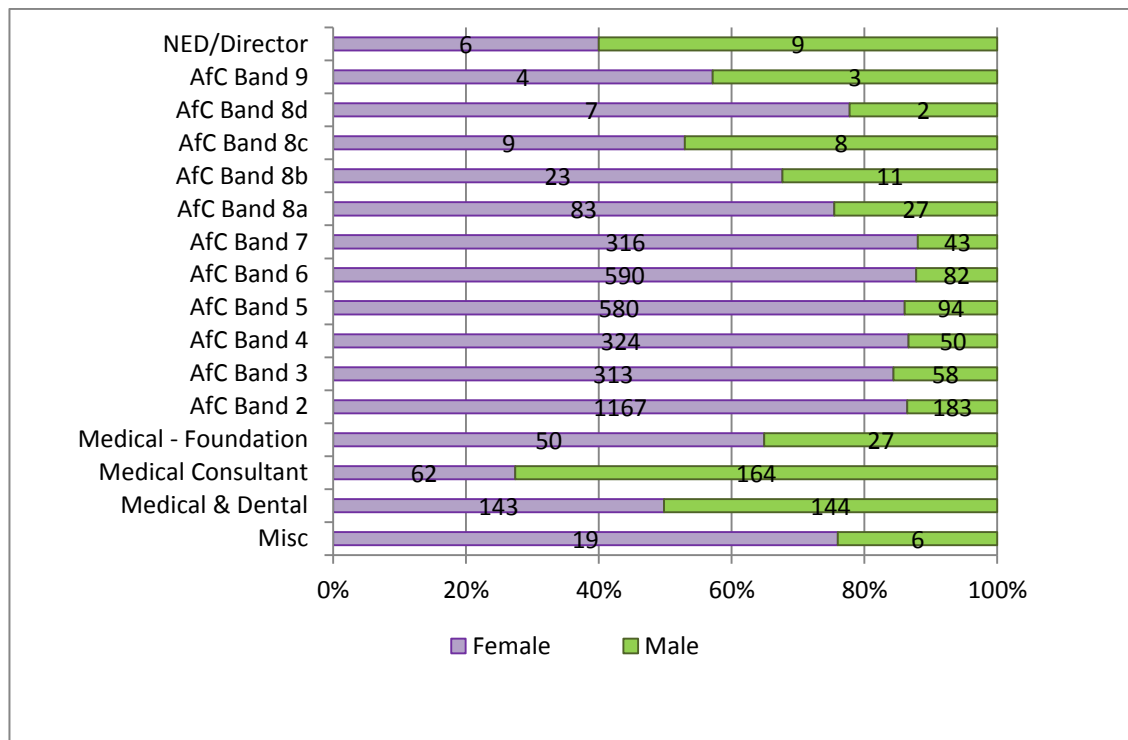
1.4 Mean and Median Hourly Rates, separating medical and dental roles from non-medical roles.

Medical and Dental		
Gender	Average (mean) Hourly Rate	Median Hourly Rate
Male	36.2115	36.4409
Female	30.0725	27.2668
Difference	6.1390	9.1740
Pay Gap %	16.95%	25.18%

Non-Medical		
Gender	Avg. Hourly Rate	Median Hourly Rate
Male	14.3136	12.0973
Female	13.5470	11.9526
Difference	0.7666	0.1448
Pay Gap %	5.36%	1.20%

## 2 SUPPORTING STATEMENT

- 2.1 The headline calculations for this Trust are a Mean gender pay gap of 33.27% and a Median gender pay gap of 23.60%. However, it is evident that the proportion of men in the workforce increases in the upper quartile, compared to quartiles 1 to 3.
- 2.2 When calculating the pay gap separately for medical and dental, and non-medical staff, the mean reduces for both groups, and the median reduces for non-medical staff. Indeed, the mean pay gap for non-medical staff (chiefly AfC pay bands) there is very little variation in the mean, at 5.36%, and the median is 1.2%.
- 2.3 The gender pay gap issue for the Trust comes when we combine medical and non-medical grades, as the number of men in the medical workforce, particularly consultants, is significantly higher than the number of women. The graph below illustrates, from the Trust's workforce demographics report 2017, that amongst medical consultants, men comprise over 75% of the workforce. In Agenda for Change (AfC) pay bands, women form over 80% of the workforce. This means that, compared to women, a greater proportion of men are in higher paid roles. Another potential matter to consider is the fact that the Trust has not outsourced some services, such as catering and housekeeping, which have a higher proportion of women in lower pay bands.



- 2.4 Discussions with neighbouring trusts and with NHS Employers have revealed that there is a similar pattern across Acute Trusts in England. On the one hand, there is reasonable confidence that, owing to Agenda for Change and medical pay reviews, the NHS is providing equal pay (men and women paid equally to carry out the same jobs, similar jobs or work of equal value). However, it is evident that in medical roles there are significantly more men progressing to the most senior levels resulting in a gender pay gap.
- 2.5 Further work is needed to understand the reasons for the differences in progression for men and women, especially in medical and dental roles. There is also little that the Trust can do in the short term to remove the gender pay gap, precisely because the issue affects professions that have long term career pathways.
- 2.6 The important issue with gender pay gap analysis is not only to know the data and understand the reasons for the gaps, but to be able to develop plans to address the gap. Reliable benchmarking with other organisations has not yet been possible, as this is the first year for gender pay gap reports. Noting that the gender pay gap issue is common to many other acute trusts across the NHS, it will be important to explore with partners across the NHS what practical changes can be made. Ideas currently under consideration include:

- Continuing to keep pay structures under proper review, to ensure that equal pay is maintained;
- Improving the professional pathways for women in medical roles to encourage more female medics into consultant and other senior roles;
- Working with Medical Schools/Universities to explore how medical graduates choose the direction of their careers;
- Reviewing the international dimension of medical recruitment, recognising the pattern of male dominance in medical roles across the world. This must include practical steps to encourage more women medics from international recruitment;
- Reviewing how well the Trust manages women's progression after career gaps/maternity;
- Reviewing how well the Trust is managing the progression into senior medical roles for women who work part-time;
- Active promotion of current policies on flexible and family-friendly working, workforce planning and career development opportunities and career pathways for all staff.

2.7 **Assurance statement.** The gender pay gap for Medway Foundation Trust has been prepared using the NHS Electronic Staff Record (ESR) gender pay gap calculator. The Trust has also used the ACAS guidance to calculate and verify the result.

Medway NHS Foundation Trust's equality, diversity and inclusion publications can all be found on the Trust website at:

<https://www.medway.nhs.uk/about-us/publications/equality-and-diversity-documents.htm>

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