

Northern Devon NHS Trust

Gender Pay Gap Report (March 2023)

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1. INTRODUCTION

From 2017, any organisation that has 250 or more employees must publish and report specific figures about their gender pay gap. The gender pay gap is the difference between the average earnings of men and women, expressed relative to men's earnings.

The Trust must both:

- Publish their gender pay gap data and a written statement on their public-facing website
- Report their data to government online using the gender pay gap reporting service.

This report fulfils our legal obligation to produce and comment upon the following data with regards our gender pay gap: mean gender pay gap, median gender pay gap, mean bonus gender pay gap, median bonus gender pay gap, proportion of males and females receiving a bonus payment and proportion of males and females in each pay quartile. It should be noted that no bonuses are paid within the Trust as part of pay packages; however for the purposes of the Gender Pay Gap report, ACCEA¹ payments, part of a national scheme are classified as a bonus.

Other than for medical and dental staff (doctors) all jobs are evaluated using the national Agenda for Change (AfC) job evaluation scheme. This process evaluates the job and not the post holder and makes no reference to gender or any other personal characteristics of existing or potential job holders. Outside of the Executive Directors and a small number of other senior roles all remuneration is made in accordance with the AfC pay bands.

The data in this report is based on a snapshot taken on 31st March 2022.

Throughout this report, when data is labelled "2023" this refers to the year of publishing our gender pay gap report (so the data is from 2022). Similarly, references to "2022" refer to this report, published in 2022, but using data from 2021.

The value of this report is, in making year-on-year comparisons and benchmarking nationally. We can compare our performance with our own results submitted in March 2022 and we have used data from other organisations who have submitted their data based on the March 2021 snapshot, to widen our benchmarking.

This report proposes a range of actions to complete further analysis to complement our "diagnosis" of our gender pay gap and to ensure that any actions recommended will be effective in assisting to reduce our gender pay gap.

2. EXECUTIVE SUMMARY

Our performance against relevant local and national benchmarks continues to be poor.

Analysis of numbers of staff within respective quartiles shows small changes across all but the low quartile, which remains the same.

Due to structural issues within the pay system across the hospital sector, within the ACCEA system for consultants, gender inequality is greater than would be expected against any national benchmark measure to do with the mean average, or payment of bonuses.

The national ACCEA scheme is changing, and is expected to have an impact over time. The earliest possible timescales for further review for those in receipt of ACCEA awards under the old scheme, which have significantly contributed to the current pay gap, are scheduled for 2021, so it is unlikely that significant reduction can be achieved before then. The pay gap due to the ACCEA scheme is also unlikely to close significantly unless female

¹ "ACCEA" stands for Advisory Committee on Clinical Excellence Awards

representation is increased, and also whether increasing numbers of female staff can be encouraged to make applications for ACCEA awards.

Comparison with the previous year's data shows that our pay gap, using both the mean and median average indicators, has remained relatively stable. The percentage comparison between males and females receiving bonus pay has shown a decrease in males receiving bonus payments but not for females. Although the percentage of male consultants receiving bonus payments remains significantly higher than females, the bonus payment gap has reduced positively both in the median and mean pay.

It is nationally recognised that, within medical consultants in England, a pay gap exists. A recent review by UCL academic Professor Dame Jane Dacre. Entitled Mend the Gap: The Independent review into Gender Pay Gaps in Medicine in England was undertaken to understand the reasons and to make recommendations to reduce the pay gap over the medium to long term.

3. REPORTABLE DATA

The data shown below is that which has been uploaded to the Gender Pay Gap Reporting Service website. There is no opportunity to add explanatory text on the website but this report will be uploaded to the Trust website as part of the reporting requirements.

Women's hourly rate is:	
27.7% LOWER (mean)	22.6% LOWER (median)
Pay quartiles:	
How many men and women are in each quarter of the employer's payroll	
Top quartile	
34.7% MEN	65.3% WOMEN
Upper middle quartile	
16.1% MEN	83.9% WOMEN
Lower middle quartile	
15.2% MEN	84.8% WOMEN
Lower quartile	
14.7% MEN	85.4% WOMEN
Women's bonus pay is:	
26.5% LOWER (mean)	33.3% LOWER (median)
Who received bonus pay:	
4.5% OF MEN	0.6% OF WOMEN

4. NATIONAL BENCHMARKING

The table below shows our performance against the most recent official headline pay gap benchmarking, for all employers, from the Office for National Statistics (ONS)²:

	Pay gap based on median average	Pay gap based on mean average
National benchmark	14.9%	13.9%
Human Health Activities	17.0%	20.8%
Hospital Activities	13.3%	21.2%
NDHT	22.6%	27.7%

Commentary

The pay gap based on the median average is the most reliable and widely used measure of gender pay equality. When the pay gap is measured using the mean average, this allows “outliers” at either end to distort the measure. The figures above indicate that the NDHT gender pay gap is significantly higher than local and national benchmarks.

The median gender pay gap has been reduced since last years reporting with the gap between the Trust and national benchmarking now at 7.7% as opposed to 16.7%.

5. COMPARISON WITH PREVIOUS YEAR

Mean average for hourly rate of pay

	2022	2023	% change
Male	£22.34	£23.06	3.22%
Female	£15.98	£16.68	4.38%
% difference	28.47%	27.66%	-0.81%

Median average

	2022	2023	% change
Male	£17.78	£19.21	8.04%
Female	£14.02	£14.86	5.99%
% difference	21.13%	22.63%	1.50%

²

<https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/earningsandworkinghours/datasets/annualsurveyofhoursandearningsashegenderpaygaptables>

Quartiles

Quartile	2022		2023		% change	
	Male	Female	Male	Female	Male	Female
Top	33.6%	66.4%	34.7%	65.3%	1.1%	-1.1%
Upper middle	15.9%	84.1%	16.1%	83.9%	0.2%	-0.2%
Lower middle	13.0%	87.0%	15.2%	84.8%	2.2%	-2.2%
Lower	15.4%	84.6%	14.7%	85.4%	-0.7%	0.7%

Bonus Pay

% receiving bonus pay	2022	2023	% change
Male	5.2%	4.5%	-0.7%
Female	0.7%	0.6%	0.1%

Bonus Pay (mean average)

Mean bonus pay	2022	2023	% change
Male	£10,902.61	£10,168.44	-6.73%
Female	£7,190.72	£7,478.67	4.00%
% difference	34.10%	26.45%	-7.65%

Bonus Pay (median average)

Median bonus pay	2022	2023	% change
Male	£9,048.00	£9,048.00	0.0%
Female	£5,371.58	£6,032.03	12.3%
% difference	40.6%	33.3%	-7.3%

Consultants

Consultants	Male	Female	Total	% Female
2022	78	32	110	29%
2023	82	36	118	31%

Commentary

Comparison with the previous year's data show that our pay gap, using both the mean and median average indicators, has remained relatively stable. The percentage comparison between males and females receiving bonus pay has shown that there is a decrease in the overall amount of bonuses received by males, and an increase in the overall amount of bonuses received by females, although the percentage and overall payments received by males is still significantly higher than that received by females.

6. SOURCES OF PAY GAPS

The table below shows our gender pay gap for all staff, excluding medical and dental staff compared to data for all employees:

	NDHT All Staff			NDHT Excluding Consultants		
	Male Hourly Rate	Female Hourly Rate	Gap	Male Hourly Rate	Female Hourly Rate	Gap
Mean average	£23.06	£16.68	27.7%	£19.26	£16.21	15.84%
Median average	£19.21	£14.86	22.6%	£16.83	£14.66	12.89%

Commentary

The pay gap data with medical consultants removed shows a significantly lower gender pay gap, however this is still above national benchmarking. The reason for including this data is to show what has been suspected for some time, which is that Medical staff account for a large proportion of the gender pay gap. However, there is still much work to do to eradicate the pay gap overall.

7. ACTION PLANNING

The Gender Pay Gap data relating to bonus pay relates to the distribution of ACCEA awards for consultants. Although female and male representation at consultant level has improved marginally from the previous year, the lower level of female consultants affect these figures.

To enable future equity and change some of the actions needed are external to the organisation and will be subject to review by other professional bodies such as the ACCEA, however, we recognise the future merger between Royal Devon and Exeter Hospitals and Northern Devon Healthcare Trust will provide an opportunity to review existing and future workforce needs and areas of disparity between males and females.

Our Inclusion plans will be looking to improve our overall recruitment processes, training requirements and policies which we hope will have a positive impact on our workforce and gender equity in future reports.