

Hull University Teaching Hospitals NHS Trust

Gender Pay Gap Reporting

1 BACKGROUND

Gender pay gap legislation requires all employers of 250 or more employees to publish their gender pay gap as at 31 March each year. This forms part of the Trust’s public sector equality duty under the Equality Act 2010. The Equality and Human Rights Commission has the power to enforce any failure to comply with the regulations. This report details the Trust’s position as at 31 March 2023.

The Trust employs staff in a range of roles, including administrative, medical, nursing, allied health professionals and managerial roles. For the purposes of gender pay gap reporting, the Trust has to include all staff who are processed via their Payroll, including the number of their assignments. This includes substantive and casual workers and any hosted employees (e.g. trainee GPs, vaccinators etc.).

Figures at 31 March 2023	HUTH
Headcount	11,009
Number of Assignments	11,360

The headcount numbers above only include employees once i.e. ignoring any multiple posts.

The number of assignment highlights those employees who have multiple posts (e.g. for different grades and positions) as they are then included multiple times.

These figures are therefore different to the headcount reported to the Group Board and workforce committees.

The Trust uses the national job evaluation framework for Agenda for Change staff to determine appropriate pay bandings; this provides a clear process of paying employees equally for the same or equivalent work.

The national pay grades used in the Trust have a set of points for pay progression, linked to length of service and performance. Therefore, the longer the period of time that someone has been in a grade the higher their salary is likely to be, irrespective of their gender.

This report includes the statutory requirements of the gender pay gap legislation, but also provides further context to demonstrate and reinforce our commitment to equality.

The gender pay gap shows the difference between the average (mean or median) earnings of all male and all female employees. It is expressed as a percentage of men’s earnings. It is a measure of disadvantage.

The gender pay gap is not the same as equal pay. Equal pay is about ensuring men and women doing similar work or work that is different but of equal value (in terms of skills, responsibility, effort) are paid the same. A gender pay gap could reflect a failure to provide equal pay but it usually reflects a range of factors, including a concentration of women in lower paid roles and women being less likely to reach senior management levels.

2 GENDER PAY GAP DATA 2023

The figures set out below have been calculated using the standard methodologies used in the Equality Act 2010 (Gender Pay Gap Information) Regulations 2017, utilising the national NHS Electronic Staff Record Business Intelligence report functionality.

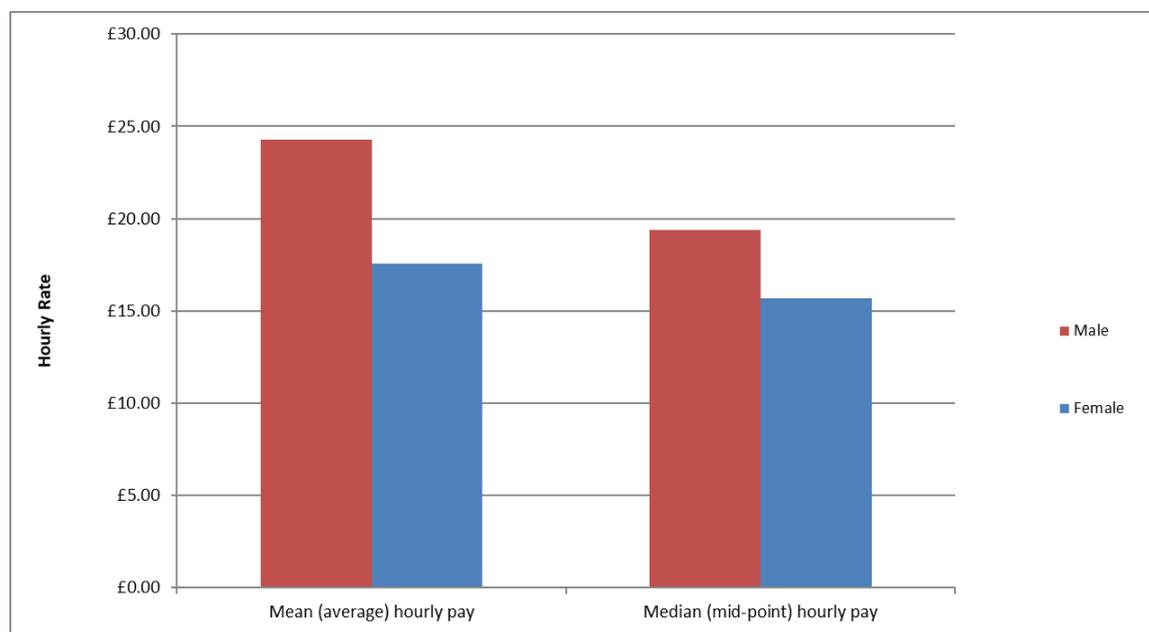
The analysis does not look at whether there are differences in pay for men and women in equivalent posts. Therefore, the results will be affected by differences in the gender composition across the Trust’s various professional groups and job grades.

National reporting requirements require the Trust to report the six gender pay gap measures to one decimal point (these six measures are shown in bold italics throughout the document), however to assist the Trust better analyse the data and progress made, the data is also shown to two decimal places.

Hull University Teaching Hospitals NHS Trust’s Gender Pay Gap Data for the snapshot date of 31 March 2023 is as follows:

2.1 Mean (Average) and Median (Mid-Point) Gender Pay Gap

Gender	Mean (Average) Hourly Pay	Median (Mid-Point) Hourly Pay
Male	£24.31	£19.39
Female	£17.39	£15.69
£s difference	£6.92	£3.70
% difference	28.47% (28.5%)	19.08% (19.1%)



- The mean (average) gender pay gap is 28.47% (i.e. this means that women’s average earnings are 28.47% less than men’s). This reduction of 0.67% or additional £0.04 increase on the previous reporting period shows a small but improving picture.
- The median (mid-point) gender pay gap is 19.08% (i.e. this means that women’s average median earnings are 19.08% less than men’s). This is a reduction of 1.55% or £0.17 on the previous reporting period.

Note: Gender pay gap calculations are based on ordinary pay which includes; basic pay (including for medical and dental staff additional programmed activities), allowances (including shift premiums), extra amounts for on-call, pay for leave (including average holiday pay payments) but excludes; overtime, expenses, payments into salary sacrifice schemes (even though employees opted into the schemes voluntarily, as they provide a benefit in kind), Clinical Excellence Awards (CEAs) and pensions.

2.1.1 Key Findings

- The Trust has an overall gender split of 76.71% female and 23.29% male staff. The mean (average) and median (mid-point) gender pay gap can be explained by the fact that while men make up only 23.29% of the workforce, there are a disproportionate number of males, 39.63% in the highest paid (upper) quartile, (predominantly medical staff) with 60.37% being female.
- The mean (average) gender pay gap for the whole economy, based on April 2023 data, (according to the Office for National Statistics Annual Survey of Hours and Earnings figures) is 13.2% while the Trust's mean (average) gender pay gap is 28.47% in favour of males. The median (mid-point) gender pay gap for the whole economy is 14.3%, compared to the Trust average of 19.08%. Medical staff pay has a strong impact on the mean and median data.
- If medical staff were *excluded* from the data above, the mean (average) hourly pay gap is 3.28% or £0.55 (a 1.13 % or £0.16 reduction since the previous reporting period). Based on the median (mid-point) there is now a positive gender pay gap in favour of females of 1.49% or £0.22 (there was a 0 median pay gap in the previous report).
- The mean gender pay gap for medical staff is 14.42% (a reduction of 0.12% or additional £0.17 since the previous reporting period). The median gender pay gap for medical staff is 15.01% (an increase of 2.53% or £1.11 since the last return). Nationally the consultant workforce is predominately male.
- The Trust operates a number of salary sacrifice schemes. The overall percentage of staff who pay into salary sacrifice schemes (72.41% or 1215 female/ 27.59% or 463 male) broadly reflects the Trust's gender split (76.71% female, 23.29% male).
- This headline (female/male split) disguises the impact on the Trust's gender pay gap data, including the mean and median female averages and also where females fall in pay quartiles (i.e. they might otherwise fall into a higher quartile).
- This is because the gender pay gap calculations are based on pay excluding the value of payments made into salary sacrifice schemes. Payment into these schemes therefore reduces the basic salary and hourly rate of pay.
- The percentage of female staff in the lower/lower middle and upper middle quartiles who pay into salary sacrifice schemes is 75.82%, 81.04% and 77.21% respectively. Within the upper quartile the percentage of males who pay into salary sacrifice schemes is disproportionate (45.67% compared to the male gender split within the Trust 23.29% male), despite this male pay in this quartile is still higher than females.
- Of those that pay into two or three salary sacrifice schemes, 70.39% or 107 are female and 29.60% or 45 are male.

2.2 Pay Quartiles by Gender

The data below ranks employees from highest to lowest paid, divided into four equal parts (quartiles) and then calculates the percentage of male and female staff in each of these groups. The lower quartile represents the lowest salaries in the Trust and the upper quartile represents the highest salaries.

Quartile	Male			Female			Total
	Head count	% Head count	Mean (Average) Hourly Pay	Head count	% Head count	Mean (Average) Hourly Pay	
Lower	425	17.64%	£10.80	1984	82.36%	£10.94	2409
Lower Middle	456	18.92%	£14.10	1954	81.08%	£13.99	2410
Upper Middle	409	16.97%	£18.81	2001	83.03%	£18.65	2410
Upper	955	39.63%	£37.56	1455	60.37%	£29.01	2410
Total	2245	23.29%	£24.31	7394	76.71%	£17.39	9639

2.2.1 Key Findings

- The table above shows that in the lower quartile female employees are paid more than male employees giving a gender pay gap of -1.30% or -£0.14p. In the lower middle quartile female employees are paid less than male employees giving a gender pay gap of 0.78% or £0.11 (a change from the previous return when females were paid more). In the upper middle quartile female employees are paid less than male employees giving a gender pay gap of 0.85% or £0.16p (a change from the previous return when both females and males were paid the same). In the upper quartile the gender pay gap increases to 22.76% or £8.55 in favour of men.
- Based on the Trust's overall gender split (76.71% female and 23.29% male), there is no significant gender pay gap in the lower, lower middle and upper middle quartiles. There remains a disproportionate number of males (39.63%) in the upper quartile compared with females (60.37%). The percentage of males in the upper pay quartile has increased 0.31% from 39.32% in 2022 to 39.63% in 2023. However, the mean hourly pay gap for the upper quartile has fallen from £8.79 to £8.55, a £0.24 decrease on the previous reporting period.
- In the current reporting period the male mean pay (£24.31) falls in the upper quartile, and the female mean pay (£17.39) falls in the upper middle quartile.
- The median pay for males (£19.39) falls in the upper middle pay quartile and female median pay (£15.69) falls in the lower middle quartile.

2.3 Mean (Average) and Median (Mid-Point) Gender Bonus Gap including Long Service Awards and Percentage of Male/Females Receiving a Bonus Payment

Gender	Mean (Average) Yearly Bonus Pay	Median (Mid-Point) Yearly Bonus Pay	% Receiving Bonus
Male	£6,233.83	£4,089.48	15.72 (15.7%)
Female	£3,615.37	£4,089.48	2.56% (2.6%)
£s difference	£2,618.46	£0.00	
% difference	42.00% (42.0%)	0.00% (0.0%)	

2.3.1 Key Findings

This year the Trust has two types of bonus that meet reporting requirements, namely Clinical Excellence Awards (2 types – pre-2018 and post-2018), which account for 88.01% and Long Service Awards which account for 11.99%.

A total of 542 bonus payments were made (353 male/189 female). This included 477 CEA payments (total of pre-2018 and post-2018 awards) and 65 Long Service Award payments as shown in the table below:

Bonus Type	Male		Female		Total Head count
	Head count	%	Head count	%	
*Pre-2018 CEA / Discretionary Points (Local or National)	86	76.11%	27	23.89%	113
*Post-2018 CEA Awards (Local)	256	70.33%	108	29.67%	364
Long Service Awards	11	16.92%	54	83.08%	65

- The Trust's gender bonus data is distorted by the Trust's Long Service Award scheme as, given the gender makeup of the workforce, more females receive an award. Calculations have therefore been made both including and excluding this data. The award is a £50 voucher paid to any member of staff who has achieved 25 years substantive service within the NHS, in recognition of their contribution and commitment.
- The mean gender bonus gap is 21.63% (£1,391.22) when Long Service Awards are excluded from the data, which is an increase of 6.17% since the previous reporting period, rising to 42.00% (£2,618.46) which is an increase of 4.81% since the last report, when they are included in line with national guidance.
- CEAs are awarded based on the performance of consultant medical staff subject to national and local eligibility criteria in recognition of excellent practice over and above contractual requirements.
- *Within the Trust a number of staff receive payments for both types of CEA:
 - Of the 108 females that received a local post-2018 CEA, 26 females also received a pre-April 2018 consolidated local/national award or discretionary points.
 - Of the 256 males that received a local post-2018 CEA 78 males also received a pre-April 2018 consolidated local/national award or discretionary points.
- Pre-April 2018 local/national CEA/discretionary points are consolidated and pensionable, meaning they impact on both the mean/median Trust gender pay gap, as well as the Trust mean and median bonus gap. The number of pre-2018 awards was 123 in the previous reporting period (93 male/ 30 female), but has now reduced by 10 to 113 (86 male/27 female).
- Post-2018 CEAs are paid as a lump sum, time-limited, non-consolidated and non-pensionable payment. They do not include uplifts for consultants undertaking Additional Programmed Activities. The number of post-2018 CEAs was 363 in the previous reporting period (258 male/105 female) compared to 364 in this reporting period (256 male/108 female), giving a very slight shift in the male/female payments and percentage payment in favour of females.
- The median gender bonus gap is 0% (the same as the last reporting period). This is because the median bonus pay for males and females this reporting period, both including or excluding Long Service Awards, is £4,089.48 (a CEA).
- Changes over the last few years in the nationally reported mean and median bonus gap figures (i.e. including Long Service Awards) need to be treated with caution as they are largely due to changes in the allocation of local CEAs in light of the COVID-19 pandemic. The changes meant local CEAs did not run again for the financial year 2022/23. As was the case in 2020/21 and 2021/22, the award money was distributed equally amongst eligible consultants who chose to opt in to receive a share of this money. These consultants received the payment as a one-off, non-consolidated payment in place of normal local CEA rounds, due to exceptional circumstances.
- The proportion of male employees receiving a bonus is 15.23% excluding Long Service Awards (a reduction of 0.82% since the last reporting period) and 15.72% when Long Service Awards are included (a reduction of 0.79% on the previous reporting period).

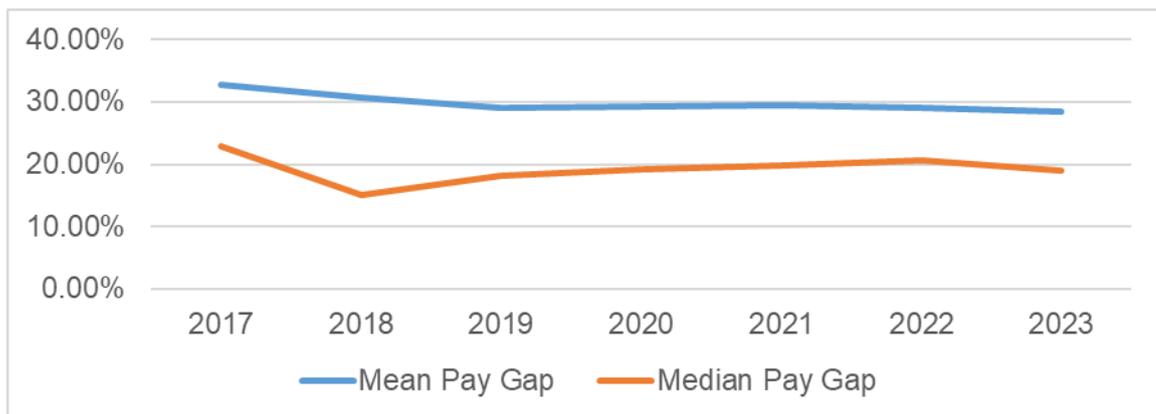
- The proportion of female employees receiving a bonus is 1.83% excluding Long Service Awards (down 0.05% compared to the last reporting period) and 2.56% when included (down 0.05%).
- As at the snapshot date (31/3/23) the Trust has an overall gender split of 40.05% female and 59.95% male in the 'Clinical Medical' staff group (a 0.72% shift in favour of males since the last reporting period). The gender split for those within this group receiving a CEA/discretionary payment remains disproportionate for both pre-2018 and post-2018 CEAs as highlighted in the table on page 8.
- CEA and discretionary points payments range from £1,431.32 to £59,477.04.
- As the mean bonus pay gap has increased by 4.81% since the last reporting period, further analysis has been undertaken to try understand the reasons for this:
 - Since the previous report (as at 31/03/22), the Trust has reduced the value of the gender bonus gap by a further £466.37 (from £3,084.83 to £2,618.46 in this report).
 - The male bonus average has also reduced significantly by £2,059.96 (from £8,293.79 to £6,233.83).
 - The female bonus average has also reduced by £1,593.59 (from £5,208.96 to £3,615.37).
 - Despite the gender bonus gap reducing in actual £ terms, the % has deteriorated (by 4.81%). This is due to the male bonus average seeing a larger decrease than the £ difference between the two years.
- Nationally agreed changes to the local CEA scheme effective from 1 April 2018 and the reduction of staff receiving the pre-2018 awards are starting to gradually impact on the Trust's gender pay gap data.

3 SUMMARY OF RESULTS AND ACTIONS

The Trust is committed to ensuring all staff are treated and rewarded fairly irrespective of gender.

The Trust has compared the mean (average) and median (mid-point) gender pay gap since statutory reporting began in the graph and table below:

Mean (Average) and Median (Mid-Point) Gender Pay Gap 2017 to 2023

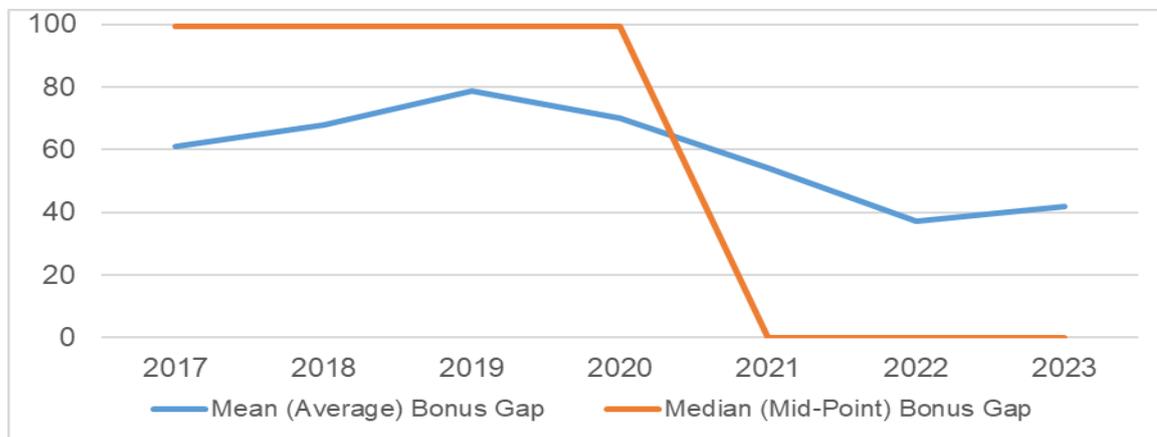


	2017	2018	2019	2020	2021	2022	2023
Mean (Average) Pay Gap —	32.85%	30.74%	29.04%	29.21%	29.50%	29.14%	28.47%
Median (Mid-Point) Pay Gap —	22.89%	15.12%	18.18%	19.21%	19.85%	20.63%	19.08%

This demonstrates that the Trust is gradually making inroads to tackle its gender pay gap, albeit with fluctuations along the way.

The Trust has compared the mean (average) and median (mid-point) bonus gender pay gap since statutory reporting began in the graph and table below:

Mean (Average) and Median (Mid-Point) Bonus Gender Pay Gap 2017 to 2023



	2017	2018	2019	2020	2021	2022	2023
Mean (Average) Bonus Gap –	61.02%	67.79%	78.69%	70.28%	54.05%	37.19%	42.00%
Median (Mid-Point) Bonus Gap –	99.44%	99.45%	99.45%	99.24%	0%	0%	0%

The Trust is using the workforce gender pay gap figures to help understand the underlying causes for its gender pay gap and to identify suitable steps to minimise it.

Some elements of the Trust’s gender pay gap have a historical/national context which will take a period of time to resolve.

The Trust’s gender pay gap data reflects that the Trust has a majority of men in higher paid roles, predominantly medical staff.

The mean and median hourly pay gap percentages across the health sector and bonus pay gaps are significantly affected by the presence of the medical consultant body, due to both their high base wage and the historical differences in bonuses awarded under the CEA scheme.

The Trust’s mean gender pay gap at 28.47 is 0.67% lower than the previous reporting period. The median gender pay gap at 19.08% has reduced by 1.55%. These are above the national averages of 13.2% (mean) and 14.3% (median). Excluding medical and dental staff the Trust’s mean gender pay gap would be 3.28% and, based on the median, there would be a positive gender pay gap in favour of females of 1.49%.

Payment into salary sacrifice schemes continues to impact on the Trust’s gender pay gap data. Whilst the overall percentage of staff who pay into the schemes closely reflects the Trust’s gender split this headline figure disguises the impact on mean and median female pay averages, and where females fall in pay quartiles (i.e. they might have otherwise fallen into a higher quartile).

The mean gender bonus gap has increased in this last reporting period, with the median gender bonus gap remaining at 0%.

The Trust's gender bonus data remains distorted by three main factors; the Trust's Long Service Award scheme, payment of higher (accumulated) bonuses under the old pre-2018 CEA scheme for consultant medical staff (where there is a greater proportion of men), and the current national requirement under the pre-2018 schemes to pro-rata CEA bonus payments for part-time consultants (the large majority of whom are female).

4 WHAT HAS THE TRUST DONE TO DATE?

- Over the past year, the Learning and Development Team have focussed on developing and supporting the Trust's workforce, in particular how to support women to progress into leadership roles. This involved; increased communications to ensure awareness of training available to staff; offering one to one discussions to discuss flexibility options e.g. working patterns and how to deliver training in ways that are more inclusive; implementing new self-directed, independent bitesize training 'Stretch Thinking Bigger Better Bolder'; and improving accessibility for those unable to attend face to face training by offering pre-recorded sessions of bitesize training to enable staff who were unable to attend face to face sessions to still benefit from participation, reflection and receive feedback.
- The Trust continues to promote the suite of flexible working options to staff to better cater for work-life balance, including part-time working, job-sharing, flexi-time, annual hours contracts, flexible rostering, term-time working, fixed work patterns, flexible retirement and homeworking. The Trust is committed to moving to a culture where flexible working becomes the 'norm' and where flexible working applications are rejected they are escalated to understand the reasons why.
- The Trust continued to offer a wide variety of apprenticeships starting from Level 2 (equivalent to GCSE), extending up to Level 7 (equivalent to a master's degree), in areas including nursing, allied health professions, teaching and many other topics. Apprenticeships support both 'grow your own' and external candidates through traditional study and on-the-job learning, in addition to providing opportunities to staff who wish to further their qualifications. During the last 10 years, the Trust has supported over 900 individuals to advance their careers through apprenticeships. With the majority of apprentices being women, by supporting them to gain new skills and advance into higher paid roles, this will continue to help narrow the gender pay gap.
- With the Trust's workforce being predominately female, and reports of around 6% of people in the UK leaving their workplaces due to a lack of support in relation to their menopause symptoms ([Menopause in the workplace: Employee experiences in 2023, CIPD](#)), the Trust continues to explore how to best support peri-menopausal and menopausal women to remain in the workplace. Work over the last financial year has included taking the Trust successfully signing the Menopause Workplace Pledge and securing Menopause Friendly Accreditation through the work under the ICS; establishing a Menopause Steering Group; undertaking a menopause survey to gain feedback of employee's experiences in the workplace and what support measures staff would like to see; and updating resources for staff and managers, including the Menopause at Work Guidance, on the Trust intranet site.
- The development of a number of advanced practice roles across the Trust provides nursing and other clinical staff with the chance to progress to higher paid roles. 75% of these roles are filled with female staff, which supports the ongoing work to close the gender pay gap.

- The supply, recruitment and retention of staff continues to be a key priority for the Trust. Work to support this includes the continuation of the “Stay and thrive” group, which encourages international nurses and midwives (who are predominantly female) to not only ‘stay’ but to also ‘thrive’, and apply for higher banded roles. With over 450 internationally educated nurses and midwives, the Practice Development Team has worked hard to provide a smooth transition for new international nurses and midwives. A range of pastoral care is provided to new staff which includes pre-arrival meetings, fostering connections and friendships among nurses before they even meet in person, providing mentoring and support through all aspects of their recruitment and career at the Trust and more. The Trust has been recognised for its ongoing work to attract new people to live and work for the Trust by winning ‘Best Employer for Staff Recognition’ at the prestigious Nursing Times Workforce Awards.

5 NEXT STEPS

The Trust is committed to addressing the gender pay gap and is undertaking a range of actions and initiatives to reduce this including:

- Over the next 12 months the Learning and Development Team will focus on: adapting existing programmes to encourage staff to select programmes that best fit their needs; introducing digital training packages which can be accessed 24 hours a day/7 days a week; working with the Widening Participation Team to introduce and expand apprenticeship leadership opportunities; and exploring ways to gather delegate demographics to identify gaps, linked with protected characteristics, to enable the team to take supportive or corrective action.
- Continue to develop and expand the Trust’s apprenticeship offer.
- Continuing to take positive action to retain peri-menopausal and menopausal women, is a key focus for the Trust over the next year. This will include reviewing the provision of alternative lightweight uniforms for staff, participating in World Menopause Day in October 2023 and reviewing the training available to staff and managers whilst continuing to link into training/information and support sessions run by the ICB.
- In May 2023, the Trust will celebrate ‘International Nurses Day’ to reflect on the commitment, the care, and the expert clinical skills nurses bring and the impact nurses have on so many people; patients, families, colleagues, communities.
- Future changes to the national CEA scheme and local CEA schemes have the potential to improve the Trust’s gender pay gap and bonus indicators moving forward.
 - Nationally the government and unions representing consultant doctors in England have reached an agreement to put an offer to union members which seeks to address many of the long-standing reform priorities for the employment of the NHS consultant workforce. The offer includes; reform of the consultant (2003 contract) pay scales (reducing the time taken to reach the top of the pay range and number of unique pay points in the pay scale, increase to the starting salary for consultants and the top of the pay scale), a clearer link between pay progression and evidence of skills, competencies and experience), and improvements in parental leave.
 - Under the offer the contractual entitlement to access an annual local CEA would cease with effect from 1 April 2024. If the consultant offer is accepted any consolidated LCEAs awarded prior to 2018 would be retained, remaining pensionable and consolidated, although the value of the awards would be frozen. The value of any multi-year non-consolidated awards issues since April 2018 would not be impacted.
 - The referendum on the offer closes on the 23 January 2024. The offer will, if accepted, improve equity and fairness in pay and employment arrangements.

- Locally, the Trust has developed a new local scheme for the payment of local CEAs with effect from 1 April 2023 (i.e. the 2023/24 round of awards), which has the support of the Local Negotiating Committee (LNC). The two-tier scheme recognises clinical excellence in tier one (a two year award across three domains; Great Staff, Great Care and Great Future with lump sum payments made in March 2024 and March 2025) and general distribution in tier two (a single year one off lump sum payment made in 2024), subject to meeting specified eligibility criteria. The impact of the new local system will begin to show in the gender pay gap 'snapshot' data as at 31 March 2024, given awards are paid in arrears. Payments are non-consolidated, and non-pensionable.

Solutions to the gender pay gap lie in culture changes both in society and organisations. Closing the gap will take time, and progress will not be linear. Nationally most of the issues driving gender pay gaps require a longer term view.

The Trust believes, however, that over time, it's commitment to fostering inclusion, fairness and flexibility will be reflected in its gender pay gap figures, building a strong foundation for individual and organisational growth.

The Trust will continue to take steps to reduce its pay gap and continue to explore best practice across the sector and beyond.