

Contents

Gender Pay Gap Analysis

Requirements..... 4
Employees to include.....4

Ordinary Pay Analysis

Overview..... 5
Equal Pay.....6
Gender Distribution..... 7
Recruitment..... 8

Bonus Pay Analysis

Bonus Pay Analysis.....9

Conclusion

Conclusion & Further actions.....10

Trust introduction

Norfolk Community Health & Care NHS Trust was established in 2010 and delivers community and inpatient based health services in Norfolk, as well as Early Support Discharge Services in Suffolk.

The Trust currently employs over 2,200 staff as well as operating a pool of bank workers.

The Trust is committed to being an equal opportunities employer and equality and diversity is embedded in to everything it does.

Gender Pay Gap Analysis

Requirements

In accordance with the Equality Act 2010 (Gender Pay Gap Information) Regulations 2017, employers with 250 or more employees are required to publish Gender Pay Gap calculations no later than 30 March each year, commencing in 2017/18. The gender pay gap is not the same as equal pay, it's the difference between the average pay of all men compared to the average pay of all women. In an organisation which adheres to structured pay grades and equal pay, the Gender Pay Gap will highlight variances between genders if there's a proportional difference in the distribution of the workforce across the grades. For example, if an organisation has a higher proportion of males in higher banded roles the Gender Pay Gap analysis will identify this.

The legislation requires an employer to publish six calculations:

- Average gender pay gap as a mean average
- Average gender pay gap as a median average
- Average bonus gender pay gap as a mean average
- Average bonus gender pay gap as a median average
- Proportion of males receiving a bonus payment and proportion of females receiving a bonus payment
- Proportion of males and females when divided into four groups ordered from lowest to highest pay.

The information must be published on both the employer's website and on a designated government website. An employer should then use that information to help understand any underlying causes for their gender pay gap and take suitable steps to minimise it.

There are currently no sanctions for not publishing, however, failure to comply amounts to a breach of the Equality Act 2010, and would lay an organisation open to action by the Equality and Human Rights Commission. The likelihood of this happening is currently low, but due to current significant media interest, a much greater risk would be the reputational damage arising out of failing to upload the information onto our own and the government website.

Employees to include

For **ordinary pay**, only 'Full Pay Relevant Employees' are to be included. A 'Full Pay Relevant Employee' is any employee who is employed on the snapshot date of 31st March 2017 and who is paid their usual full basic pay during the relevant pay period. If employees are being paid less than their usual basic pay rate, or nil, during the relevant pay period as a result of being on leave, then they are not a 'full pay relevant employee'. It does not matter whether any leave is taken during the relevant pay period – what matters is whether the pay is reduced during that relevant pay period due to the leave.

If an employee is paid less than their usual basic pay rate during the relevant pay period for reasons other than leave (for example because they have been on strike), they still count as a full-pay relevant employee.

For **Bonus Pay**, all employees should be included.

Ordinary Pay Analysis - Overview

Data has been extracted from ESR (The Electronic Staff Record) at a snapshot date of 31st March 2017. It should be noted at this point that 13.44% of the organisation at the time of the sample were males, meaning small movements in the male grouping in comparison to females would result in larger proportional influences.

Gender	Avg. Hourly Rate	Median Hourly Rate
Male	£16.06	£14.56
Female	£14.60	£13.99
Difference	£1.46	£0.56
Pay Gap %	9.12%	3.87%

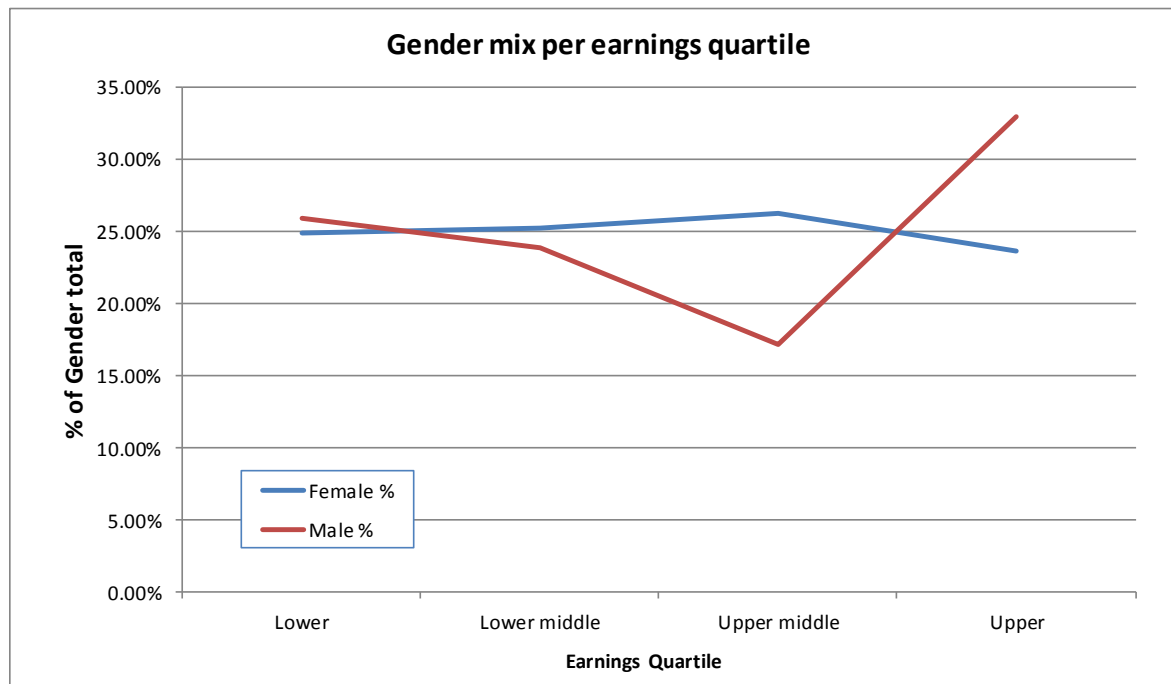
Table 1.1 - Average hourly rate by gender

Table 1.1 details the mean and median hourly pay rate per employee on the snapshot date. Males were paid on average £1.46/h more than females with a median of £0.56/h more. This indicates that whilst the average pay for males is higher than females, the middle value is much closer, thus indicating that a higher proportion of males are likely to be occupying higher banded roles.

Table 1.2 shows the distribution of the workforce broken down into quartiles with all employees ranked according to the hourly earnings and split into 4 quartiles. This table substantiates the initial assumption that the proportion of males in the upper quartile is higher than the proportion in the lower quartiles.

Quartile	Female %	Male %	Total
Lower	86.05%	13.95%	100.00%
Lower middle	87.15%	12.85%	100.00%
Upper middle	90.77%	9.23%	100.00%
Upper	82.22%	17.78%	100.00%
Total	86.56%	13.44%	100.00%

Table 1.2 - Quartile breakdown by gender



Graph 1.4 - Gender breakdown by earnings quartile

Table 1.3 and Graph 1.4 illustrate the same data but give a representation of quartile split across each gender. Whilst the **Lower middle** and **Upper middle** quartile have a lower proportion of males in post, the Upper quartile offsets this and drives the Average salary of males higher than that of females.

Quartile	Female %	Male %
Lower	24.87%	25.96%
Lower middle	25.19%	23.91%
Upper middle	26.31%	17.22%
Upper	23.63%	32.90%
Total	100.00%	100.00%

Table 1.3 - Gender breakdown by quartile

Ordinary Pay Analysis – Equal pay

Table 1.5 and graph 1.6 show the average hourly rates broken into bandings. As all NHS staff are aligned to either Agenda for Change or a Medical & Dental pay scale and they all receive equal pay for undertaking equal roles. There can be a slight variation within each banding depending on the spine point an individual commences on, or has progressed into and the enhancements that each employee received at the snapshot date.

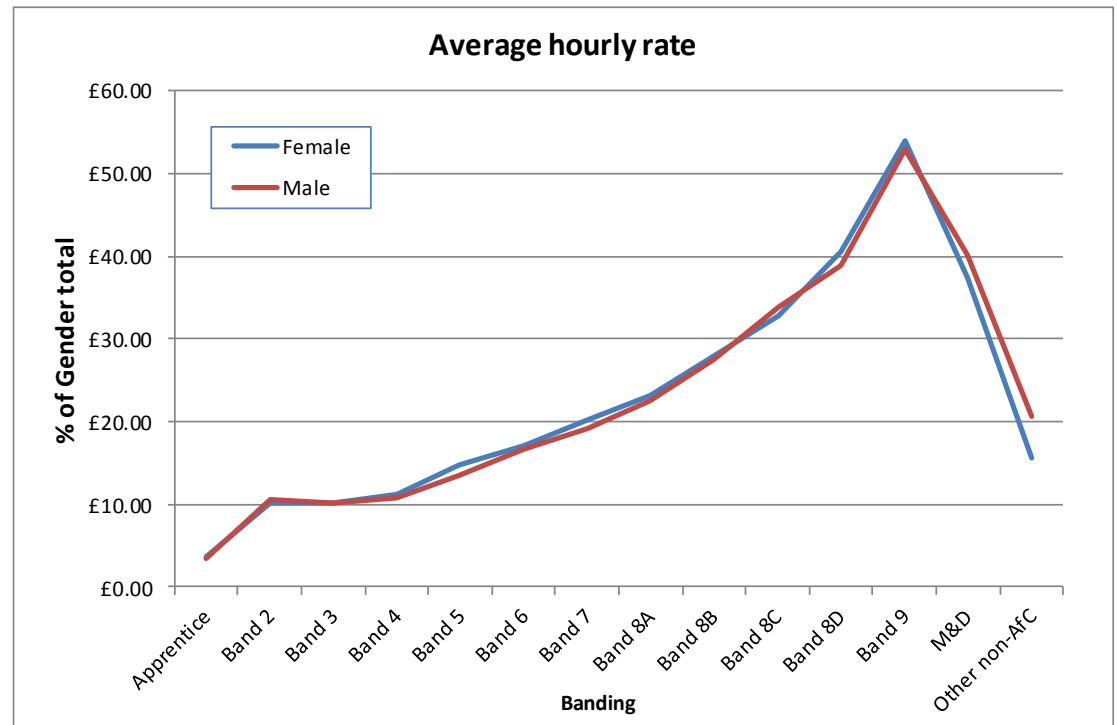
Accordingly, graph 1.6 below illustrates that the hourly rates within each Banding are relatively uniform across both genders and show no significant anomalies. This is the result we would expect in an equal pay environment.

Medical & Dental and **other non-AfC** : These groups show some minor fluctuations between genders, but these categories contain a number of roles with varying banding ranges compounded by a smaller headcount.

Apprentices : This group shows another minor variance, however, all apprentices are paid the same amount during their first 12 months, but those completing an 18 month apprenticeship will uplift to minimum wage for their final 6 months.

	Avg. Hourly Rate (Mean)			
	Male	Female	Difference	Pay Gap %
Apprentice	£3.40	£3.74	-£0.34	-9.91%
Band 2	£10.48	£10.13	£0.36	3.40%
Band 3	£10.14	£10.15	-£0.01	-0.12%
Band 4	£10.72	£11.15	-£0.43	-4.02%
Band 5	£13.52	£14.72	-£1.20	-8.89%
Band 6	£16.74	£17.00	-£0.25	-1.52%
Band 7	£19.09	£20.27	-£1.18	-6.20%
Band 8A	£22.55	£23.15	-£0.60	-2.66%
Band 8B	£27.54	£27.88	-£0.34	-1.24%
Band 8C	£33.91	£32.80	£1.11	3.28%
Band 8D	£38.86	£40.59	-£1.72	-4.44%
Band 9	£52.79	£53.91	-£1.12	-2.12%
M&D	£40.01	£37.29	£2.71	6.79%
Other non-AfC	£20.68	£15.68	£5.00	24.17%
Total	£16.06	£14.60	£1.47	9.13%

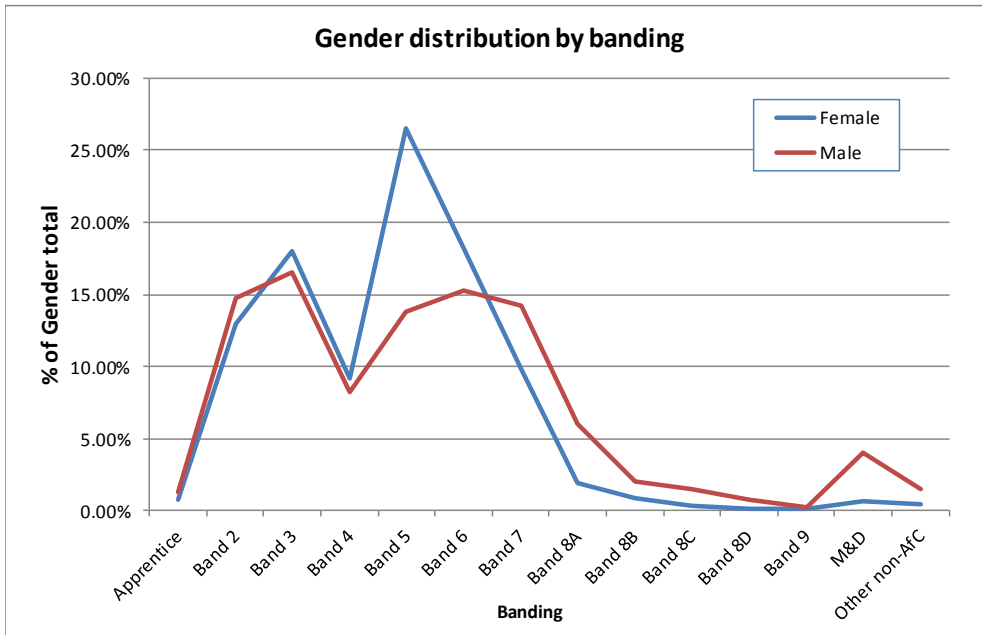
Table 1.5 - Average hourly rate by gender by band



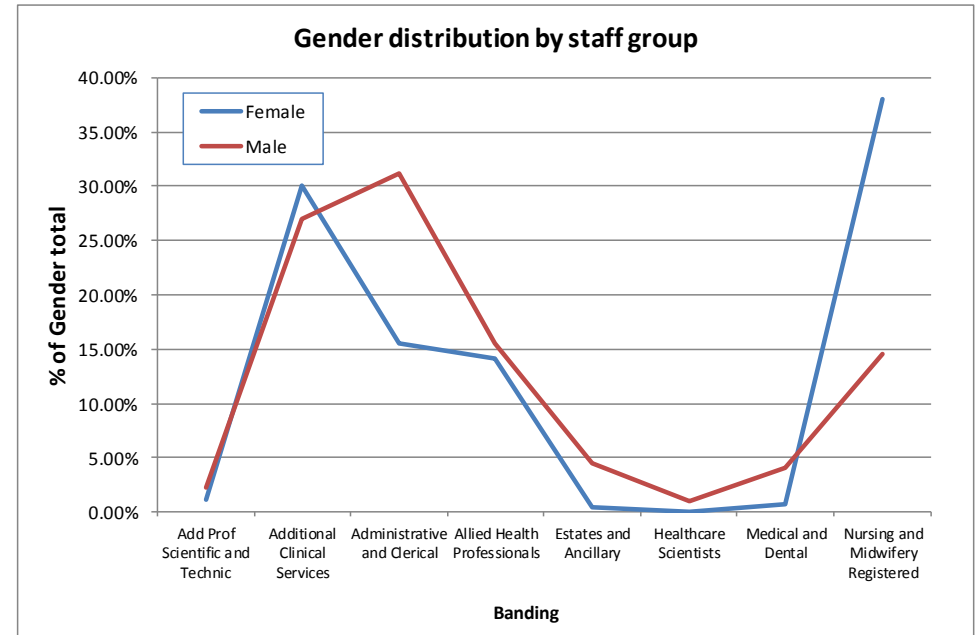
Graph 1.6 - Average hourly rate by gender by band

Ordinary Pay - Gender Distribution

Graphs 1.7 and 1.8 show the gender distribution across the organisation broken down by banding and staff group. Both charts give a clear indication on the gender mismatch which is causing the variance in gender average pay.



Graph 1.7 - Gender distribution by band



Graph 1.8 - Gender distribution by staff group

Ordinary Pay – Recruitment

On commencing employment with an NHS Trust, a successful applicant can carry across their AfC spinal pay point from a previous NHS employment, meaning they could be placed higher on the Banding scale than an NHS newcomer. If this were to happen then slight variations in the pay gap within each band could be apparent.

Table 1.9 details those employees who started working with NCH&C during 2016/17 and the proportion of each gender which were placed at the Lower, Mid or Upper level of each Banding scale. Table 1.10 details the average length of continuous NHS service broken across each banding and gender.

For Bands 3,4,5 and 7 a higher proportion of female staff members start on the Upper part of their banding scale in comparison to males. This combined with females having a longer length of continuous service, indicates that experienced females are moving between Trusts more prevalently than males at this level. Band 6 roles contradict this trend, but it should be noted that there are 8 times as many females in this pay group than males, meaning that small variations in the male workforce can dramatically affect the proportions. Overall, a higher proportion of males are starting employment with NCH&C at the bottom of their payscale, and also tend to have shorter NHS service than females.

	Male : starting point on Band			Female : starting point on Band		
	Lower	Mid	Upper	Lower	Mid	Upper
Apprentice	-	-	-	-	-	-
Band 2	50.00%	0.00%	50.00%	80.65%	3.23%	16.13%
Band 3	57.14%	28.57%	14.29%	9.43%	67.92%	22.64%
Band 4	100.00%	0.00%	0.00%	66.67%	4.17%	29.17%
Band 5	62.50%	18.75%	18.75%	57.02%	8.26%	34.71%
Band 6	33.33%	0.00%	66.67%	43.24%	10.81%	45.95%
Band 7	50.00%	33.33%	16.67%	21.74%	17.39%	60.87%
Band 8A	100.00%	0.00%	0.00%	57.14%	0.00%	42.86%
Band 8B	66.67%	0.00%	33.33%	100.00%	0.00%	0.00%
Band 8C	0.00%	0.00%	100.00%	0.00%	0.00%	100.00%
Band 8D	-	-	-	-	-	-
Band 9	-	-	-	0.00%	0.00%	100.00%
M&D	-	-	-	-	-	-
Other non-AfC	-	-	-	-	-	-
Total	60.78%	13.73%	25.49%	47.16%	18.73%	34.11%

Table 1.9 - Starting spine point by band

	Avg. Length of Service (yrs)	
	Male	Female
Apprentice	1.07	0.56
Band 2	5.94	8.77
Band 3	8.38	9.39
Band 4	8.00	11.32
Band 5	7.33	9.29
Band 6	10.42	11.73
Band 7	12.19	16.65
Band 8A	14.09	13.98
Band 8B	10.00	16.87
Band 8C	11.66	15.45
Band 8D	13.49	22.63
Band 9	12.17	5.93
M&D	12.79	12.18
Other non-AfC	3.82	4.60
Total	9.23	10.75

Table 1.10 - Average NHS continuous service by band

Bonus Pay Analysis

- Whilst NCH&C doesn't make specific payments in regards of bonuses it does award payments for clinical excellence. The Clinical Excellence Awards (CEA) scheme is intended to recognise and reward those consultants who contribute most towards the delivery of safe and high quality care to patients and to the continuous improvement of NHS services. This includes those consultants and senior academic GPs who do so through their contribution to academic medicine. For the *purpose of this return these awards are classed as bonuses*.

Table 1.11 shows the Average and Median bonus payments made on the snapshot date and table 1.12 shows the quartile split of the workforce who received a bonus.

Gender	Avg. Bonus	Median Bonus
Male	£4,475.38	£2,970.28
Female	£6,780.50	£8,950.75
Difference	-£2,305.12	-£5,980.47
Pay Gap %	-51.51%	-201.34%

Table 1.11 - Average bonus by gender

Quartile	Female	Male	Female %	Male %
Lower	1	1	50.00%	50.00%
Lower middle	0	1	0.00%	100.00%
Upper middle	1	0	100.00%	0.00%
Upper	1	0	100.00%	0.00%

Table 1.12 - Gender breakdown by bonus quartile

Clinical excellence awards can only be given to staff members in the appropriate medical post and there are only 5 staff members in the organisation who received these bonuses. Therefore, due to small size of the staff group and the varying award amounts, no meaningful assumptions can be made.

Conclusion

From the attached analysis it can be seen that:

- Bands 7 - 8D : Higher proportion of males in Admin & Clerical roles. Further analysis has shown these roles sit mainly within Corporate services, specifically management and qualified positions.
- Bands 5 - 6 : Higher proportion of females, specifically qualified nursing posts in comparison to the male workforce.
- Medical & Dental : Higher proportion of males in medical roles.
- Whilst the lower middle and upper middle earning quartiles have a lower proportion of males in post, the upper quartile offsets this and drives the Average salary of males higher than that of females

Within NCH&C, there are more females (headcount) in the organisation employed in every banding group than males. However, males have a higher average hourly rate due to a higher proportion in higher banded roles in comparison to the overall gender group, these roles fall specifically in admin & clerical mainly within Corporate services.

Females have a higher proportion in Band 5 and Band 6 due to the higher proportion of qualified female nurses than males. In addition, it's also possible that females at a Band 5 level are moving between Trusts and maintaining their Banding spine point more prevalently than males. Whilst this portability may cause a slight imbalance in the Gender Pay Gap analysis within each banding, the graph on page 5 doesn't support any underlying issues.

Gender	Registered Nursing 2016/17		Registered Nursing 2017/18 (ytd)	
	Shortlisted	Appointed	Shortlisted	Appointed
Male	7.26%	3.30%	9.40%	21.15%
Female	92.74%	96.70%	90.60%	78.85%
Total	100.00%	100.00%	100.00%	100.00%

Table 1.13 - Recruitment breakdown

In support of our current position, table 1.13 shows the percentage of shortlisted and appointed applicants throughout 2016/17 and 2017/18 year to date for Registered Nursing. In 2016/17, 7.26% of shortlisted applicants were males, however, only 3.30% were appointed. In comparison, during 2017/18, 9.40% of shortlisted applicants were males, whilst 21.15% were then successful. This shows a dramatic swing over the past 2 years, and accordingly over time, would

positively influence the Gender Pay Gap if the trend continues.

Medical and dental has a higher proportion of males than females which has traditionally been the case, however, on a headcount basis there are still more females in this group. This group is very small in comparison to an acute setting, therefore, small variations in gender will have a significant impact on the Gender Pay Gap analysis.

Further Actions

Some of the Actions that the Trust is already undertaking, such as talent mapping, will support closing the current gap. The Trust will continue to promote its equal opportunities policies to support women returning to the workplace, as well as supporting policies such as shared parental leave.

- As part of the review of the Trust's OD strategy, there is an intention to look at how senior managers are recruited, using a wider range of recruitment techniques than currently utilised, to check for unconscious bias or "cloning".
- One of the challenges that the Trust will face going forward is its flat senior management structure with the resultant lack of opportunity for development and available senior roles
- Further drives will be made to challenge traditional career stereotypes within the NHS, through our talent for care team, to encourage more males to take up Band 2 to 5 roles. Due to the smaller group size of males, a small shift in headcount distribution will have a significant effect on the GPG results at the lower end.
- We will ensure that all panel members who participate in the evaluation of CEA award applications undertake gender bias training prior to sitting on any panels