

Oxleas NHS Foundation Trust

Gender pay gap report 2019/20

1. What is the gender pay gap report?

Gender pay reporting is different to equal pay which deals with pay difference between men and women who carry out the same jobs, similar jobs or work of equal value.

The gender pay gap shows the difference in the average pay between all men and women in the workforce. If the pay gap is higher, it can indicate that there may be issues to deal with, and the various calculations may help to identify what those issues are.

Oxleas NHS Foundation Trust is committed to promoting equality and inclusion. Our current gender split within the overall workforce is 78.2% female and 21.8% male. We promote a range of options to support flexible working solutions for all our staff.

The NHS terms and conditions of service handbook, contains the national agreements on pay and conditions of service for NHS staff, other than very senior managers and medical staff. Job evaluation enables posts to be matched to national job profiles; or allows trusts to evaluate jobs locally, and determine in which Agenda for Change pay band a post should sit.

The only pay elements we have that fall under the “bonus” pay criteria are Clinical Excellence Awards that are only applicable to medical consultants in accordance with the Medical and Dental Consultant contract. The Clinical Excellence Awards 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 the NHS. There is a rigorous application and decision process to determine the award, if any, for any consultant applicant.

2. Progress since 2018-19

The data for the year ending 31 March 2020 shows that the average pay difference has reduced slightly and the average and median bonus difference has reduced significantly.

	2017-18	2018-19	2019-20	Trend
Average pay difference	13.51%	13.73%	13.07%	
Median pay difference	9.29%	10.54%	12.28%	
Average bonus difference	44.40%	49.40%	35.44%	
Median bonus difference	32.32%	66.67%	9.24%	

**the data shows the percentage by which women are paid less than men.*

The bonus is the Clinical Excellence Award that 76 staff who are doctors are eligible to apply for.

3. Results – March 2020

The figures in section 2 are for the average over the year. When looking at the position for the month of March there is a further improvement, particularly in the median hourly rate.

3.1 Gender pay gap as a mean (average)

	Male	Female	% difference
Mean Hourly rate	£21.22	£18.44	13.06%

3.2 Gender pay gap as a median (half way point comparing the full salary range)

	Male	Female	% difference
Median Hourly rate	£18.54	£16.98	8.44%

3.3 Proportion of males and females ordered from lowest to highest pay, when divided into four groups

	Male	Female
Lower	16.26%	83.74%
Lower mid	21.23%	78.77%
Upper mid	19.35%	80.65%
Upper	28.29%	71.71%

3.4 Bonus (Medical clinical excellence award) gender pay gap as a mean (average)

	Male	Female	% difference
Mean bonus payment	£8783.28	£5670.42	35.44%

3.5 Bonus (Medical clinical excellence award) gender pay gap as a median (mid-point amount)

	Male	Female	% difference
Median bonus payment	£5278.03	£4790.43	9.24%

3.6 Proportion of male and female medical staff receiving a Clinical Excellence Award

	Male	Female
Proportion of eligible medical staff receiving a bonus	37%	33%

4. Summary of results and next steps

It is encouraging to note that there is an improvement on the overall difference when calculated on the mean (average). This is indicative of a continued positive direction of travel with regards to representation of women in senior roles within Oxleas. When the medical workforce is excluded, the pay differential for women changes from 13.07% on average to 7.16%. We are conscious that work must continue to improve this further.

Although we are conscious of the continued disparity in relation to Clinical Excellence Award payments that apply only to the smaller medical consultant workforce, we are very encouraged by the improvement in this area as well. The medical consultant workforce that is eligible to apply for the clinical excellence awards in any year only accounts for 70% of the consultant workforce and 1.8% of the total workforce. These small numbers can result in the pay differential appearing starker.

Our Board remains committed to creating inclusive environments where our staff are truly representative of our population at all levels, and in all professions. Our Equality and Human Rights strategy includes objectives to create a more equitable, diverse workforce through:

- Supporting a voice for staff with protected characteristics (staff networks)
- Promoting understanding between staff with diverse cultures, religions, sexual orientation and lived experience
- Providing learning and development opportunities linked to equality and human rights
- Ensuring that Reasonable Adjustments are provided so that job applicants and staff with disabilities and lived experience are able to fulfil their potential
- Supporting career development for staff who have traditionally experienced barriers, in particular BAME staff, disabled staff, LGBT+ staff and staff with lived experience

Actions in 2020/21 include:

- Develop guidance for staff and managers on religion and belief in the workplace
- Develop a 'Wellbeing at work passport' that enables staff who have a disability, or long-term condition or who are carers or have a religion or belief to agree with their manager what adjustments and support are needed
- Developing a menopause policy and guidance for managers and staff
- Develop a programme of cultural intelligence and inclusive leadership training and support aimed at managers