

# Gender Pay Gap Reporting

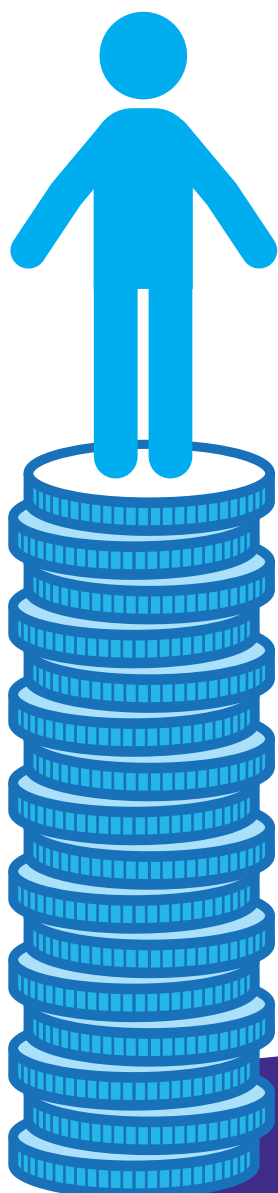
March 2022

## Introduction

University Hospitals of Leicester NHS Trust are committed to providing outstanding patient care and we do this by ensuring we have diverse, talented and high performing workforce.

As part of this commitment we will ensure everyone, regardless of background can contribute to creating an inclusive and compassionate culture and that gender equity is considered at each stage of the employee life cycle.

We will enable UHL to fulfil this ambition through our Becoming the Best Quality Strategy and our People Plan.



Gender Pay Gap legislation, introduced in April 2017, requires all employers with 250 or more employees to publish the gender pay gap of those in scope annually. The legislation requires employers to carry out seven calculations that show the difference between the average earnings of men and women in the hospital.

The gender pay gap is different to equal pay. Equal pay deals with the pay differences 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 average pay between men and women.

We are committed to ensuring that our pay practices are transparent, fair and equitable. The Trust has adopted and implemented national NHS pay schemes which have undergone an equality analysis.

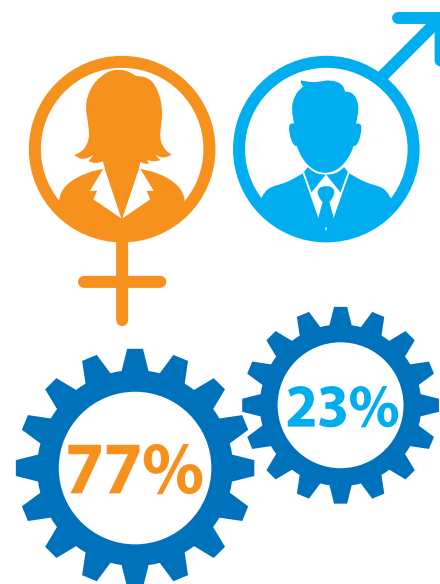


## Our Workforce

Every job at UHL is evaluated and placed within a grade. Grades vary by level of responsibility and each grade has a specific pay range and clinical and non-clinical staff will progress through the pay range as staff develop their careers.

Some of our employees are appointed on fixed rate salary such as our apprentices.

Analysis of our internal equality data indicates that: 76.67% of our workforce are women and 23.33% of our workforce are men.



## Gender Pay Gap

This report details our headline pay gap figures as at 31 March 2021, a brief analysis of why we have a pay gap and an overview of our actions to close the gap.

Our Gender Pay Gap Mean 27% (29% 2020) Median 13% (15% 2020)

The Gender Pay Gap is defined as the difference between the **mean** or **median** hourly rate of pay of men and women.

The **mean** gender pay gap is the difference between the average hourly earnings of men and women.

The **median** hourly pay gap is the **difference between the midpoints** in the ranges of hourly earnings of men and women. Pay excludes payments overtime but includes enhancements for shifts and weekend working.

Our mean gender pay gap is 27% (an improvement of 2%, on the previous year) and is calculated on the basis of earnings as at the pay period which includes the 31.03.21.

Our median gender pay gap is 13% (an improvement of 2%, on the previous year.)

This suggests that our pay gap is impacted by the highest (male) earners in the organisation.



**Mean 27% (29% 2020)**  
**Median 13% (15% 2020)**

## Why do we have a gender pay gap?

The main reason for the gender pay gap is an in-balance in the numbers of men and women across the whole workforce with proportionately more men in the upper quartile than other quartiles.

The Medical Consultant workforce is predominantly men (65%) and Consultants are in the highest paid group of staff - this difference is influencing the gender pay gap.

We expect this to change over time as there are now more women students in medical

schools than men whereas historically there were significantly more male medical students than female.

The gender pay gap for the medical and dental workforce overall is 13.18% (14.11% in 2020) which suggests a lack of pay consistency but an improving position. The bonus analysis shows fewer women receive Clinical Excellence Awards than men, and the value of these is also less for women as they are more likely to work part time.

Healthcare scientists, qualified nursing and midwifery staff and allied health professionals is predominantly comprised of women.

For administration and clerical staff we have a pay gap of 19% (23% in 2020). This is attributable to the disproportionate number of women in the most junior roles.

## Bonus Gap

### Proportion of men and women receiving a bonus

At University Hospitals of Leicester NHS Trust only medical Consultants receive a payment that must be classed as a bonus. The payments are called 'Clinical Excellence Awards' and come from the national contract for Consultants, plus a separate local scheme. These awards are paid on a pro rata basis linked to how many hours a week each Consultant works for the Trust.

UHL employs 784 Consultants - 35% were women in March 2021 - an increase of 1% since March 2020.

Proportion of employees who were paid a bonus by gender:

In 2021, following national guidance, local Clinical Excellence Awards were issued to all eligible consultants on an even distribution basis. This has meant this year and

last year that more people have been in receipt of a bonus.

1.6% of women received an Award (Bonus) pay compared to 10.02% of men.

This helps to explain the whole workforce mean bonus pay gap of 30% (last year 31%) and median 0% (last year 50%)

### 'Bonus' Pay Gap

**Mean 30%**  
(31% last year)

**Median 0%**  
(50% last year)



### Staff Receiving 'Bonus'



**1.6% females**  
**2021**  
(0.74% last year)

**10.02% males**  
**2021**  
(5.86% last year)

## Pay Quartiles

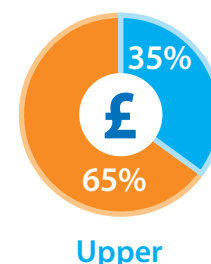
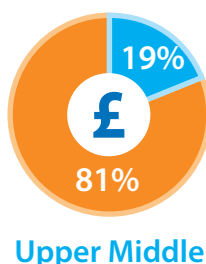
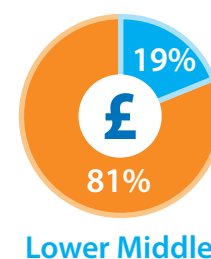
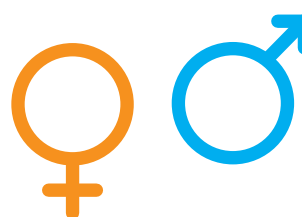
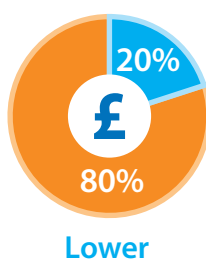
### Proportion of men and women in each pay quartile

77% of our workforce are women which mirrors the NHS as whole (76.7% published March 2021) showing that our workforce profile is reflective of the national workforce.

The infographic below shows the proportion of men and women employees within our workforce as at 31st March 2021 in four quartile pay band; lower, lower middle, upper middle and upper.

In order to complete the calculations UHL is required to list all employees along with their gender in order of lowest hourly to highest hourly rate of pay.

### Hourly Pay Quartiles



The lowest pay quartile is 80% (80% in 2020) women and 20% men (20% in 2020).

The highest pay quartile is 65% women (61% in 2020) and 35% men (39% men in 2020)

Since the lower middle and upper middle quartiles are 81% female and 19% male, the gender pay gap is principally driven by the differences in the upper quartile.

# Closing the Gap

We aim to achieve a gender balance across our workforce as a whole, as well as at the most senior levels of our Trust. This will make a significant contribution to the reduction in

gender pay gaps and gender occupational segregation across some of our staff groups.



## In terms of progress we have:

- Refreshed our flexible working policy and established a work stream group to develop and take forward the NHS People Promise commitments around flexibility and agile working.
- Developed and communicated a support framework for women going through the menopause as part of our Health and Wellbeing support offer.
- Committed to always trying to ensure gender balance on recruitment panels.
- Ran a week long programme of events, involving wider networks, which was opened by the CEO, to showcase women at work across UHL, which was positively received and evaluated. Attended by inspirational leaders from the system, region and national teams.
- Established a women's network, reflecting feedback gained from the week long programme.

## For 2022/23 we will take further actions to reduce the pay gap:

- Given previous commitment around representative panels we will seek to monitor and feedback areas for improvement
- Investigate opportunities to increase representative balance at all levels for flexible working practices e.g. part time, job share
- Address any gender issues within our talent pipeline and actively promote participation in the High Potential scheme which aims to identify talented individuals who can progress into senior leadership roles
- Promote a Women in Medicine Network
- Design and conduct a series of focus groups with women doctors to identify and understand any barriers to career progression
- Establish a senior champion at Trust Board for gender equality
- Ensuring that our active bystander programme responds to any behavioural concerns arising from feedback mechanisms such as, Your Voice, Freedom to Speak Up.

The actions above are aligned to our Trust EDI Strategic Plan.

Joanne Tyler-Fantom  
Acting Chief People Officer

