

Meeting title:	People & Culture Committee
Date of the meeting:	27 March 2025
Title:	Gender Pay Gap Report
Report presented by:	Zoe Marsh, Deputy Chief People Officer
Report written by:	Sandy Zavery, Head of Equality, Diversity, and Inclusion Zoe Marsh, Deputy Chief People Officer

Action – this paper is for:	Decision/Approval	X	Assurance	X	Update	
Where this report has been discussed previously	Trust Leadership Team 25 March 2025.					

To your knowledge, does the report provide assurance or mitigate any significant risks? If yes, please detail which
BAF Risks – 10-People, 1-4 “Looking after our People, developing workforce capability and a compassionate and inclusive culture”.

Impact assessment
The impact would be on staff recruitment and retention and staff moral; ultimately leading to poor service delivery and potentially financial, reputation and legal implications.

<p>Acronyms used include:</p> <p>Gender Pay Gap (GPG),</p> <p>Ethnicity Pay Gap (EPG)</p> <p>Disability Pay Gap (DGP)</p> <p>Public Sector Equality Duty (PSED)</p> <p>Workforce Race Equality Standard (WRES)</p>
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Purpose of the Report

The purpose of this report is to present the Trust's position against Gender Pay Gap (GPG) requirements for the period 2023 – 2024, ensuring that we meet our legal and moral duties under the Equality Act 2010.

Recommendation

PCC members are asked to:

- Receive and note the content of the report.

1. Introduction

The Gender Pay Gap (GPG) reporting regulations were introduced in 2017 to reduce and eliminate pay differences between males and females. Deadline for publication is 30th March each year.

The report provides reassurance of our commitment to meet statutory requirements and improve equity for the men and women who work for the Trust.

For the first time this year, we have also included data broken down by part-time and full-time positions in the Trust.

The GPG calculations are measured against six key area. The data is drawn from the national Electronic Staff Record (ESR) system and provides a snapshot of pay positions by gender as of 31 March 2024 (please see the key findings below).

Key Findings

UHL has a gender pay gap in favour of men. For instance, median hourly pay for women was £16.62 compared to £18.10 for men, resulting in a percentage pay gap in median hourly pay of +8.2%.

This pay gap is driven by two key areas.

- an underrepresentation of women in medical and dental roles (particularly at consultant level), and.
- an underrepresentation of women at band 5 and above in administrative and clerical roles (particularly women who work part-time).

Headline metrics, snapshot date 31st March:

Gender pay gaps in mean and median hourly pay.

- pay gap in mean hourly pay: +27.1%
- pay gap in median hourly pay: +8.2%

Gender pay gaps in mean and median annual bonus pay.

- pay gap in mean annual bonus pay: +33.8%
- pay gap in median annual bonus pay: 0.0%

Proportions of men and women in receipt of bonus pay.

- men: 8.81%
- women: 1.68%

Proportions of men and women within each quartile pay band.

- Top quartile: women 63%, men 37%
- Upper-middle quartile: women 83%, men 17%
- Lower-middle quartile: women 77%, men 23%
- Bottom quartile: women 77%, men 23%

In previous years, separate action plans have been produced for Gender Pay Gap, WRES and WDES alongside a wider EDI action plan. From 2025, we will have one EDI action plan, that contains the delivery plan to meet the ambitions set out within our impending Trust Equality Diversity and Inclusion Strategy 2025-2030. The actions contained within this plan, set to achieve workforce equality driven by our data against our Gender Pay Gap, WRES, WDES and Staff Survey.

Summary

The Trust is committed to improving the experiences of staff. Our focus for the year ahead will be to cultivate an ethos of on-going improvements through the implementation of initiatives as part of the People Strategy, 'A Great Place to Work and EDI Strategy, together we can, create a sense of belonging for all strategy.

University Hospitals of Leicester NHS Trust: Gender Pay Gap Report based on a snapshot date of 31st March 2024

Background to the gender pay gap analyses

The Gender Pay Gap Regulations (2017 update to the Equality Act 2010) introduced an annual requirement for listed public authorities and private sector organisations with 250 or more employees to publish information relating to the difference between the pay of female and male employees:

1. the difference between the mean hourly rate of pay of male full-pay relevant employees and that of female full-pay relevant employees;
2. the difference between the median hourly rate of pay of male full-pay relevant employees and that of female full-pay relevant employees;
3. the difference between the mean bonus pay paid to male relevant employees and that paid to female relevant employees;
4. the difference between the median bonus pay paid to male relevant employees and that paid to female relevant employees;
5. the proportions of male and female relevant employees who were paid bonus pay;
6. and the proportions of male and female full-pay relevant employees in the lower, lower-middle, upper-middle and upper quartile pay bands.

A “relevant employee” is a person who is employed on the snapshot date; whilst a “full-pay relevant employee” means a relevant employee who is not, during the relevant pay period, being paid at a reduced rate or nil as a result of the employee being on leave.

Main finding

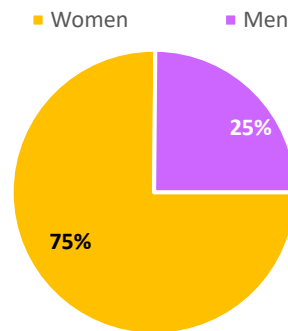
University Hospitals of Leicester NHS Trust has a gender pay gap in favour of men. For instance, median hourly pay for women was £16.62 compared to £18.10 for men, resulting in a percentage pay gap in median hourly pay of +8.2%. This pay gap is driven by an underrepresentation of women in medical and dental roles (especially at consultant level), and an underrepresentation of women at band 5 and above in administrative and clerical roles (especially women who work part-time).

An overview of University Hospitals of Leicester NHS Trust’s workforce at 31st March 2024

This section provides the context for the gender pay gap metrics which follow in subsequent sections. University Hospitals of Leicester NHS Trust’s (UHL) workforce included 19,495 full-pay

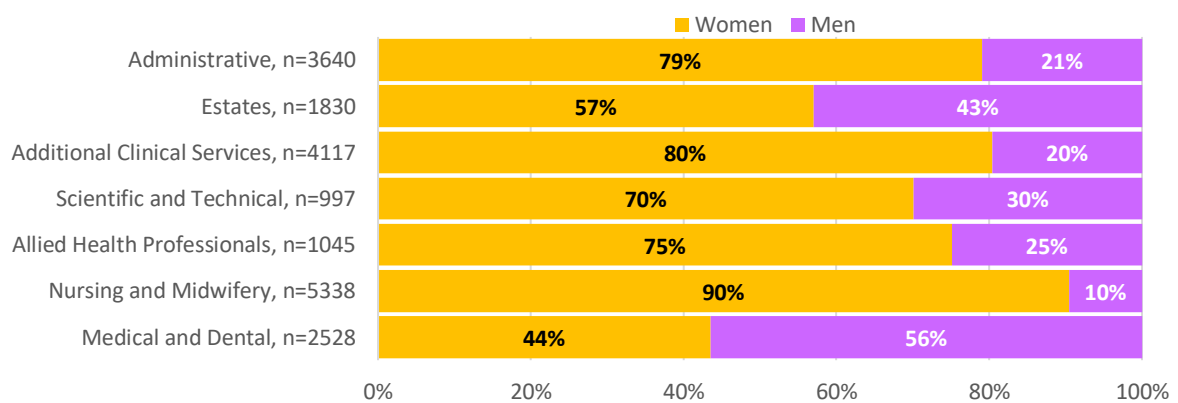
relevant employees for the purposes of Gender Pay Gap reporting as at 31st March 2024. Approximately three-quarters of the workforce were women (Figure 1).

Figure 1: The representation of men and women amongst full-pay relevant employees at UHL, 31st March 2024



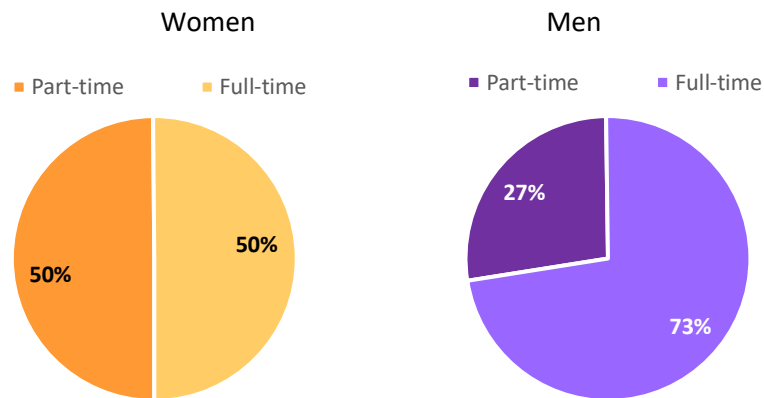
The overall Gender Pay Gap metrics reported to central government do not consider whether the men and women contributing to the metrics undertake like-for-like work. It is necessary to consider the different types of work undertaken when attempting to interpret any pay gaps. The gender profile of UHL's workforce varied by occupational group. For instance, women made up 90% of the nursing and midwifery workforce, but only 44% of the medical and dental workforce (Figure 2).

Figure 2: Variations in the representation of men and women by occupational group, full-pay relevant employees at UHL, 31st March 2024



The need for, and availability of, flexible working can also influence the type of work that men and women undertake. Thus, an understanding of working patterns in different roles is also important for the interpretation of pay gaps. Within UHL's workforce, women were 1.8 times more likely than men to work part-time, with 50% of women in part-time roles compared to 27% of men (Figure 3).

Figure 3: The percentages of men and women working part-time and full-time, full-pay relevant employees at UHL, 31st March 2024



Gender pay gaps in mean and median hourly pay

A positive pay gap indicates that men earn more than women, whilst a negative pay gap indicates that women earn more than men.

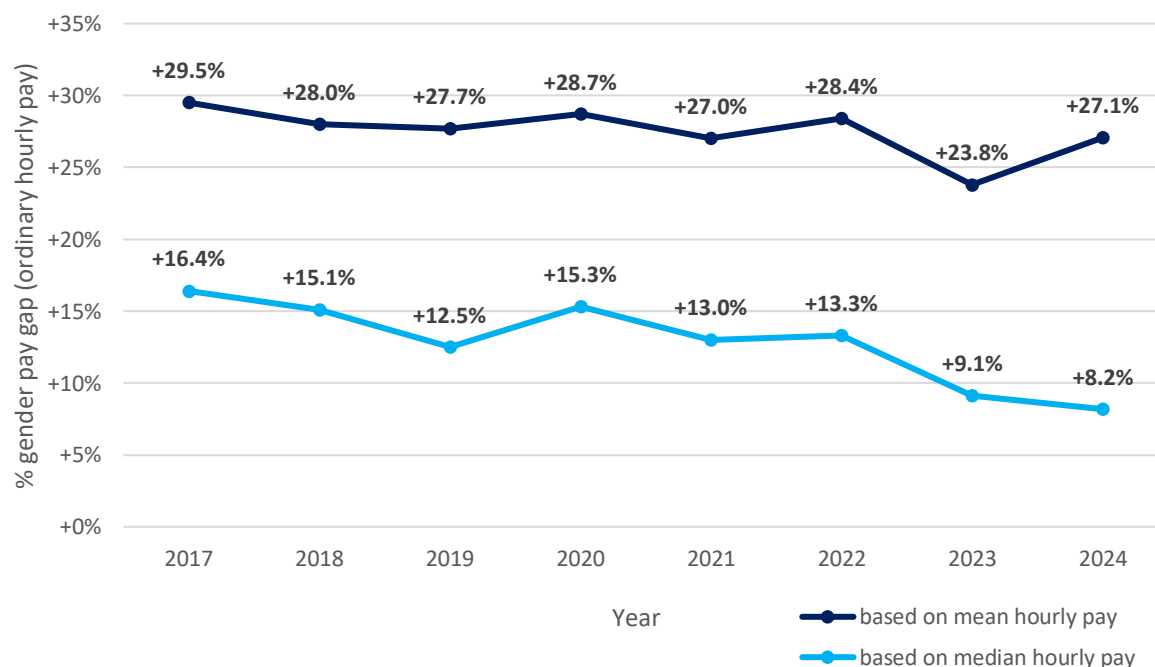
At March 2024, there was a Gender Pay Gap in favour of men in terms of both mean and median ordinary hourly pay:

- **pay gap in mean hourly pay: +27.1%**
- **pay gap in median hourly pay: +8.2%**

Mean hourly pay for women was £19.00 (standard deviation £11.25) compared to £26.05 for men (standard deviation £20.58). Meanwhile median hourly pay for women was £16.62 (the middle 50% of women, earned between £12.75 and £21.80 per hour, this is referred to as the interquartile range) compared to £18.10 for men (interquartile range £13.02 to £29.36).

The gender pay gap in mean hourly pay at UHL has decreased from +29.5% at March 2018 (the first GPG reporting date) to +27.1% at March 2024, following a broadly downward trend with positive and negative fluctuation in the intervening years. There was a sharp decrease from +28.4% at March 2022 to +23.8% at March 2023, with an increase to +27.1% at March 2024. Similarly, the gender pay gap in median hourly pay at UHL has decreased from +16.4% at March 2017 to +8.2% at March 2024, again following a broadly downward trend with positive and negative fluctuation in the intervening years. (Figure 4.)

Figure 4: Gender pay gaps in mean and median hourly normal pay at UHL, 2017 to 2024

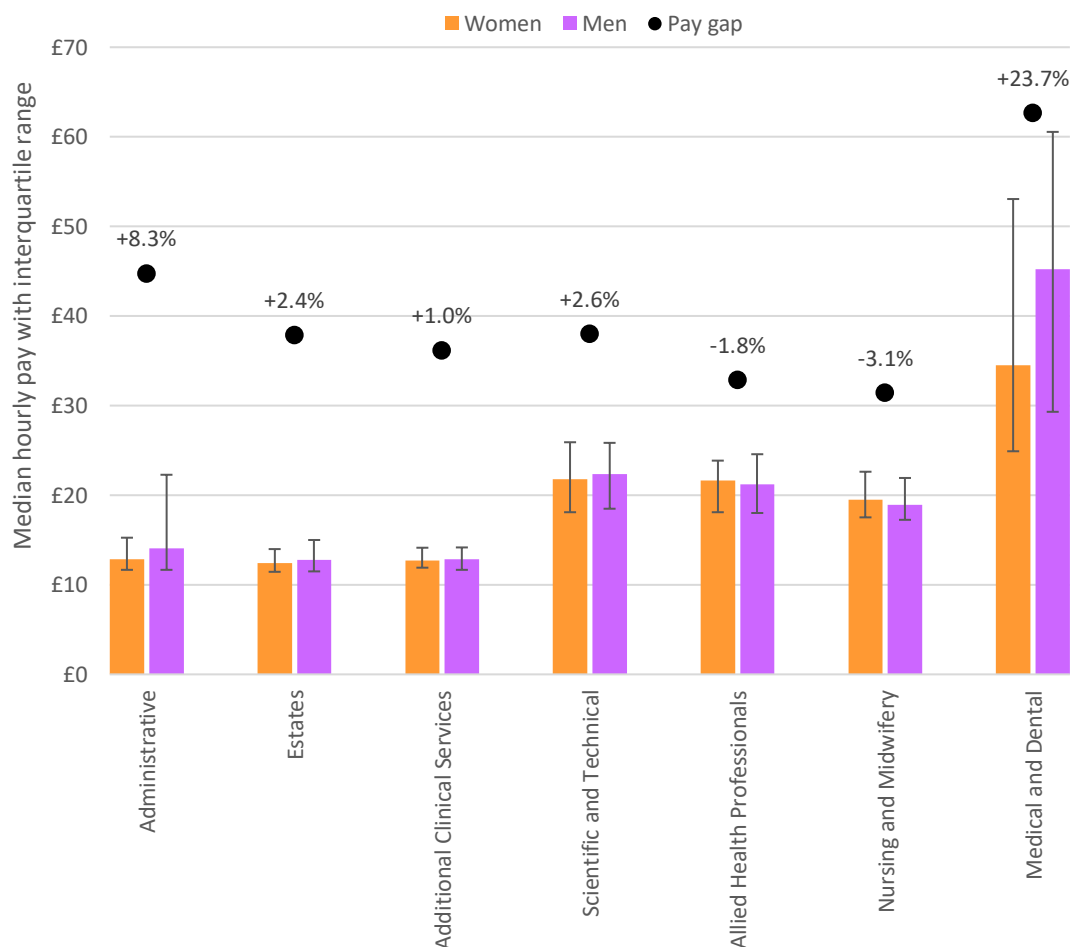


The percentage pay gaps reported here can be difficult to interpret, as they do not consider whether the men and women being compared undertake like-for-like work. (The presence of a pay gap does not necessarily indicate gender bias, and the absence of a pay gap cannot be taken as assurance of the absence of gender bias, other factors such as differing job roles can have an influence.) Below, further exploration of the gender pay gap was undertaken by occupational group.

When interpreting pay distributions, median pay usually offers the better estimate of the typical level of pay for a given group. The median level of pay is the “middle” pay value when every individual’s hourly pay within a given group is sorted, for example, from highest to lowest. By contrast, mean hourly pay can be skewed upwards by especially high levels pay for some individuals within the group. The mean level of pay gives highly paid individuals greater weight in determining the mid-point of pay for the group. Thus, further exploration of the gender pay gap will concentrate on median hourly pay.

The largest gender pay gaps in median hourly pay were present amongst those in administrative and clerical roles, +8.3%, and amongst those in medical and dental roles, +23.7% (both in favour of men). (Figure 5.)

Figure 5: Gender pay gaps in median hourly normal pay at UHL, and median levels of pay for men and women by occupational group, 31st March 2024

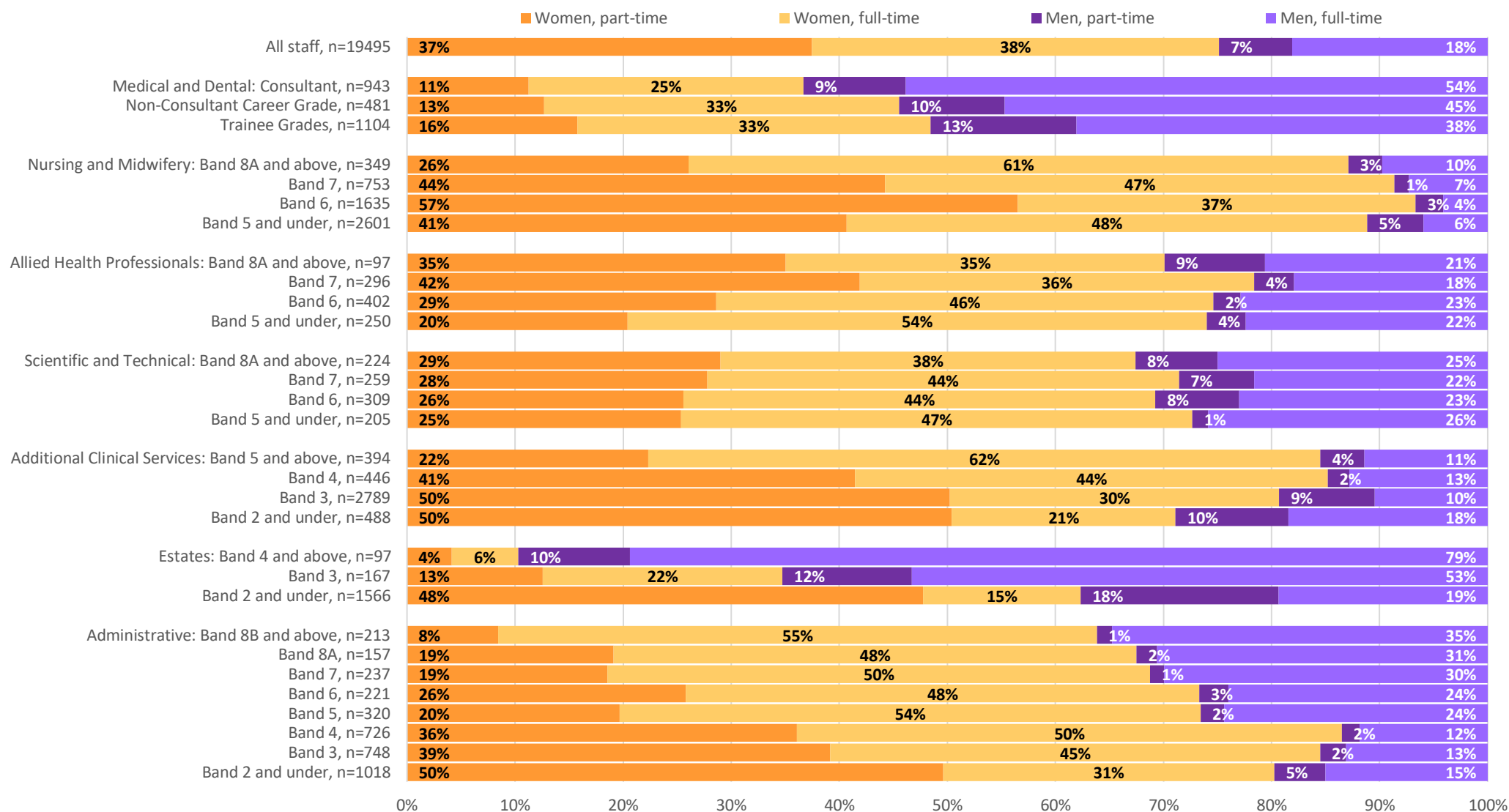


A greater understanding of the factors driving these pay gaps can be obtained by looking at the percentage representation of men and women, in part-time and full-time roles, at each level of pay, in each occupational group. Necessarily, pay gaps in favour of men are largest where women are underrepresented at higher pay grades, in occupations where pay at senior levels is relatively high, and where relatively large numbers of women are affected. This pattern occurs in both the administrative and clerical profession and in the medical and dental profession (Figure 6).

In administrative and clerical roles, women made up 79.1% of staff. However, the level of representation for women drops from 83.3% at band 4 and under to 69.9% at band 5 and above. This equates to 106 fewer women working in administrative and clerical roles at band 5 and above than would be expected if women were represented at 79.1% at all levels. It is noted that this underrepresentation affects, in particular, women who work part-time. Overall, women who work part-time made up 34.9% of administrative and clerical staff. However, the level of representation for women who work part-time in administrative and clerical roles drops from 42.5% at band 4 and under to 18.5% at band 5 and above.

Meanwhile, in medical and dental roles, women are underrepresented amongst consultants. Overall, women made up 43.5% of medical and dental staff. However, the level of representation for women drops from 47.6% below consultant level to 36.7% amongst consultants. This equates to 64 fewer women at consultant level than would be expected if women were represented at 43.5% at all levels.

Figure 6: The representation of men and women working part-time and full-time at UHL, by pay band and occupational group, 31st March 2024



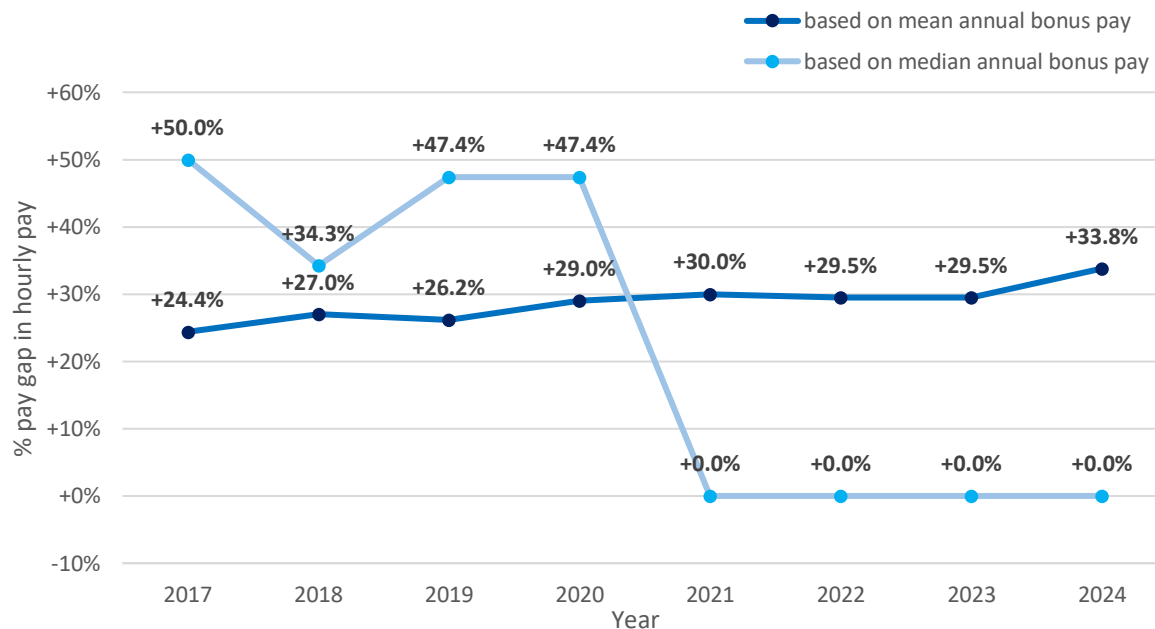
Gender pay gaps in mean and median annual bonus pay

For the 2023/24 financial year, there was a Gender Pay Gap in favour of men in terms of mean annual bonus pay, and no pay gap in terms of median annual bonus pay:

- **pay gap in mean annual bonus pay: +33.8%**
- **pay gap in median annual bonus pay: 0.0%**

Almost all bonus payments (99.6%) were in the form of clinical excellence awards. Clinical Excellence Awards are made only to eligible medical consultants. Successful applicants would have the award paid annually.

Figure 7: Gender pay gaps in mean and median annual bonus pay at UHL, 2017 to 2024



Proportions of men and women in receipt of bonus pay

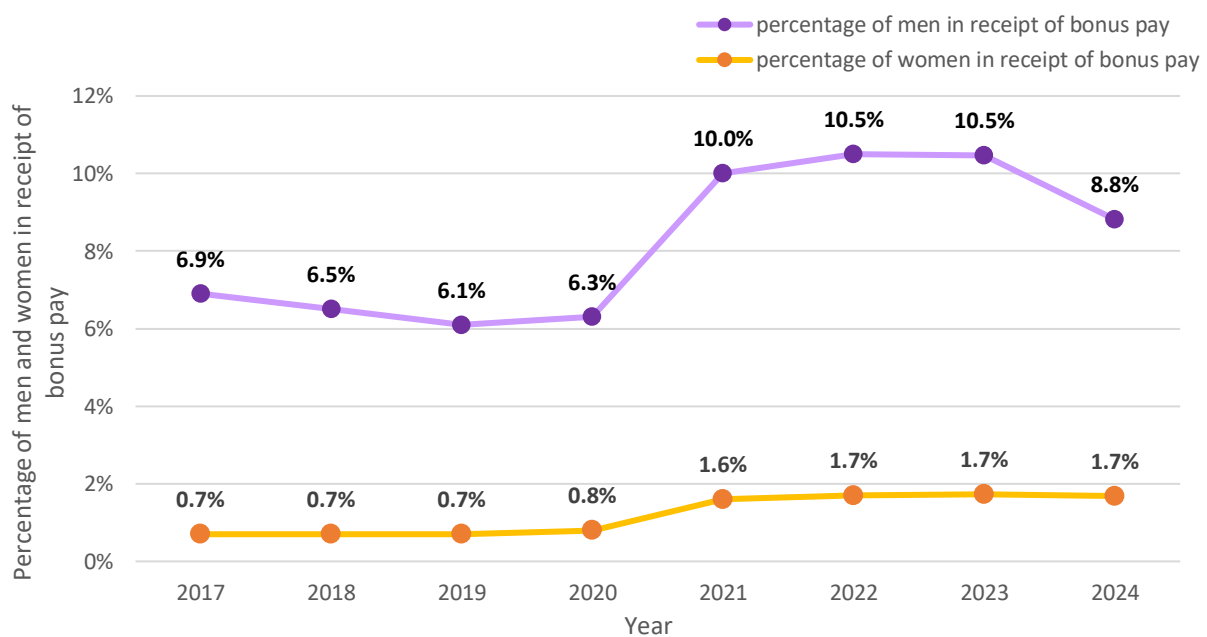
In 2023/24, amongst relevant employees, a higher percentage of men than women received bonus pay:

- **men: 8.81%**
- **women: 1.68%**

(Figure 8.)

However, this reflects that bonus payments were made only to medical consultants, amongst whom men are overrepresented. Amongst consultants, 80.1% of women received a bonus compared to 78.9% of men.

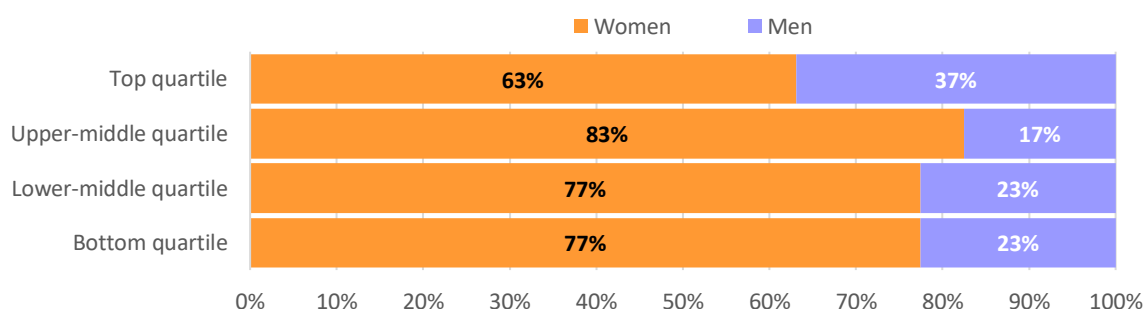
Figure 8: The percentages of men and women in receipt of bonus pay at UHL, 2017 to 2024



Proportions of men and women within each quartile pay band

Women made up 75% of full-pay relevant employees at UHL at 31st March 2024. However, women made up just 63% of staff in the top pay quartile, an underrepresentation compared to their levels of representation in the upper-middle (83%), lower-middle (77%), and bottom (77%) pay quartiles. However, 44% of employees in the top pay quartile came from the medical and dental profession, whilst just 3% of employees from the other pay quartiles came from the medical and dental profession. Thus, the underrepresentation of women in the top pay quartile reflects primarily that women were underrepresented in the medical and dental profession (44%), compared to their level of representation in the rest of the workforce outside of medical and dental roles (80%). (Figure 9.)

Figure 9: The representation of men and women at UHL, by pay quartile, 31st March 2024



The level of representation of women within the top pay quartile was higher at March 2024 (63.1%) than at March 2017 (60.9%), although lower than the highest level of representation observed at March 2021 (65.0%). (Figure 10.)

Figure 10: The percentage representation of women in the top pay quartile at UHL, 2017 to 2024

