

Gender Pay Gap

Report 2023

Contents

1. Introduction.....	2
2. Population Summary	4
3. Mean Gender Pay Gap (1)	4
4. Median Gender Pay Gap (2)	5
5. Proportion of males and females in each pay quartile (3).....	6
6. Bonus Pay Gap (4,5).....	6
8. Proportion of males and females receiving a bonus payment (6)	7
9. Commentary	8
10. 2022 Gender Pay Gap Comparators	9
11. Conclusion and Actions.....	9

List of Tables

Table 1: Trust Population	4
Table 2: Agenda for Change Population.....	4
Table 3: Medical and Dental Population	4
Table 4: Trust Mean Gender Pay Gap	4
Table 5: Agenda for Change Mean Gender Pay Gap	5
Table 6: Medical & Dental Mean Gender Pay Gap.....	5
Table 7: Trust Median Gender Pay Gap	5
Table 8: Agenda for Change Median Gender Pay Gap.....	5
Table 9: Medical & Dental Median Gender Pay Gap	6
Table 10: Quartile Populations.....	6
Table 11: Mean Bonus Gender Pay Gap.....	7
Table 12: Median Bonus Gender Pay Gap	7
Table 13: Number of Bonus Pay recipients.	7
Table 14: Rank comparison with NHS Trusts	9
Table 15: Action Plan	10

1. Introduction

In accordance with The Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017, Mersey and West Lancashire Teaching Hospital NHS Trust is pleased to report its annual Gender Pay Gap for March 2023, specifically the:

1. mean gender pay gap,
2. median gender pay gap,
3. proportion of males and females in each pay quartile.
4. mean bonus gender pay gap,
5. median bonus gender pay gap,
6. proportion of males and females receiving a bonus payment.

The data reported in relation to the mean and median pay gaps and the population quartiles corresponds to the employee population as of the 31st March 2023; and the mean and median bonus pay gaps correspond to any bonus pay paid in the period of the 1st April 2022 to 31st March 2023.

With the snapshot date preceding the merger of between St Helens and Knowsley Teaching Hospitals NHS Trust (STHK), and Southport and Ormskirk Hospital NHS Trust (S&O), this report includes the pay gaps for both STHK, S&O and a theoretical MWL Trust.

1.1. About Mersey and West Lancashire Teaching Hospital NHS Trust

Mersey and West Lancashire Teaching Hospital NHS Trust (MWL) is the successor organisation of the merger between St Helens and Knowsley Teaching Hospitals NHS Trust (STHK), and Southport and Ormskirk Hospital NHS Trust (S&O).

STHK as a legacy Trust provides acute and community healthcare services at St Helens and Whiston Hospitals, Community Intermediate Care services at Newton Community Hospital in Newton-le-Willows, and an Urgent Treatment Centre, operating from the Millennium Centre, in the centre of St Helens. STHK is also the “Lead Employer” for over 13,000 doctors in training who are employed by the Trust but are in placement across the country.

S&O as a legacy trust provides acute and community healthcare services at Southport and Formby District General Hospital, and Ormskirk and District General Hospital

1.2. What is the Gender Pay Gap

The gender pay gap is the difference between the hourly rate of pay of the female population compared to the male population, expressed as a percentage. Where the pay gap is a **positive black** number, the pay gap is in favour of men; and where the pay gap is a **negative red** number, the pay gap is in favour of women.

The gender pay gap and equal pay audits, although using similar methodologies should not be conflated, as they are looking at different things. Equal Pay deals with the pay differences between men and women who carry out the same jobs, similar jobs or work of equal value, whereas the gender pay gap looks at differences between the whole population. It is unlawful to pay people unequally on the basis of their sex.

The gender pay gap reported is for:

- The total population of STHK, S&O and MWL
- The population on Agenda for Change pay banding for STHK, S&O, and MWL
- The population of Medical & Dental staff for STHK, S&O, and MWL.

For the purpose of the gender pay gap calculation, an employee means all posts/assignments that were paid in March and who received 100% of their expected hourly rate of pay (without deductions because they are on leave).

The Hourly rate of pay means the total amount of pay received by a post/assignment in March, including enhancements but excluding overtime. Any salary sacrifice payments are deducted, including pension, childcare vouchers etc; and the final amount is divided by the number of hours worked to provide each post/assignment with an hourly rate of pay.

The closer the pay gap is to 0%, the better the Trusts' performance.

1.3. Note on “Mersey and West Lancashire Teaching Hospital NHS Trust” data

The Mersey and West Lancashire Teaching Hospital NHS Trust (MWL) data is a theoretical calculation of what that Trust Gender Pay Gap would likely be. However, this is based on the merging of the 2 staff data populations into a single theoretical trust, without factoring in future changes to staffing levels, pay or employment practices. Future MWL calculations will be based on a single data set which will account for some of these differences. Therefore, the MWL data should be used as a guide, and not an absolute.

2. Population Summary

On the snapshot date of the 31st March 2023, the following number of employees were included in the data analysis: STHK: 7,333; S&O 3416; and MWL 10,749.

Table 1: Trust Population

	# Total	# Female	# Male	% Female	% Male
STHK	7333	5981	1352	81.6%	18.4%
S&O	3416	2584	832	75.6%	24.4%
MWL	10,749	8565	2184	79.7%	20.3%

Table 2: Agenda for Change Population

	# Total	# Female	# Male	% Female	% Male
STHK	6714	5692	1022	84.8%	15.2%
S&O	3074	2465	609	80.2%	19.8%
MWL	9788	8157	1631	83.3%	16.7%

Table 3: Medical and Dental Population

	# Total	# Female	# Male	% Female	% Male
STHK	619	289	330	46.7%	53.3%
S&O	342	119	223	34.8%	65.2%
MWL	961	408	553	42.5%	57.5%

3. Mean Gender Pay Gap (1)

The mean gender pay gap is a comparison between the average hourly income (before tax, but after salary sacrifice deductions) of the whole male population, and the average hourly income of the whole female population expressed as a percentage. Table 4-9 includes the hourly rate of pay, pay difference, and pay gap value.

Table 4: Trust Mean Gender Pay Gap

	STHK	S&O	MWL
Female	£17.39	£17.57	£17.44
Male	£24.96	£22.13	£23.90
Difference	£7.58	£4.56	£6.46
% Pay Gap	30.35%	20.60%	27.03%

Table 5: Agender for Change Mean Gender Pay Gap

	STHK	S&O	MWL
Female	£16.13	£16.82	£16.34
Male	£16.95	£16.28	£16.70
Difference	£0.82	£0.54	£0.36
% Pay Gap	4.81%	- 3.30%	2.15%

Table 6: Medical & Dental Mean Gender Pay Gap

	STHK	S&O	MWL
Female	£42.08	£33.19	£39.48
Male	£49.78	£38.18	£45.12
Difference	£7.70	£4.99	£5.64
% Pay Gap	15.48%	13.09%	12.49%

4. Median Gender Pay Gap (2)

The median gender pay gap is a comparison between the middle value of the hourly income (before tax, but after salary sacrifice deductions) of the whole male population (from smallest to largest), and the middle value hourly income of the whole female population expressed as a percentage.

Table 7: Trust Median Gender Pay Gap

	STHK	S&O	MWL
Female	£14.87	£16.00	£15.11
Male	£17.24	£17.00	£17.12
Difference	£2.36	£1.00	£2.01
% Pay Gap	13.71%	5.90%	11.71%

Table 8: Agender for Change Median Gender Pay Gap

	STHK	S&O	MWL
Female	£14.48	£15.55	£14.49
Male	£14.80	£14.23	£14.79
Difference	£0.32	£1.32	£0.30
% Pay Gap	2.17%	- 9.27%	-2.05%

Table 9: Medical & Dental Median Gender Pay Gap

	STHK	S&O	MWL
Female	£43.70	£27.28	£38.21
Male	£50.86	£36.07	£47.48
Difference	£7.10	£8.79	£9.27
% Pay Gap	14.09%	24.37%	19.52%

5. Proportion of males and females in each pay quartile (3)

To allow the trust to compare the distribution of men and women within its pay structure with those from different organisations, the population is ranked in order of pay and divided equally into 4 population quartiles, where quartile 1 is the lowest and 4 the higher. The total number of men and women are counted in each to produce the quartile populations.

Table 10: Quartile Populations

		STHK	S&O	MWL
Quartile 1	% Female	84.8%	77.6%	83.10%
	% Male	15.2%	22.4%	16.9%
Quartile 2	% Female	84.7%	77.2%	82.3%
	% Male	15.2%	22.8%	17.7%
Quartile 3	% Female	85.2%	79.5%	82.8%
	% Male	14.8%	20.5%	17.2%
Quartile 4	% Female	71.5%	68.3%	70.5%
	% Male	28.5%	31.7%	29.5%

6. Bonus Pay Gap (4,5)

6.1. Meaning of Bonus Pay

The meaning of bonus pay for the Trusts gender pay gap is a reference to the local and national clinical excellence awards/clinical impact awards which recognise clinical excellence of consultants (only).

Since COVID, the local clinical excellence awards have been awarded to all qualifying consultants at an equal value of the available funding at STHK and S&O respectively. In addition, STHK allows recipients to select whether the payment is received in March or April. As such the STHK data includes 2 LCEA values, S&O includes 1, and MWL includes 3 LCEA values.

National Clinical Excellence Awards / Clinical Impact Awards are awarded via a competitive application process and where successful are paid via the Trust payroll

even though it is not the awarding body. Only consultants still employed on the 31st March 2023 are included in the data.

6.2. Mean and Median Bonus Pay Gap

The mean and median bonus gender pay gaps were as follows:

Table 11: Mean Bonus Gender Pay Gap

Sex	STHK	S&O	MWL
Female	£6,788.93	£7992.24	£7206.75
Male	£8,250.76	£8732.48	£8458.99
Difference	£1461.83	£740.24	£1252.24
% Pay Gap	17.77%	8.48%	14.80%

Table 12: Median Bonus Gender Pay Gap

Sex	STHK	S&O	MWL
Female	£5,268.05	£4709	£4709.00
Male	£5,268.05	£4709	£5268.05
Difference	£0	£0	£559.05
% Pay Gap	0.00%	0.00%	10.61%

8. Proportion of males and females receiving a bonus payment (6)

Table 13 reports the proportion of the total population who received a bonus payment, and the proportion of bonus recipients who were male and female.

Table 13: Number of Bonus Pay recipients.

Sex	STHK	S&O	MWL
% Female receive Bonus Pay	0.6%	0.9%	0.7%
% Male receive Bonus Pay	5.5%	7.6%	6.4%
% Bonus Pay recipients Female	32.3%	27.2%	31.7%
% Bonus Pay Recipients Male	67.7%	72.8%	68.3%

9. Commentary

9.1. Cause of the Mean and Median Gender Pay Gap

The key factors that influence the gender pay gap are the number and location of men and women with the pay structure (vertical segregation), and the number of men and women in specific types of roles (horizontal segregation).

Influencing factors include large scale gendered and societal pressures that impact on career choices; access and uptake of training and development; promotion and progression practices; and life decisions relating to family, flexible and part time working.

In healthcare these factors are particularly pronounced where in STHK, 81.6% of the workforce is female, yet a mean pay gap of 30.4% and a median pay gap of 13.7% occur.

This is caused by a larger proportion of women occupying lower pay bands/roles, compared to men: 26% of women are in Quartile 1, compared to 20.6% of men; and 21.9% of women are in Quartile 4, compared to 38.7% of men.

In S&O this is less pronounced as that Trust has a larger proportion of male staff, 24.4% v 18.4% at STHK. A similar comparison shows that at S&O, 25.7% of women are in Quartile 1 v 23% of men; and 22.6% of women are in Quartile 4, compared to 32.6% of men. This has the effect of a reduced pay gap of 20.6% (mean) and 5.9% (median).

A large influencing factor in the pay gap is the number of employees on medical and dental contracts, compared to Agenda for Change pay band spine. When omitting medical and dental pay from the calculation,

- the mean pay gap for STHK reduces from 30.4% to 4.8%; and for S&O from 20.6% to **-3.3%** (in favour of women);
- the median pay gap for STHK reduces from 13.7% to 2.2%; and for S&O from 5.9% to **-9.3%** (in favour of women).

Medical and Dental

Compared to the Trust population, women make up a minority of Medical and Dental roles at 46.7%, STHK; 34.8%, S&O; 42.5% MWL. Although the overall proportions are over 40%, a larger proportion of female medics are on the lower graded roles than men. For example, 21% of female medics are on a Foundation 1 / 2 post compared to 8.7% of male medics; whereas 40% of female medics are Consultants, compared to 54.3% of male medics. In addition. A larger proportion of female consultants have been in their current post for a shorter time period than male consultants, with 74% having been in post less than 10 years, compared to 59% of

male consultants; and at the upper end, 13% of female consultants have been in post for 15 plus years, compared to 19% of male consultants.

The combination of a higher proportion of women being on lower pay bands, and overall having a lower length of service in senior posts where length of service is linked to pay levels, is resulting in a lower hourly rate of pay, and hence the pay gap for medical and dental posts.

Bonus Pay

The bonus pay values are based on 4 different bonus pay offers, the 2021 and 2022 local clinical excellence awards fixed values at STHK; the 2022 LCEA fixed value at S&O; and the varying national clinical excellence / impact award values which were awarded to a small minority of people based on a competitive application process.

Individually each round of the LCEA should result in a 0% difference in the pay gap, but the combination of these awards; in addition to there being a higher proportion of men in eligible consultant positions, is causing the bonus mean pay gap.

The median bonus pay gap at STHK and S&O are both 0% because of the impact of awarding the same value for the LCEA; however, when these are merged for MWL, a median pay gap of 10.6% occurs because of the differing values awarded by each trust.

10.2022 Gender Pay Gap Comparators

The publication of all gender pay gap data for the March 2022 GPG was completed by the 30th March 2023. Benchmarking of the 2022 Trust data against this data set is as follows:

Table 14: Rank comparison with NHS Trusts

	STHK	S&O
Mean	199 th	122 nd
Median	149 th	95 th
Bonus Mean	84 th	57 th
Bonus Median	12 th (Joint)	12 th (Joint)

11. Conclusion and Actions

The analysis of the 2023 data indicates that there remain some differences in pay between the men and women at STHK, S&O and a combined MWL.

Ongoing actions to address the gender pay gap are:

Table 15: Action Plan

Action
1. Review approaches to the recruitment and retention of men in lower pay bands, in particular Admin and Clerical; Nursing and Midwifery with the aim to improve the recruitment and retention of men in lower pay bands.
2. Review promotion/progression process and support for women into higher pay bands.
3. To review the support and development for women to apply for National Clinical Excellence / Impact Awards
4. Review how flexible working and family friendly policies, guidance, advice and support can improve retention, progression, and childcaring stereotypes.
5. Review the “Mend the Gap” report recommendations, and where identified, implement recommendations for NHS Trust on addressing the medical gender pay gap.
6. Every board and executive team member must have EDI objectives that are specific, measurable, achievable, relevant, and timebound (SMART) and be assessed against these as part of their annual appraisal process.
7. Analyse data by race, disability, and other protected characteristics for publication in future years.
8. Implement an effective flexible working policy including advertising flexible working options on organisations’ recruitment campaigns.
9. Create and implement a talent management plan to improve the diversity of executive and senior leadership teams and evidence progress of implementation. Address gender and ethnicity imbalances where identified to aid the reduction of the gender pay gap.
10. Implement a plan to widen recruitment opportunities within local communities, aligned to the NHS Long Term Workforce Plan.