

**1.0 Introduction**

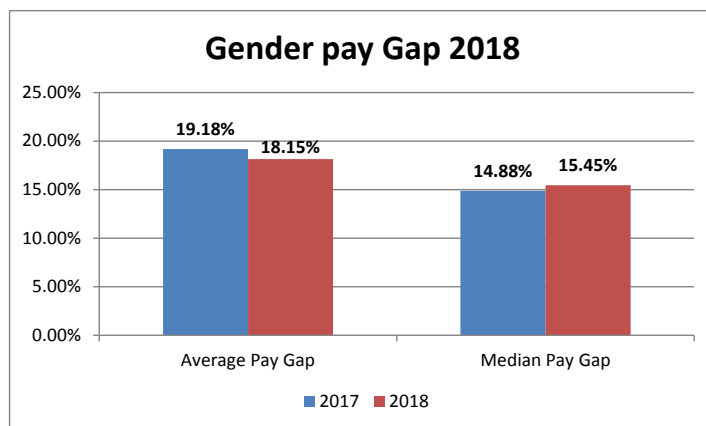
1.1 As with all other employers with more than 250 staff, the Trust is required to report data relating to the Gender Pay Gap. The data reported in this paper shows the pay gap as at 1<sup>st</sup> March 2018, as required by the Regulations.

1.3 Whilst both equal pay and the gender gap deal with the disparity of pay women receive in the workplace, they are two different issues:

- Equal pay means that men and women in the same employment performing equal work must receive equal pay, as set out in the Equality Act 2010.
- The gender pay gap is a measure of the difference between men’s and women’s average earnings across an organisation. It is expressed as a percentage of earnings and represents the difference between the mean hourly rate of ordinary pay of male and female employees, and the difference between the median hourly rate of ordinary pay of male and female employees

**2.0 Gender Pay Gap**

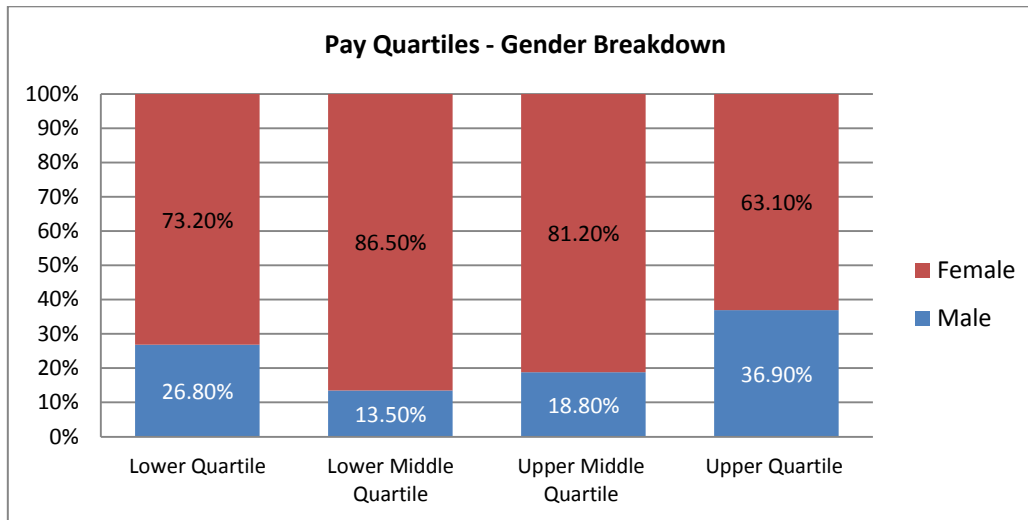
2.1 In common with many organisations (including NHS Trusts) GOSH has a gender pay gap. In 2018 the average pay for a male employee was £4.58 (18.15%) higher than the average female hourly rate. The median hourly rate gap was slightly lower at £3.32 (15.45%) per hour.



2.2 Reasons for a pay gap are complex and driven by the traditional demographics of the healthcare workforce. For example the Nursing and Administrative & Clerical professions are predominately female, and make up 77% of the overall workforce.

	Female Headcount	Male Headcount	Total	Female	Male
Add Prof Scientific & Technical	231	74	305	76%	24%
Additional Clinical Services	435	106	541	80%	20%
Administrative & Clerical	769	384	1153	67%	33%
Allied Health Professionals	242	22	264	92%	8%
Estates & Ancillary	70	77	147	48%	52%
Healthcare Scientists	232	82	314	74%	26%
Medical & Dental	408	310	718	57%	43%
Nursing	1518	88	1606	95%	5%
<b>Grand Total</b>	<b>3905</b>	<b>1143</b>	<b>5048</b>	<b>77%</b>	<b>23%</b>





2.3 Whilst the GOSH pay quartile data shows that the highest percentage of staff across all pay quartiles are females, the highest proportion (relatively) of male staff are to be found in the highest pay quartile:



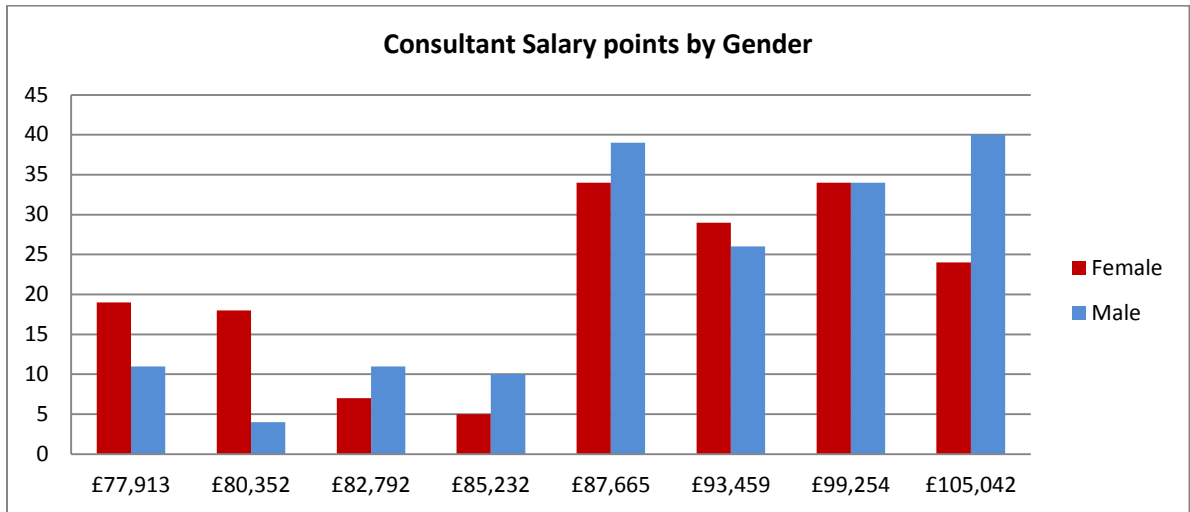
### 3.0 Medical vs. Non-Medical Gender Pay Gap

3.1 When considering the data at a more granular level it is clear the main driver for the gap at GOSH is the difference our consultant workforce makes on pay levels across the organisation.

3.2 Whilst we have a fairly equal number of men and women consultants (51% and 49% respectively), female consultants form part of a much larger population of women when looking at the gap at the organisational level (as the Trust is 77% female). Consequently their effect on female average pay is less than male consultant pay is on male average pay:

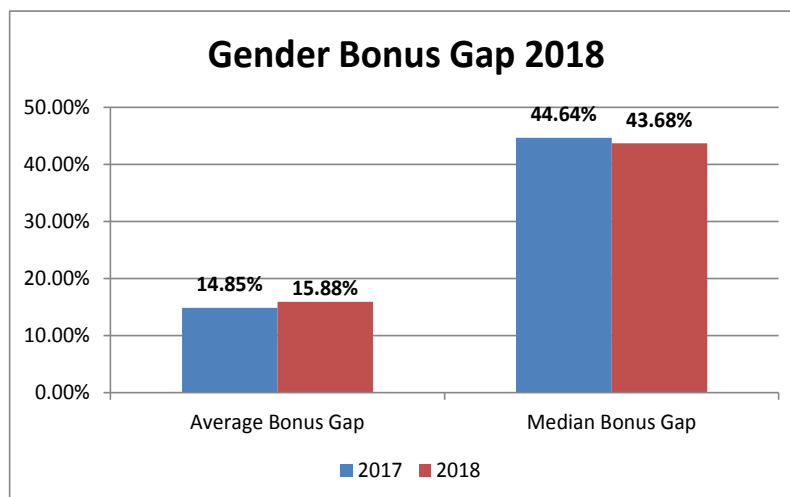
Gender pay gap (non-medical)		Gender pay gap (medical/dental)	
Mean	Median	Mean	Median
			
Men on a mean average earn 35p per hour more than women.	Women on a median average earn 89p per hour more than men.	Men on a mean average earn £3.53 per hour more than women.	Men on a median average earn £5.06 per hour more than women.
1.87%	-5.42%	8.59%	11.8%

3.3 Within the consultant workforce the distribution of men and women along the consultant payscale broadly represents the traditional demographic of the medical workforce (i.e. predominately male). Over time, as the demographic shift within the trainee medical workforce (currently approximately 60% female) filters through to the consultant workforce, and female consultants progress up the payscale, the ratio of female consultants at higher points of scale will increase and contribute to a reduction in gender pay gap at GOSH.



#### 4.0 Bonus Gender Pay Gap

4.1 Earnings in the calculation for bonus payments relate to Clinical Excellence Awards (CEAs) for consultant medical staff. The average gender pay gap currently stands at £2,977 (15.88%), and the median £6,856 (43.68%) (both similar gaps to 2017).



4.2 The proportion of staff receiving bonus pay was 6.32% (male) and 1.37% (female) – based on the total workforce at GOSH. It should be noted only Consultant medical staff are eligible to receive CEAs – 42% of the consultant workforce hold a CEA. This breaks down to 35% of female consultants and 49% of male consultants holding a CEA.

	Consultant Headcount	Award holders	Award Holders
<b>Male</b>	175	86	49%
<b>Female</b>	171	59	35%
<b>Total</b>	<b>346</b>	<b>145</b>	<b>42%</b>

4.2 Local clinical excellence awards are decided by a GOSH panel which consists of a diverse range of participants, representing the diversity the consultant workforce at GOSH including ethnicities, gender and specialities. Applications and allocation of awards are monitored against a range of protected characteristics including Gender.

## **5.0 Benchmarking**

- 5.1 The Gender Pay Gap has many similarities across the NHS workforce and the London HR Directors Network commissioned a pan London analysis by Health Education England (HEE) to review each Trust's 2017 report and analysis, and validate the methodology used. While most trusts correctly interpreted the data around hourly rates, there were some discrepancies about bonus reporting. GOSH was not among the trusts where any issues with data were flagged. It is expected a similar analysis will be undertaken following publication of the 2018 data.
- 5.2 The 2017 data indicated a range of pay gaps with almost all trusts reporting a pay gap favourable to men in the range of 6% to 41% (average hourly pay) or 23% to 0.3% for median hourly pay. Bonus pay gaps ranged from 59% to -30.6% (average) with a median gap range of 72.7% to -62%. GOSH was not an outlier in this benchmarking but was in the lowest quartile of London trusts.

## **6.0 Pay Measures in Place**

- 6.1 GOSH uses the following pay systems to ensure pay is equal and consistent regardless of gender:
- Agenda for Change: National pay system which covers all job roles excepting those given below:
    - Trust contracts - for senior managers and directors
    - National Junior Doctors' contract.
    - National Consultants' contract.
- 6.2 Under Agenda for Change, NHS Foundation Trusts have the ability to negotiate local terms and conditions. In common with all other NHS Foundation Trusts GOSH has chosen to remain with Agenda for Change rather than move to locally created pay systems due to the protection it affords in terms of ensuring work of equal value is paid equally. Agenda for Change was designed to evaluate the job rather than the person in it and by doing so, ensuring equity between similar jobs in different areas.

## **7.0 Future actions**

- Continue to support development of the GOSH Women's Forum (launched March 2019) and work closely with the forum to address relevant issues, support policy development and culture change as well as promoting positive discussion and develop further awareness of the issues around the gender pay gap.
- The Trust will continue to encourage training and career pathways as well as ensuring our processes around local CEAs remain fair and equitable.
- Embed the recently launched GOSH career mentoring programme by developing more mentors and encouraging staff to request a mentor, particularly those from protected groups where career progression may be more difficult.
- Continue to support all staff including those returning from time away from the workplace for carer responsibilities. We offer childcare vouchers and an onsite nursery in order to help staff remain in work after having children. We also have a variety of family friendly policies, open to both genders.
- Continue to provide training and education to managers to address issues related to unconscious bias in recruitment and selection, Personal Development reviews (PDR) and clinical excellence award decisions.