

Gender Pay Gap report 2019



1. Reporting requirement

The gender pay audit obligations are outlined in The Equality Act 2010 (Gender Pay Gap Information) Regulations 2017. As an organisation that employs more than 250 people and listed in Schedule 2 to the Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017 we must publish and report specific information about our gender pay gap.

2. Reporting metrics

The specific information we must publish and report is as follows:

- **Mean gender pay gap in hourly pay** – adding together the hourly pay rates of all male or female full-pay and dividing this by the number of male or female employees. The gap is calculated by subtracting the results for females from results for males and dividing by the mean hourly rate for males. This number is multiplied by 100 to give a percentage
- **Median gender pay gap in hourly pay** – arranging the hourly pay rates of all male or female employees from highest to lowest and find the point that is in the middle of the range
- **Mean bonus gender pay gap** – add together bonus payments for all male or female employees and divide by the number of male or female employees. The gap is calculated by subtracting the results for females from results for men and dividing by the mean hourly rate for men. This number is multiplied by 100 to give a percentage
- **Median bonus gender pay gap** – arranging the bonus payments of all male or female employees from highest to lowest and find the point that is in the middle of the range.
- **Proportion of males and females receiving a bonus payment** – total males and females receiving a bonus payment divided by the number of relevant employees
- **Proportion of males and females in each pay quartile** – ranking all of our employees from highest to lowest paid, dividing this into four equal parts ('quartiles') and working out the percentage of men and women in each of the four parts.

This analysis does not look at whether there are differences in pay for men and women in equivalent posts. Therefore, the results will be affected by differences in the gender composition across our various professional groups and job grades.

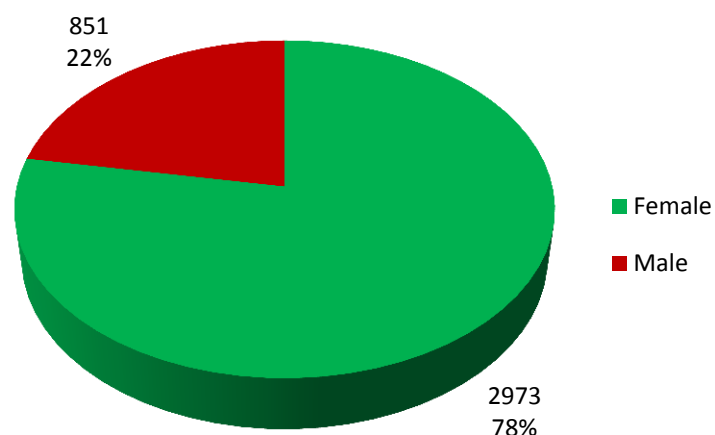
3. Our Gender Pay Gap report 2019

Our Gender Pay Gap report for 2019 contains a number of elements:

- The specific information published on the government website for the snapshot date of 31st March 2019
- An analysis of the specific information supplied over the past three years since we first reported in 2017
- An analysis of the pay gap across specific staff groups within Salisbury NHS Foundation Trust
- Recommendation as to future action to reduce the Gender Pay Gap

4. Specific Information 31st March 2019

The Trust collected our data on the 31st March 2019 when our workforce consisted of 2973 women and 851 men.



The figures show that the Trust has a mean gender pay gap of 23.84% and a median gender pay gap of 7.58%

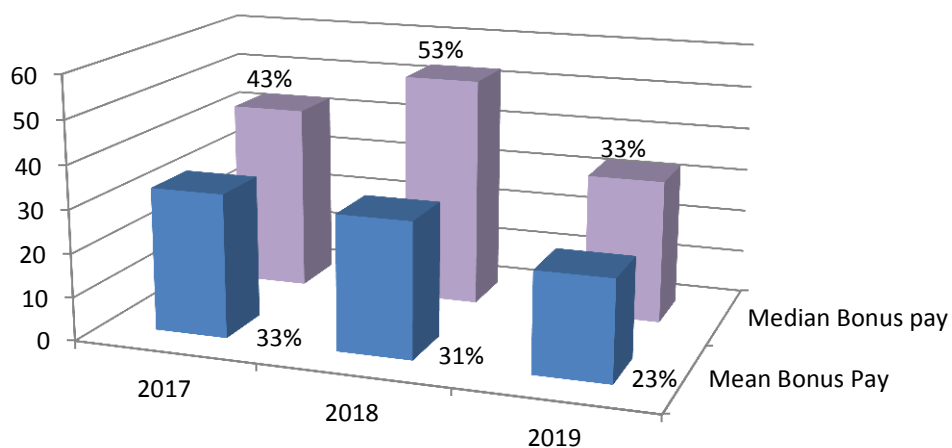
Gender	Avg. Hourly Rate	Median Hourly Rate
Male	20.7291	15.1416
Female	15.7881	13.9933
Difference	4.9410	1.1483
Pay Gap %	23.8360	7.5839

Bonus Pay

The table below shows that average and median bonus pay for men was higher than for women. This is because a higher number of senior consultants earning higher value clinical excellence awards are male.

Gender	Avg. Pay	Median Pay
Male	10,802.81	9,048.00
Female	8,274.50	6,032.03
Difference	2,528.31	3,015.97
Pay Gap %	23.40	33.33

Of all employees 57 men were paid bonuses (Clinical Excellence Awards) and 37 women. This data shows there have been some minor changes as we continue the trajectory growth of women medical consultants in our workforce.

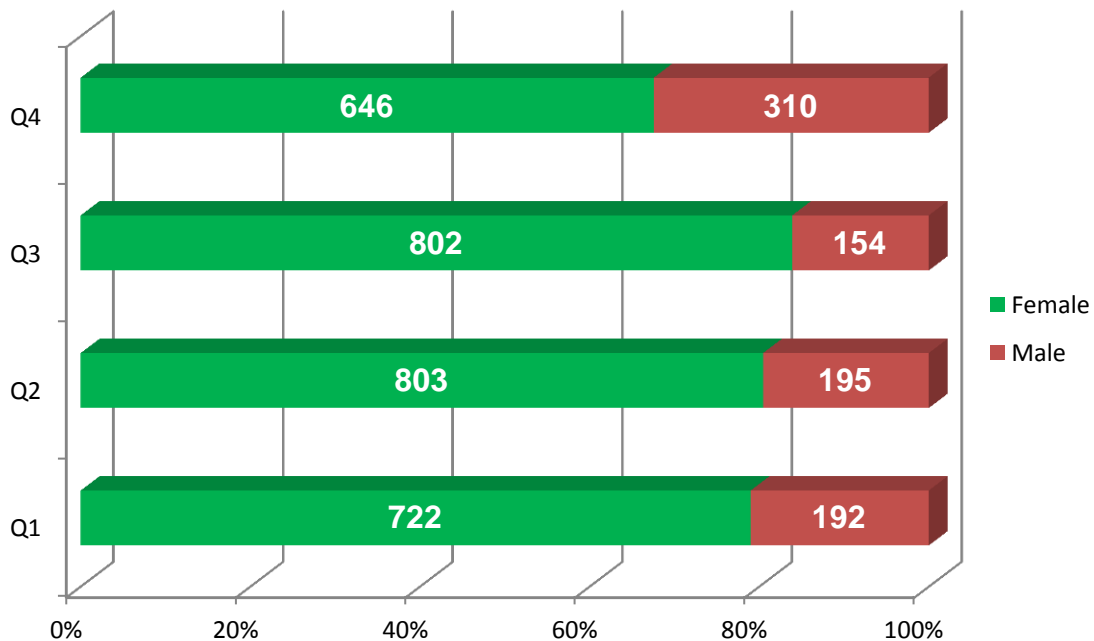


Quartile Analysis

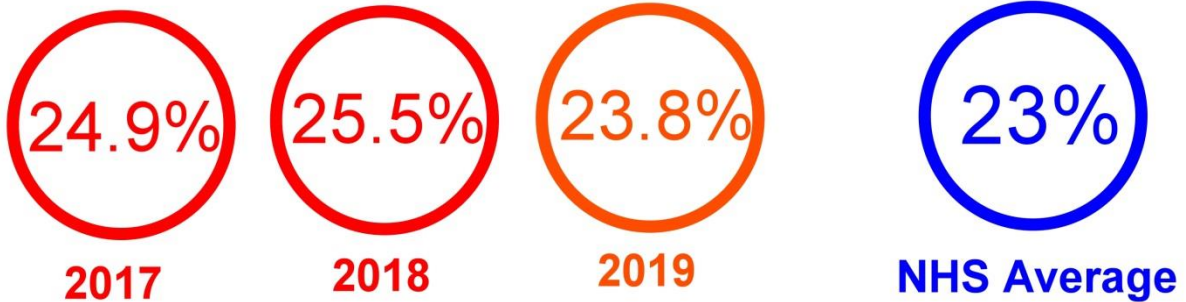
The Trust is required to rank its employees from highest to lowest paid, divide this into four equal parts (quartiles) and to show the gender split in each.

Quartile 4
Senior medical staff - Consultants and Registrars Executive Directors Band 7 and 8 Nurses, Therapists and other Clinical and Scientific Staff
Quartile 3
Band 5 and 6 Nurses, Therapists and other Clinical and Scientific Staff
Quartile 2
Bands 2 to 4 Nursing Assistants, Admin, Therapists and other Clinical and Scientific Staff
Quartile 1
Bands 2 and 3 Nursing Assistants, Admin, Facilities, Cleaning and Therapy Support staff

Please note some bands fall into more than one quartile, as some staff enhance their pay by working unsocial hours, overtime etc.



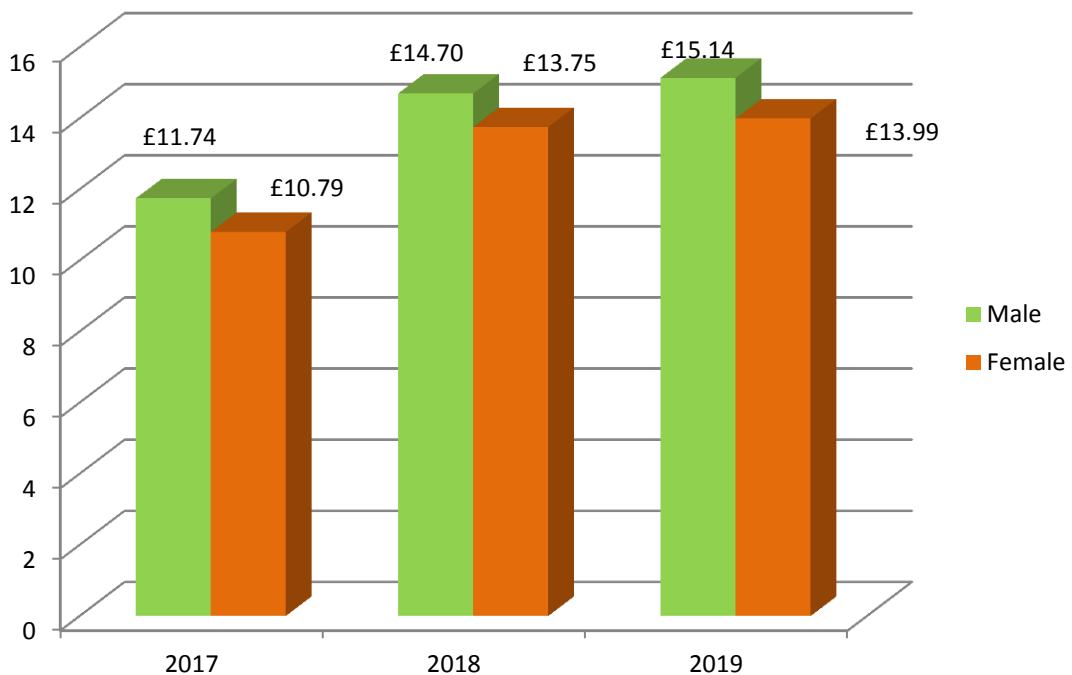
5. Our progress 2017/2018/2019



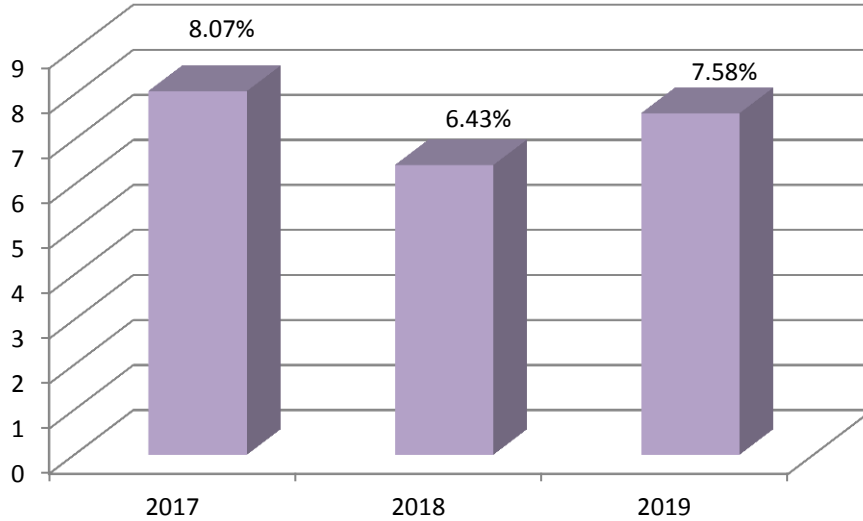
Salisbury NHS Foundation Trust has been posting Gender Pay Gap data on the Government website for the past three years. This now allows us to analysis our progress over that time.

You will see that the mean gender pay gap in hourly pay widened slightly in 2018 and is now beginning to close. The NHS average is 23% and you will note that we are now only slightly above that figure.

When we look at the median hourly rate we see that the gap closed slightly in 2018 and has since widened slightly.

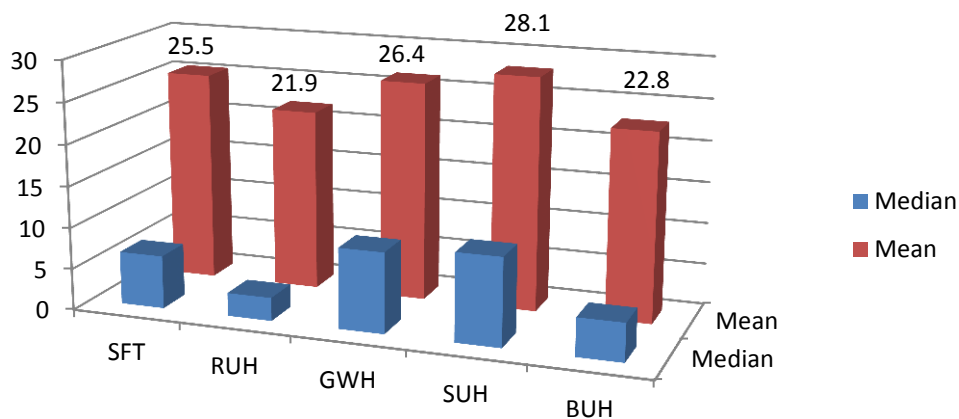


Percentage Median Gender Pay Gap



6. Comparison with other Local NHS Trusts - 2018

The below graph shows our 2018 figures compared with a number of other local NHS Acute Trusts (*Not all Trusts have yet posted their 2019 figures*).



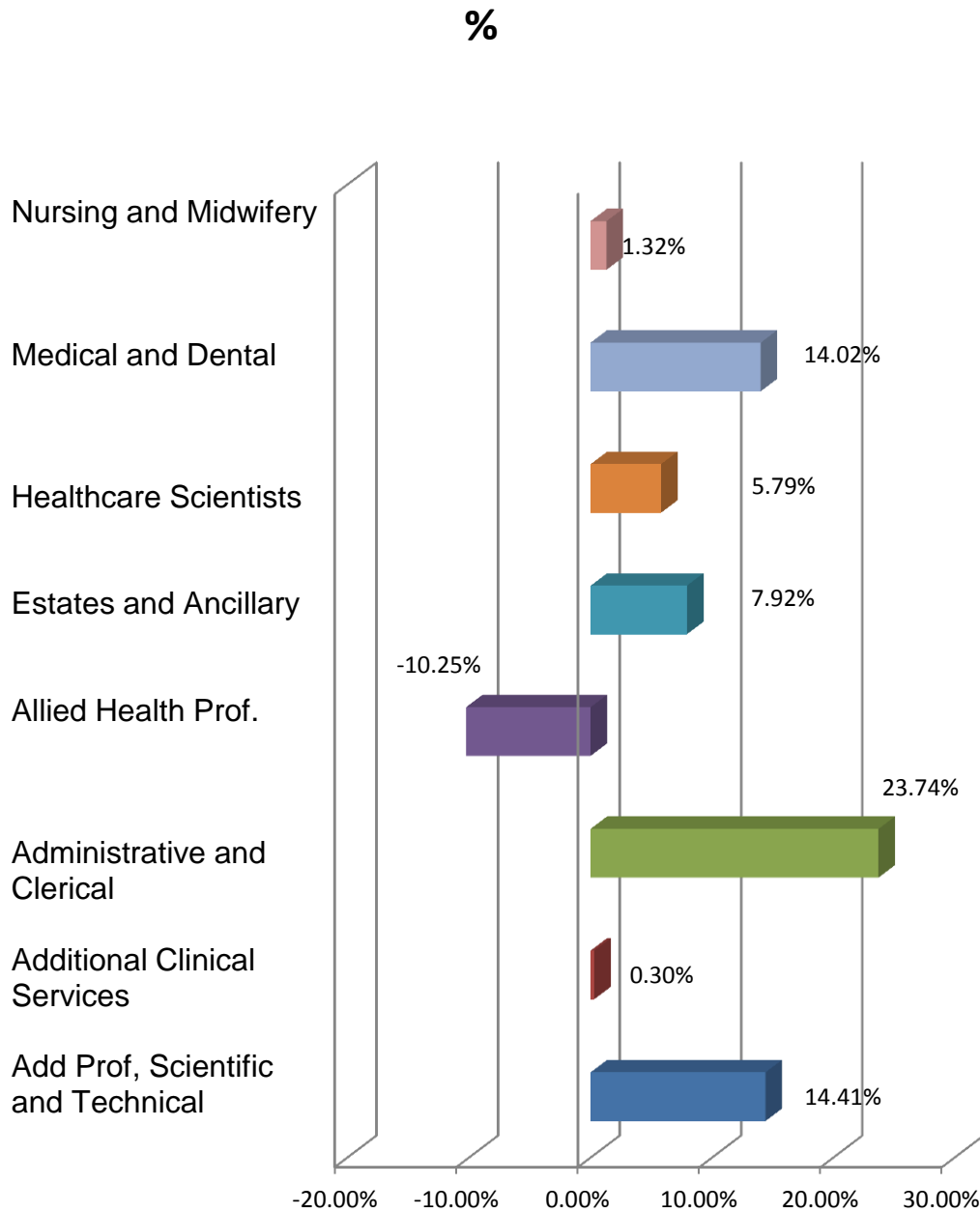
SFT = Salisbury NHS Foundation Trust
GWH = Great Western Hospital
BUH = Bournemouth University Hospital

RUH = Royal United Hospital Bath
SUH = Southampton University Hospital

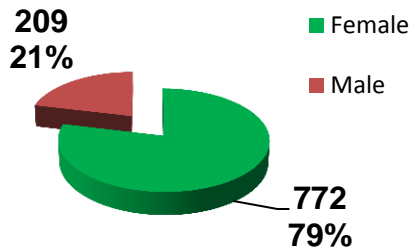
7. Gender Pay Gap by Staff Group

In order to gain a better understanding of what is creating our gender pay gap we have carried out analysis by staff group.

This shows quite a variance across the groups. It ranges from a 23.74% gap for Administrative and Clerical to a minus 10.25% gap for Allied Health Professionals.



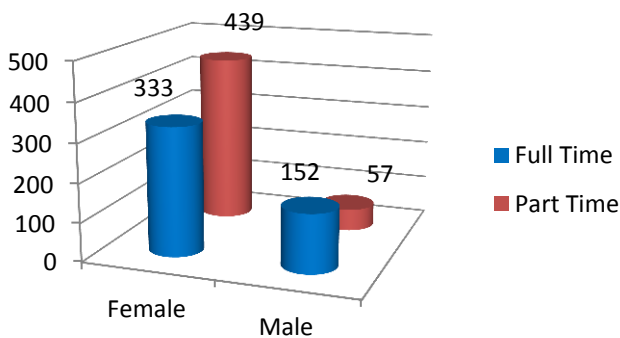
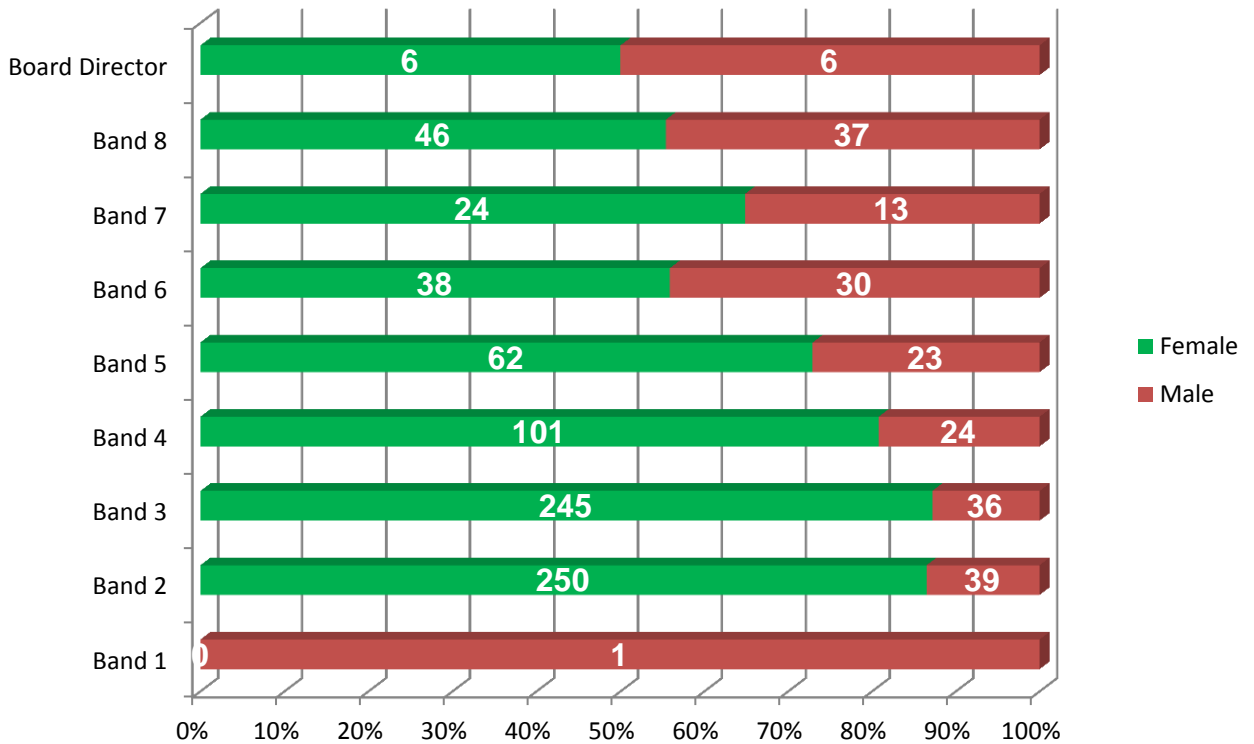
8. Administrative and Clerical – 23.74%



The graph below shows that 9.8% of females employed in this group have reached the top quartile (Band 7 and above).

This compares to 26.8% of males who are employed in this group.

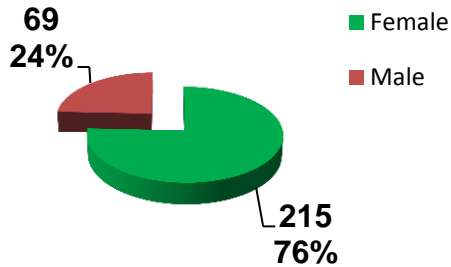
77% of females in the group are employed at Band 4 and below.



56.8% of female employees in this group are employed on part-time contracts.

This compares to only 27% of males within this group who work part-time.

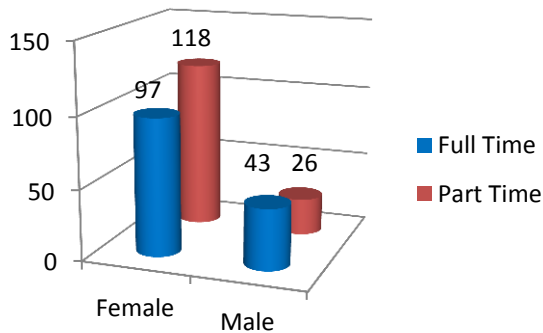
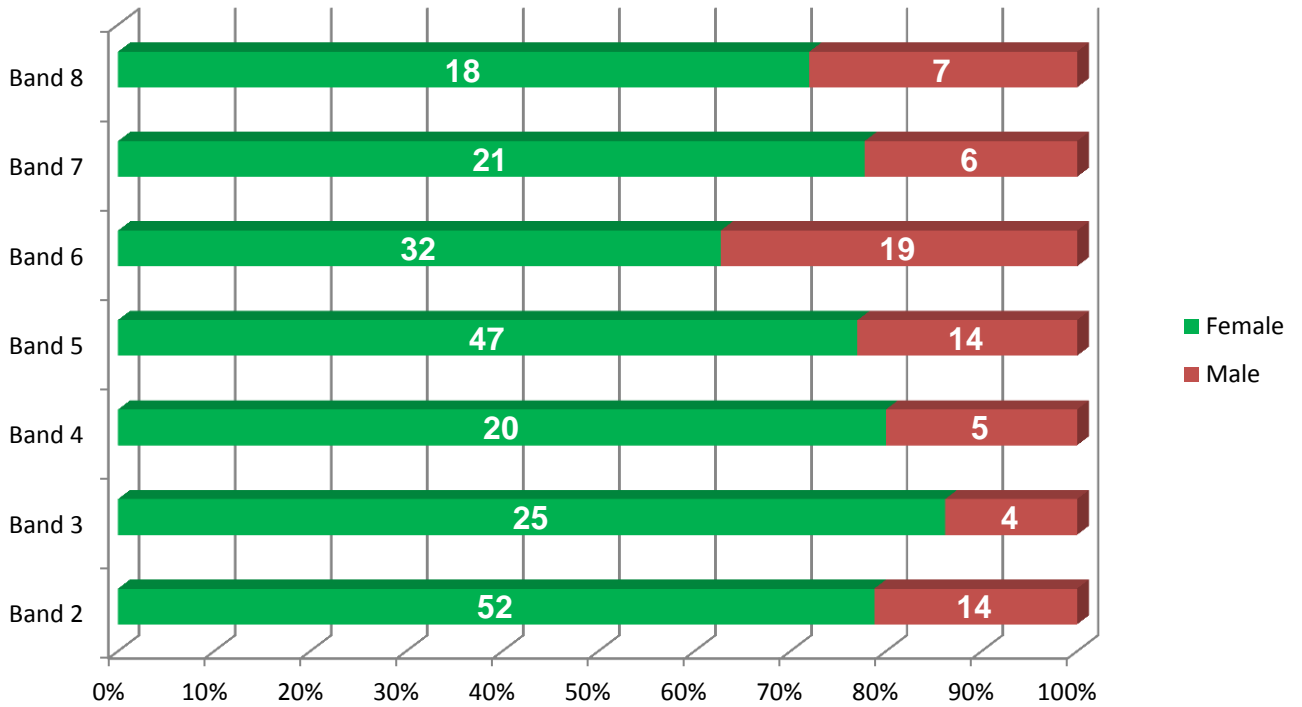
9. Additional Professional, Scientific and Technical –14.41%



18% of female employees in this group have roles within the top quartile – Bands 7 & 8.

This compares to 18.8% of males employed in this group.

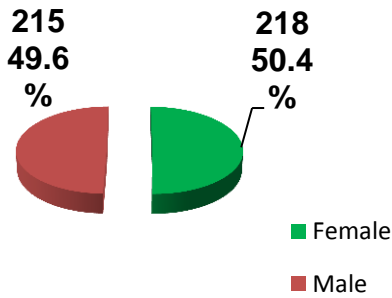
45% of females are employed at roles within Band 4 or below. 33% of males within the group fall within these bands.



54.8% of females in this group are employed on part-time contracts.

This compares to 37% of males in this group who are employed on part-time contracts.

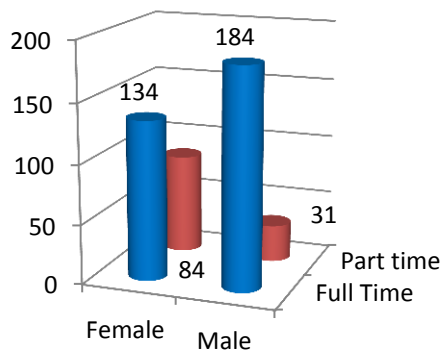
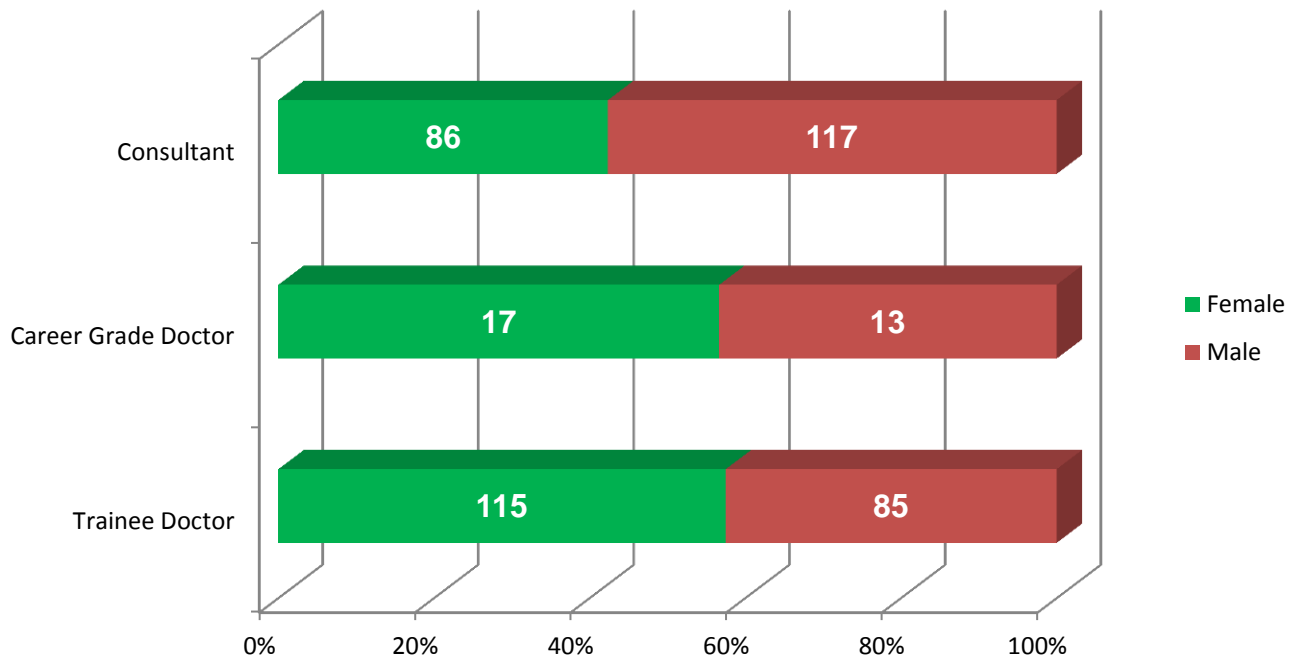
10. Medical and Dental – 14.02%



When we look at this group we see that we have achieved 50.4% representation who are female.

However, 57.6% of Consultants are male, compared to 42.4% female.

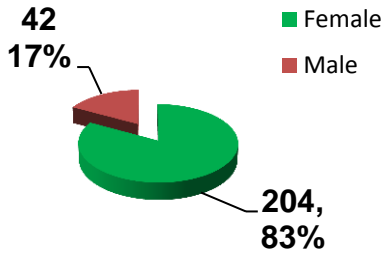
The situation is completely reversed when we look at our Trainee Doctors where 57.5% are female and 42.5% are male.



39% of females in this group work on part-time contracts.

This compares to 14% of males in this group who are employed on part-time contracts.

11. Allied Health Professionals - Minus 10.25%

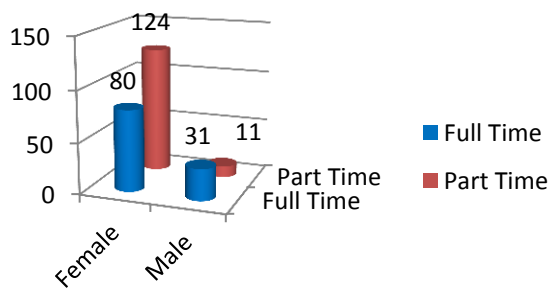
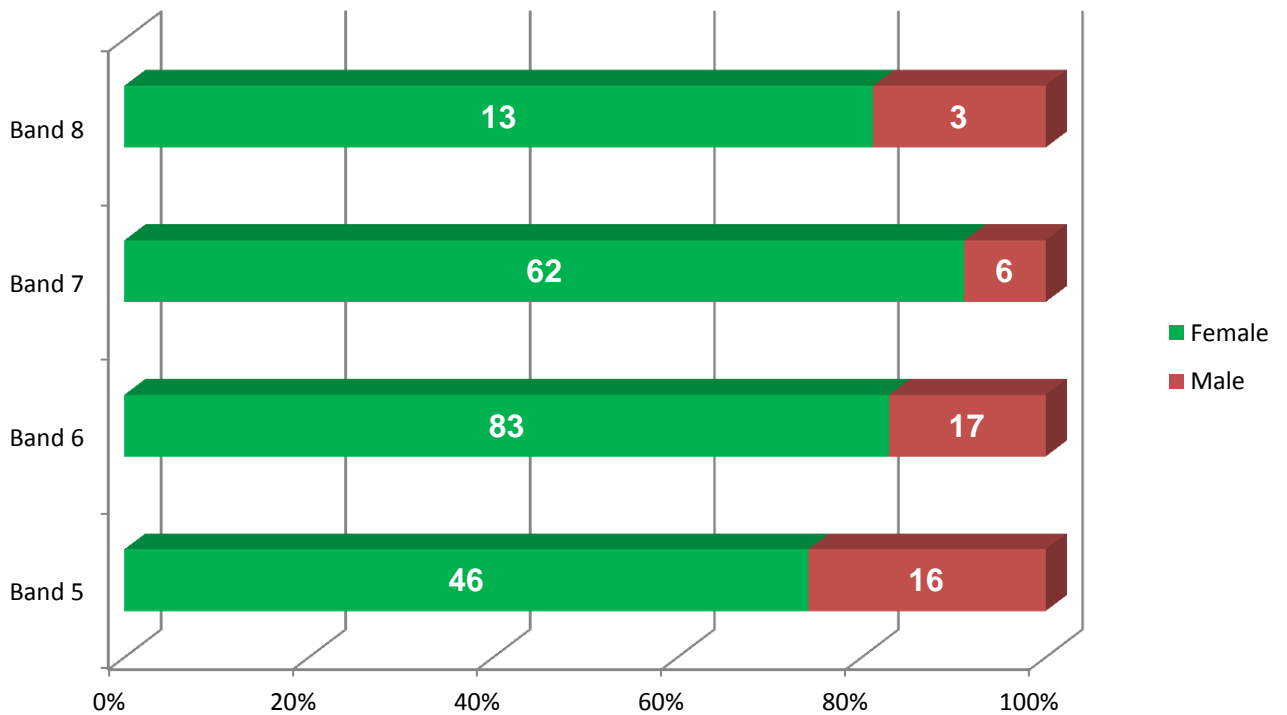


This group is the only group which shows a negative pay gap in favour of female employees, minus 10.25%

83% of employees in this group are female.

36.7% of female employees in this group have roles in the top quartile (Bands 7 & 8).

This compares to 21% of males employed in this group.



60% of female employees in this group are employed on part-time contracts.

This compares to 26% of males who are on part-time contracts.

12. Conclusion

Salisbury NHS Foundation Trust has reported similar pay gap data for the past three years. Since posting the first details in 2017 the Trust appears to be making some slight progress in reducing the gap. This years' figure of 23.8% is taking us closer to the NHS average of 23%.

On closer investigation there are three main staff groups with double figure pay gaps:

- Administrative and Clerical
- Additional Professional, Scientific and Technical
- Medical and Dental

It will be noted that a large proportion of males employed in these groups are within the top pay quartile.

A high percentage of females in these areas are employed at Band 4 and below. A significant number of these are also employed on part-time contracts.

One area of our Trust has a negative (minus 10.25%) pay gap in favour of female employees. This is Allied Health Professionals. Employees in this group work across for pay bands from Band 5 to Band 8.

When we look at other local NHS Trusts we see that the Royal United Hospitals Bath NHS Foundation Trust is reporting the lowest gap (2018 figures):

- Mean pay gap = 21.9% (below NHS national average)
- Median pay gap = 2.8%

13. Recommendations

Salisbury NHS Foundation Trust should take the following action to reduce the Gender Pay Gap further:

- Work with managers across the Trust to better understand the causes of our gender pay gap.
- Together with relevant managers target the three areas identified with double figure pay gaps to explore and develop actions to close the gap.

- Work with managers from the Allied Health Professionals group to better understand the negative pay gap. This may help us to understand how to reduce the higher gaps.
- Exploring how we can better support female talent. Encourage the next generation of female leaders through our Leadership Forum and education programs.
- Work with our newly emerging Women's Network to explore how we can support female talent and progression within the Trust.
- Engage with all staff to obtain accurate, up to date equality data to ensure that we have a true picture across the Trust.
- Working with other NHS organisations and partners to learn from best practice and explore opportunities to develop joint activities
- Exploring opportunities for more flexible or alternative shift working across the organisation and explore how this could be introduced into a wider range of roles

14. Author and Sponsor

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