The Shrewsbury and Telford Hospital

# Gender Pay Gap Report 2023



#### Introduction

We have 7,487 substantive colleagues, increasing to 8,821 with the inclusion of bank workers, making us one of the largest employers locally. We endeavour to reflect the diversity of our local communities and continue to strengthen partnerships with system partners.

We are committed to attracting and retaining employees from all the communities we serve by promoting the benefits of working at the Trust and highlighting the many career opportunities available to them across all professional groups, and at all levels.

We value reviewing our gender pay gap information as it enables us to address any areas of inequality which may be identified, supporting us to improve and recognise the causes and to develop and monitor solutions.

# Background

### Pay Gap reporting terms

Equal pay concerns differences between the actual earnings of male and female employees doing like work, or work of equal value.

The gender pay gap is the average earnings difference between all male employees and all female employees in an organisation, regardless of the nature of their work. It is important to distinguish between the gender pay gap and equal pay.

### Legislative duty

The Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017 set out a public authority's gender pay gap reporting duties, which form part of its public sector equality duty (PSED) under the Equality Act. This report is calculated using the approach required by the legislation, which compares the pay of males and females.

These duties mean that we are obliged to publish information about:

- The gender split of our workforce
- The differences in mean and median hourly pay rates between genders
- The gender profile of the organisation split into quartiles
- The differences in bonus pay between genders

Salaries here at the Shrewsbury and Telford Hospital NHS Trust (SaTH) for most posts up to band 9 (VSM) are determined through a job evaluation scheme called Agenda for Change (AfC). This evaluates the job and not the post holder, making it a fair, transparent and consistent process for job evaluation.

# Calculating the gender pay gap

The data in this report are based on the relevant pay periods from April 2022 to March 2023 for ordinary pay. For 'bonus' pay, the period of the 12 months to 31 March 2023 is included.

The 'bonus' pay is for monies awarded to consultants who meet the criteria for the National Clinical Impact Award scheme (NCIAs), which evolved from the Clinical Excellence Award scheme (NCEAs) in April 2022. The National Clinical Impact Award scheme aims to reward consultants who contribute most to the delivery of safe and high-quality care and the improvement of NHS services. This includes consultants and senior academic GPs who demonstrate this through their contribution to academic medicine. The word 'bonus' is used by NHS England in their description of the criteria for the award and shouldn't be interpreted in the same way as bonuses are in other sectors such as finance and sales.



# Gender Breakdown:

Male	Gender	Headcount	Percentage
	Female	5916	79.02%
Female	Male	1571	20.98%
	Total	7487	100%

AfC Band Name	Female	Female %	Male	Male %	Total
Band 1	8	72.73%	3	27.27%	11
Band 2	1417	78.59%	386	21.41%	1803
Band 3	720	86.12%	116	13.88%	836
Band 4	468	89.50%	55	10.50%	524
Band 5	1130	84.96%	200	15.04%	1330
Band 6	1018	87.08%	151	12.92%	1169
Band 7	530	83.33%	106	16.67%	636
Band 8a	178	82.41%	38	17.59%	216
Band 8b	82	79.61%	21	20.39%	103
Band 8c	26	74.29%	9	25.71%	35
Band 8d	8	72.73%	3	27.27%	11
Band 9	9	69.23%	4	30.77%	13
Non AfC	321	40.13%	479	59.88%	800
Grand Total	5916	79.02%	1571	20.98%	7487

Trust Gender Mix: Overall, 79.02% (5,916) of Trust employees are female and 20.98% (1,571) are male. These percentages relate to the 7,487 staff included for the purposes of this calculation.

# Table 1: Average Rates of Pay - all staff (Snapshot date 31/03/2023)

Average hourly rates of pay are calculated at the specific pay point of 31 March 2023.

The hourly rate is calculated based on "ordinary pay", which is made up of basic pay, allowances and shift premium.

Our pay rates are above the national living wage.

	Average Ho	urly Rate of	Pay (all staff)	Average Bor	nus Pay	
Group/Year	2021	2022	2023	2021	2022	2023
Male	£21.73	£22.23	£22.13	£11,594.26	£11,871.78	£11,999.51
Female	£15.97	£16.62	£17.46	£7,347.09	£7,650.42	£6,612.43
Percentage Variance/Pay Gap %	26.50%	25.24%	21.07%	36.6%	35.56%	44.89%



These data shows that there is a difference of 21.07% between the mean hourly rate of pay for male employees and mean hourly rate of pay for female employees, with men earning  $\pounds$ 4.67 per hour more on average. However, we see a pattern of continued narrowing of the average hourly rate of pay over the last three years.

# Table 2a. Median Rates of Pay - all staff

Median hourly rates of pay are calculated at the specific pay point of- 31 March 2023.

The median hourly rate is calculated by selecting the mid-point for each gender group. Table 2a, below, conveys the difference between the median hourly rate of pay of male full-pay relevant employees and female full-pay relevant employees.

	Median Hourly Rate of Pay			Median Bonus Pay		
Group/Year	2021	2022	2023	2021	2022	2023
Male	£15.65	£16.13	£16.68	£9,048	£9,048	£9,048
Female	£13.96	£14.64	£15.59	£6,032	£6,032	£5,289
Percentage Variance/Pay Gap %	10.82%	9.24%	6.51%	33.33%	33.33%	41.54%

These data show that there is a difference of 6.51% between the median rate of pay for male employees compared to female employees, with men earning on average £1.09 more an hour at the median hourly rate of pay. The data from the last three years show a pattern of decrease in the median hourly rate of pay between male and female employees.

Tables 1 and 2 above show that in respect of 'the gender bonus gap' there is a 44.89% variance in average bonus pay between male and female employees, in favour of male employees. Similarly, there is a 41.54% variance in median bonus pay between male and female employee, again in favour of male employees. The data on bonus pay is further expatiated in tables 2b below.

# Tables 2b. Gender bonus pay summary (including Bank workers)

Gender	Employees Paid Bonus	Total Relevant* Employees	% of Employees Paid Bonus
Male	78	1894	4.12%
Female	32	6927	0.46%

\*Consultants and senior academic GPs who meet the criteria of the National Clinical Impact Award scheme and those who still benefit from its predecessor, the National Clinical Excellence Award scheme.



Average and median nouny earnings – medical and Dental Stan Only	Average and Median hourly	y earnings – Medical and Dental Staff only
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Gender	Avg. Hourly Rate	Median Hourly Rate
Male	£39.63	£39.58
Female	£35.29	£31.05
Difference	£4.34	£8.53
Pay Gap %	10.96%	21.54%

### Male and female employees in each quartile – Medical and Dental staff only

Quartile	Female	Male	Female %	Male %
1	88	94	48.35%	51.65%
2	71	111	39.01%	60.99%
3	69	114	37.70%	62.30%
4	56	127	30.60%	69.40%

The 'Relevant Employees' information drawn from the electronic staff record, (a payroll database) indicates that 0.46% of the Trust female workforce were in receipt of bonus pay compared to 4.12% of the male workforce who received bonus pay. This is reflective of the National Clinical Excellence Award Scheme for consultants and GPs who have been recognised and rewarded for demonstrating they have met the criteria set by NHS England to improve NHS services and deliver safe and high-quality medicine.

When considering the gender profile across the Medical and Dental quartile pay bands it is evident that as of 31 March 2023, according to their average hourly earnings, women are less well represented from the first to the fourth quartile. This may contribute towards the reflection from the bonus data where there is a significant difference in the male to female ratio of employees paid bonus.

# Table 3. Average hourly rate of pay - excluding Medical and Dental

Group/Year	2022 Av. Hourly Rate of Pay	2023 Av. Hourly Rate of Pay
Male	£14.83	£15.64
Female	£15.65	£16.59
Percentage Variance/Pay Gap %	5.24%	6.12%

Excluding Medical and Dental staff, the percentage variance (the pay gap) favours female staff (representing approximately 79.02% of the workforce) by 6.12%.

Table 3 shows that when Medical and Dental staff are excluded from the data, there is a variance in favour of female employees of 6.12%. This has increased by 0.88% since the data were last reported in 2022. The pay gap in average hourly rates of pay between men and women in 2022 was £0.82 in favour of women, and £0.95 in 2023, again favouring women and increasing the gender pay gap by £0.13 from 2022 to 2023.



# Table 4: Median hourly rate of pay – excluding Medical and Dental

Group/Year	Median Hourly Rate of Pay 2022 (excl. Medical)	Median Hourly Rate of Pay 2023 (excl. Medical)
Male	£12.72	£13.48
Female	£14.18	£15.15
Percentage Variance/Pay Gap %	10.29%	12.39%

Excluding Medical and Dental staff, the median percentage variance (the pay gap) favours female staff by 12.39%, this is a 2.1% increase from 2022.

# **Quartile Reporting**

The NHS pay system is a sequence of nationally negotiated pay scales. There is a single pay scale divided into pay bands for non-medical staff, including nursing and allied health professionals, as well as administrative and clerical staff. There are separate scales for consultants and doctors and dentists in training. While this pay system safeguards against equal pay issues, there is a gender pay gap owing to the distribution of male and female employees.

### Staff split by Quartiles (Snapshot Date: 31/03/2023)

This method splits the proportions of male and female full-pay relevant employees in the lower, lower middle, upper middle and upper quartile pay bands (Quartiles 1, 2, 3 and 4).

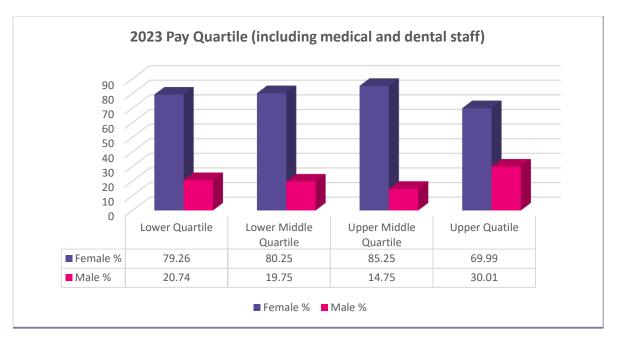
# Tables 5a. Male and female employees in each quartile - including Medical and Dental staff

Overtile	Female (number)			Male (number)		
Quartile	2021	2022	2023	2021	2022	2023
1	1450	1395	1532	339	311	401
2	1477	1707	1552	311	332	382
3	1538	1472	1647	251	211	285
4	1254	1203	1355	536	527	581

Note: 1st Quartile = lowest. 4th Quartile = highest.

	Female %			Male %		
Quartile	2021	2022	2023	2021	2022	2023
1	81.05%	81.77%	79.26%	18.95%	18.23%	20.74%
2	82.61%	83.72%	80.25%	17.39%	16.28%	19.75%
3	85.97%	87.46%	85.25%	14.04%	12.54%	14.75%
4	70.06%	69.54%	69.99%	29.94%	30.46%	30.01%





Like the overall NHS workforce, the workforce at our NHS Trust is predominantly female, with 79.02 % female and 20.98% male staff. The gender split for the lower and middle pay quartiles are very similar to gender split across the workforce, however the upper quartile has the highest proportion of male employees at 30.01%.

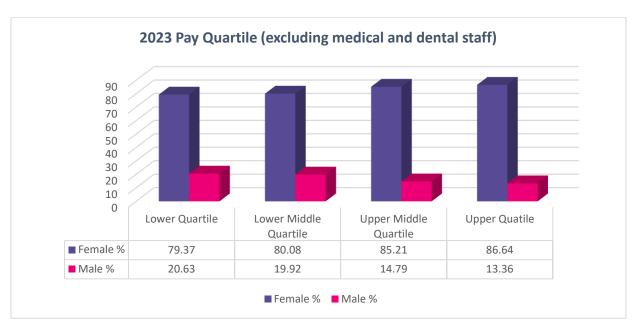
We observe a change to the proportions of male and female employees in each quartile for all staff, with an increase seen in the proportion of female employees in the uppermost quartile (quartile 4) from 69.54% last year to 69.99%; and a greater increase in male employee percentage in the lower middle quartile (quartile 2) from 16.28% to 19.75% in this year's report.

	Female (number)			Male (number)		
Quartile	2021	2022	2023	2021	2022	2023
1	1079	1262	1389	243	276	361
2	1364	1235	1403	280	293	349
3	1292	1327	1492	191	202	259
4	1293	1337	1518	192	192	234

# Tables 5b. Male and female employees - excluding Medical and Dental staff

Quartile	Female %			Male %			
	2021	2022	2023	2021	2022	2023	
1	81.61%	82.05%	79.37%	18.38%	17.95%	20.63%	
2	82.96%	80.82%	80.08%	17.03%	19.18%	19.92%	
3	87.12%	86.79%	85.21%	12.87%	13.21%	14.79%	
4	87.07%	87.44%	86.64%	12.92%	12.56%	13.36%	





In considering the gender profile across these quartile pay bands, it is evident that as of 31 March 2023, according to their average hourly earnings, men are less well represented in the upper quartile. This also partly explains the gender pay gap in the average hourly rate of pay for all staff as seen in tables 1 and 3.

# Conclusion

A trend of positive improvements can be seen in relation to the average gender pay gap for all staff over the last three years. The difference in average hourly rate of pay between men and women continues to narrow from £5.76 (2021) to £5.61 (2022) and £4.67 (2023). This narrowing gender pay gap trend is also reflected in the median hourly rate of pay for all staff.

The difference in average hourly bonus pay and the median bonus pay gap show an increase from 35.56% in 2022 to 44.89% in 2023, and 33.33% in 2022 to 41.54% in 2023. The Trust continues to see a gap between the earnings of men and women with a higher percentage of the male workforce receiving bonus pay than the female workforce.

Two overarching themes that stand out is the overrepresentation of male staff in the highest earnings quartiles in spite of their underrepresentation in the total workforce. Moreover, if the Medical and Dental workforce is excluded from the calculation, the gender pay gap becomes one which favours female staff.

The data excluding Medical and Dental staff indicates a wider gender pay gap as seen in tables 3 & 4.



#### **Cultural Dashboard**

In alignment with our Vision and support for the overall cultural transformation of the Trust, our cultural dashboard shows six key themes with data taken from our annual staff survey results. The results have shown growth in the right direction in all six themes of Visions and Values; Health and Wellbeing; Learning and Innovation; Compassion; Goals and Performance; and Teamwork.

### Visions and Values

Our Vision and Values are at the core of everything we do. They help shape our behaviours and thinking, leading to better outcomes for our patients and colleagues.

Our Values and Behaviours Framework explains what our this means for us in the Trust, and how we put our values into action. They are a key part of everything that we do, how we interact with one another, respect each other and work in an inclusive way together. They also underpin our leadership development framework and are integrated into all development activity including: inductions, our approach to talent management and the new talent conversation guidance and documentation.

Last year we undertook another weeklong engagement session on Values and Behaviour with a refresh from an EDI lens, over 300 colleagues took part around the Trust which further supported the development of local plans.

### Health and Wellbeing



Creating a healthy and positive working environment supports the delivery of the people strategy and aligns to the Promise theme 'We are Safe and Healthy'. It is essential that we **all** put staff health and well-being at the heart of our work. Our Health and Wellbeing offer has significantly grown, and the wellbeing offer now consist of a comprehensive range of support for colleagues including psychological, physical, emotional, lifestyle and financial.

The staff survey 2022 results showed an improvement in question 11a which is positive.

My organisation takes positive action on health and well-being.	202	1	202	2	Compa	rator
Strongly disagree	182	6.2%	187	5.6%	10,524	5.29
Disagree	449	15.2%	431	12.9%	22,176	10.99
Neither agree nor disagree	973	32.9%	1,072	32.0%	58,425	28.89
Agree	1,127	38.2%	1,364	40.7%	88,429	43.5
Strongly agree	222	7.5%	296	8.8%	23,620	11.6
Missing	58		42		2,472	
Positive Score	45.7	%	49.6	%	55.1	%
Negative Score	21.4	%	18.4	%	16.1	%
Base	2,9	53	3,35	50	203,1	74

The People Pulse results also shows an improvement in Health and Wellbeing over the past year, seeing us above national average in a number of areas.

As a recognition of a high number of our workforce experiencing burnout due to an extremely busy and physically and emotionally challenging roles and environment, the Trust launched



the Staff Psychology Service in March 2023 to help meet the psychological needs of our staff.



Within the 2022 staff survey indicators, there is data used in the WRES and WDES, and the below graph indicates the percentage of staff with LTC or illness who have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties, decreased from 31.0% to 29.2%, which is encouraging to see.

> Workforce [	Disabil	ity Equality St	andards		c	Survey pordination Centre
who have felt presure from their to work, despite not feeling well in their dutes out of those who wered the question	40	Percentage of staff v	vho have felt pressure from t	heir manager to come to work, their duties.		
not fu in of t	35					
felt pr espite bies ou	30					
brik, di brik, du the du	25					
Percentage of staff who have felt press manager to come to work, despite no enough to perform their duties out c answered the question	15					
	10					
age ol jer to gh to j	5					
rcent nanag	0					
Pe		2018	2019	2020	2021	2022
		2018	2019	2020	2021	2022
ff with a LTC or illness: Your org		34.8%	30.2%	34.2%	31.0%	29.2%
ff without a LTC or illness: Your o	org	21.3%	22.4%	21.8%	25.8%	21.3%
ff with a LTC or illness: Average		33.3%	32.7%	33.0%	32.2%	30.0%
ff without a LTC or illness: Avera	ge	22.8%	21.8%	23.4%	23.7%	20.8%
ff with a LTC or illness: Response	25	359	354	392	481	555
ff without a LTC or illness: Respo	onses	1149	1029	956	1243	1383

The implementation of reasonable adjustments for staff with long term health conditions remain a priority and we continue to work towards seeing further improvements. In June 2023 the NHS Launched the NHS EDI Improvement Plan, 6 High Impact actions and this links to High Impact Action 4 to develop and implement a plan to address health inequalities within the workforce.

#### Team Work

Staff networks play an important part in creating and promoting this along with a positive working environment, highlighting areas for improvement and areas of success. They are



essential to enhancing a culture of inclusivity and ensuring our people are the best version of themselves at work. We are committed to work closely with our staff networks and across the organisation to influence decision making. These networks include:

- Disability, Ability and Wellbeing Network (DAWN)
- Race, Equality and Inclusion Network
- Pride (LGBTQIA+) Network
- Multi-Faith and Belief Network

# Learning and Innovation

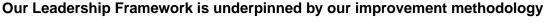
We provide a variety of ways for our people to engage, learn and develop on matters related to equality, diversity and inclusion including:

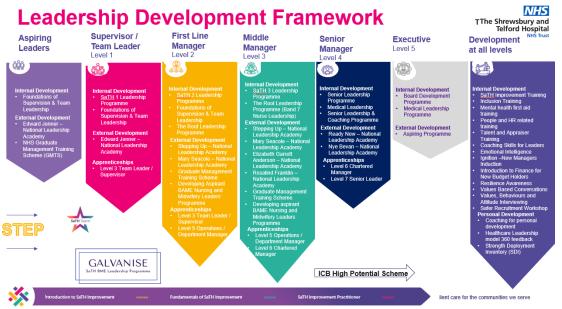
- o training and workshops to advance staff understanding
- o inclusive recruitment practices
- o civility and respect training
- o embedding inclusivity in all our polices, practices and decision making
- Schwartz Rounds

Open and honest conversations are vital to create awareness and culture change. We will continue to hold specific themed conversations where a learning or engagement gap has been acknowledged.

# **Developing our people**

We are committed to developing our people to grow and reach their full potential. We offer a number of programmes aimed at supporting staff to develop their leadership skills and reach their career aspirations.





Our Leadership Development Framework above includes a pathway for all managers and leaders. Our Strive Towards Excellence Programme (STEP) provides our managers with the fundamental management and technical skills needed to be an effective manager.

Our STEP programme is underpinned by a management competency framework aligned to the core themes of a) people, b) finance, c) governance, safety and assurance and d)



operations and now includes the NHS line manager fundamentals.

We are currently working with the operational leaders around aligning all our leadership programmes and competencies to proud to be ops campaign.

We also have a new Foundations of Supervision and Team Leadership Programme including High Potential Scheme (HPS).

## Compassion

Our 'Galvanise' leadership programme is aimed at colleagues from BME backgrounds, and we are currently part way through our second cohort. The programme has been designed to improve representation of BME, particularly from band 7 upwards. The programme involves action learning, psychometric assessments, reciprocal mentoring, coaching and observing Trust Board meetings.

Our Leadership Masterclasses continue to cover topics such as compassionate, inclusive and effective leadership, courageous conversations, situation leadership, ownership, supply and demand, creativity, appreciative inquiry, change and resilience. These are monthly and continue to be developed with topics delivered by subject matter experts.

We also deliver a range of leadership modules to leaders and aspiring leaders at all levels including values-based interviews, values-based conversations, talent briefings, flexible working, coaching skills for leaders, resilience, and emotional intelligence.

Our new talent and career platform supports our framework and provides career planning tools, self-assessments, and hundreds of online learning modules on topics such as leadership and management, diversity, confidence building, career planning, application and CV preparation, interview preparation.

We have over 25 ILM qualified coaches who support with 1:1 coaching, and we provide teambased coaching via our Affina Team Based Coaches. We also provide psychometric testing such as DiSC, SDI and MBTI as well as 360 feedback using the NHS Healthcare Leadership Model.

#### **Providing high-quality apprenticeships**

Apprenticeships can be used to attract new recruits into the NHS or to develop existing employees within their current role or into new roles to underpin service development and transformation.

We've seen continued success in the number of Trainee Nursing Associates (TNA) who have taken breaks in learning but returned to learning through an apprenticeship and have now achieved their apprenticeship. The age profile to commence on the TNA programme ranges between 19 - 54 years of age. A proportion of these have progressed on to the Registered Nurse Apprenticeship with the first cohort achieving this year. Last year, we celebrated National Apprenticeship Week with focus on a diverse group of people following a variety of apprenticeship pathways. We have seen the completion of long programmes in areas such as Medical Engineering, Radiotherapy Physics and Pathology, as well as having new cohorts just starting their programs.

We utilise Apprenticeships to 'grow our workforce of the future' accessing a wide variety of diverse Apprenticeship pathways including for example: Physiotherapist, Radiographer, Occupational Therapist, Operating Department Practitioner and Advanced Clinical Practitioner. We are encouraging more young people, both male and female to apply for entry level programmes such as Customer Service and Business Administrator roles. Where young people have joined our organisation in these roles many have progressed their careers to higher level roles, often accessing higher level apprenticeships to support their further development. Currently we have our people undertaking apprenticeship on over 50 different programmes covering a wide variety of occupational roles and supporting the development of



their leadership and management skills.

The first edition of our SaTH Education Prospectus was released this year, and it sets out some of the work in progress which has embraced cultural dimensions, improvement, information technology, research and innovation, technical and scientific discoveries. This aligns with the agenda of 'Reform' within the *NHS Long term Workforce Plan* for working and training differently. Our education prospectus is accessible on the Trust intranet website:-SaTH Education Prospectus by The Shrewsbury and Telford Hospital NHS Trust - Issuu

### **Goals and Performance**

We are currently in the process of reviewing the Trust's Recruitment and Selection Policy, our current practices, including the 6 high impact actions and best practice. We are also reviewing our onboarding arrangements for all new starters, as part of our retention work. This is to ensure that as a Trust we are all working together to provide the best possible start for our new joiners.

Inclusive recruitment practices are fundamental in how we attract and recruit staff. We are committed to enable people with disabilities, long term health conditions and or are neurodivergent to receive equitable access and opportunities from the point of recruitment throughout their employee lifecycle. Adjustments include changes to our processes and practices, installation of adaptable software. We continue to develop fair recruitment practices to ensure equal access to employment opportunities for all, including a trial in sending out the interview questions before the interview. We aim to work more closely with our partners to support, train and provide resources for our people and managers such as Autism, ADHD, and Dyslexia.

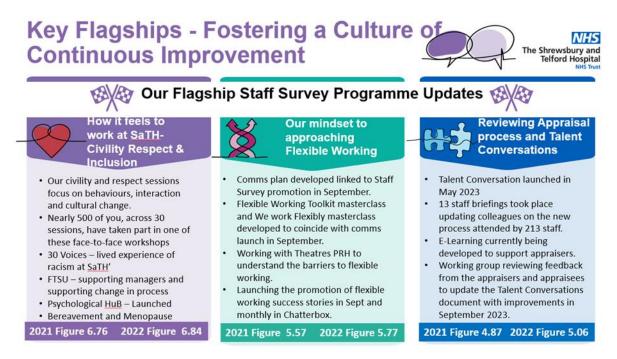
### Learning and Innovation

We are dedicated to attracting and retaining a diverse and productive workforce. This requires our information to be helpful including adaptations to meet the needs of the different groups of staff, which could include style and format of our information. This is important to ensure everyone has access to development and training opportunities we offer. The launch of our new learner-centric Learning Made Simple (LMS) will bring together all elements of our learning, leadership and careers offer in to one place providing improved access that supports all our people in reaching their potential. Understanding barriers and working through different ways to engage and connect, we have been able to develop programmes of work such as our Galvanised programme.



## **Our Flagship programmes**

Our flagships programmes continue to make progress:



### Compassion

Over 1000 people have participated in our Civility Saves Lives workshops as part of our Cultural /transformation Programme, supporting the embedding of our core values.

Our mindset to approaching flexible working is to support all staff to achieve an effective balance between work and life's other needs, while continuing to meet the needs of our services. We have recently updated our flexible working policy and home working policy in accordance with guidance from NHS Employers. All our job adverts have a statement outlining our commitment to flexible working. We have also implemented flexible working masterclasses for employees and managers, at which the benefits of flexible working and the different options open to staff are discussed. There is more momentum on flexible working, and we are on a journey to develop Team Based Rostering, which is being trialed in one ward with another ready to start the process. We recognise that for many of our staff this flexible approach to working and learning will provide additional opportunities to contribute, and for some this could see them take-up opportunities that might have previously been out of reach or sight.

#### **Goals and Performance**

We have reviewed and updated our appraisal process and have launched our new talent conversations guidance and documentation, following feedback from staff focus groups and the staff survey. Our approach to talent management recognises that all of our people have talents with a focus on having a quality conversation to provide feedback on performance, agree work objectives for the coming year, identify development needs and thoughts about future aspirations. There is an opportunity to gather 360 feedback as part of the process.

There is a further opportunity to have a career conversation with either a line manager or a coach to discuss career aspirations. We have used our experience from being involved in the NHS Scope for Growth pilot to develop our career conversation approach.

Our talent and career platform also supports talent conversations and provides managers and staff with useful signposting either during or after a talent conversation.



# Next Steps

This data will be reviewed and used to:

- Inform the SaTH Equality, Diversity and Inclusion Group and to update our EDI strategy, objectives and action plans for improvement.
- Raise awareness of shared parental leave entitlements and flexible working opportunities through communications.
- Provide support for women returning to work through shared parental leave, job sharing, part-time, and term-time only opportunities, as well as additional flexible working approaches.
- Encourage men to take advantage of arrangements which enable them to fulfil their caring responsibilities, such as shared parental leave, part time working and compressed hours.
- Value equality, diversity and inclusion through equitable and fair processes
- Develop an environment where staff feel valued and able to speak up.

We are committed to:

- Collating evidence for the six High Impact Actions Plan to eliminate pay gaps with respect to race, disability and gender in line with the 'Mend the Gap' review recommendations.
- Embed recommended actions into other relevant EDI Action Plans, such as WRES (Workforce Race Equality Standard) and WDES (Workforce Disability Equality Standard) and the 6 High Impact Actions where there is crossover in actions identified.
- Set up a Gender Pay Gap Working Group to meet following 2023 Staff Survey results and submission of 2023 Gender Pay Gap data to sense-check actions and identify any new actions.
- Job review for bands 2 and 3 Clinical Support Workers to ensure job roles are accurately recorded and correctly paid through the job evaluation process.

The past year has seen much progress on our Equality, Diversity and Inclusion agenda as outlined above with regards to reducing the pay gap. Each month we have been involved with a significant number of engagement and reward and recognition events, and continue to work hard to empower colleagues to speak up, promote our culture and leadership programme and embed EDI in everything we do. We recognise there is more to be done with and for our people and the communities we serve.

The Gender Pay Gap Report is also an important part of our improvement agenda, and we will continue to strive to make SaTH a great place to work by attracting and retaining employees from all the communities we serve, offering inclusive, fair and equitable career opportunities at all levels in line with our NHS People Promise.



Definitions for gender and ethnicity pay gap reports

Key Word	Definition
Gender pay gap:	The difference between the average earnings of men and women, expressed relative to men's earnings. This is a broad measure of the difference in the average earnings of men and women, regardless of the nature of their work.
Equal pay:	A legal requirement that within an organisation, male and female staff members who are engaged in equal or similar work or work of equal value must receive equal pay and other workplace benefits. This definition is included for clarification purposes as this report relates to the gender pay gap, and not equal pay.
Ordinary pay:	Basic pay, paid leave, including annual, sick, maternity, paternity, adoption or parental leave (except where an employee is paid less than usual or nothing because of being on leave), high-cost area and other allowances, shift premium pay, and pay for piecework. This would include on call framework and banding supplement in doctors' pay, for example.
Agenda for Change:	This pay system covers all staff except doctors, dentists and very senior managers. Each of the nine pay bands has a number of pay points. Staff will normally progress to the next pay band after the required number of years until they reach the top of the pay band. In addition to basic pay, there is also extra pay for staff who work in high-cost areas such as around London. (Reference: <u>Agenda for change - pay rates   Health</u> <u>Careers</u> )
Bonus pay:	'Bonus pay' is defined as financial reward and recognition given to consultants and senior academic GPs who meet the criteria for the National Clinical Impact Award scheme and its predecessor, the Clinical Excellence Award scheme.

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