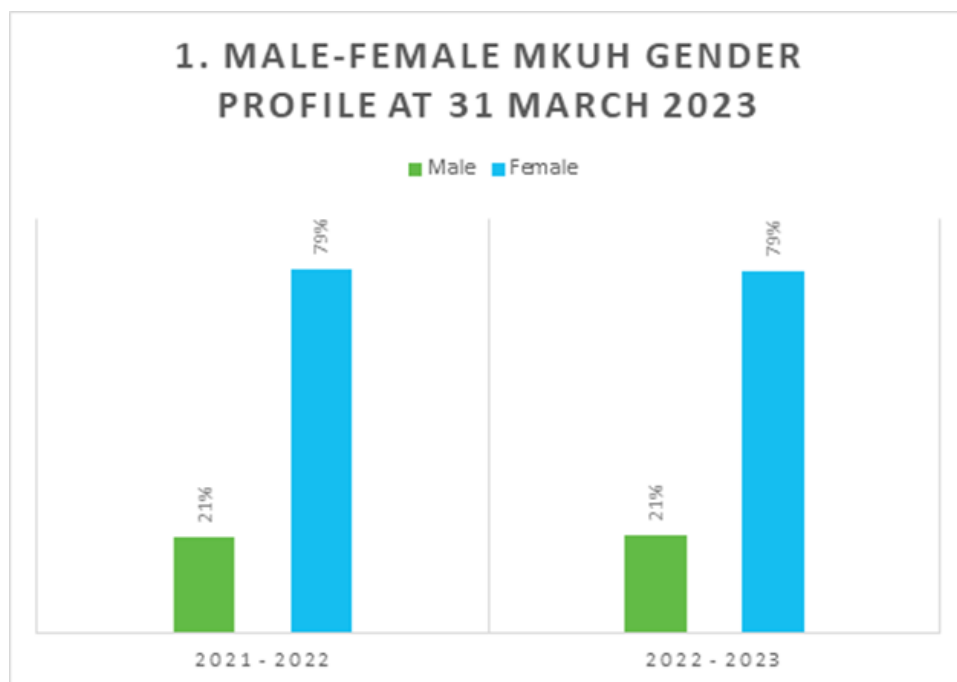


Milton Keynes University Hospital NHS Foundation Trust Gender Pay Gap Report as at 31 March 2023

As Milton Keynes University Hospital NHS Foundation Trust (MKUH) employs more than 250 staff the Trust is required under the Equality Act 2010, to publish information on its gender pay audit. This report sets out the 2023 gender pay gap in comparison to 2022 data along with actions for the Trust to address its gender pay gap.

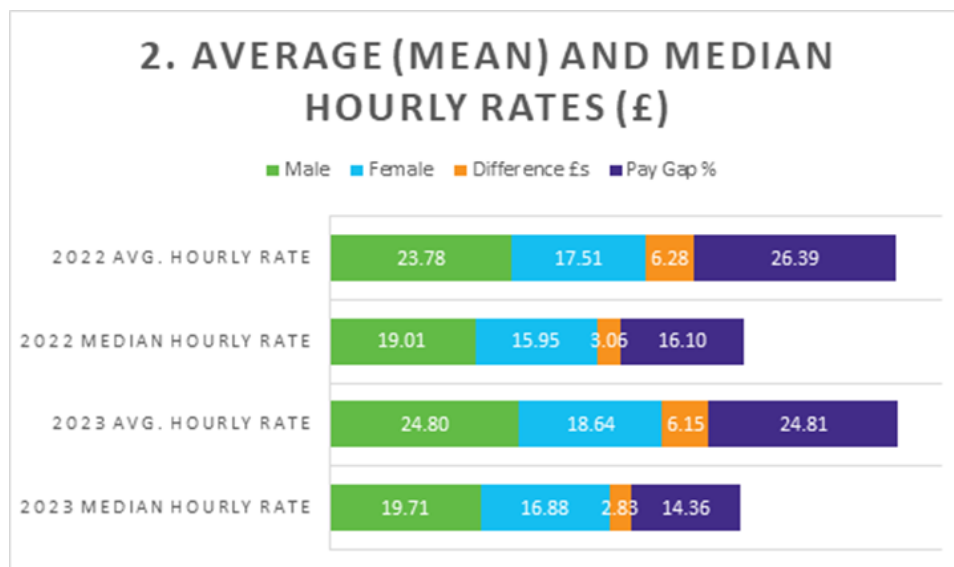
Whilst the gender profile of the Trust's workforce remains static, the gender pay gap is reducing year on year, with the median gap moving from 20% in 2020 down to 14.36% in 2023. This is a significant improvement.

1. Gender Profile (Male – Female)



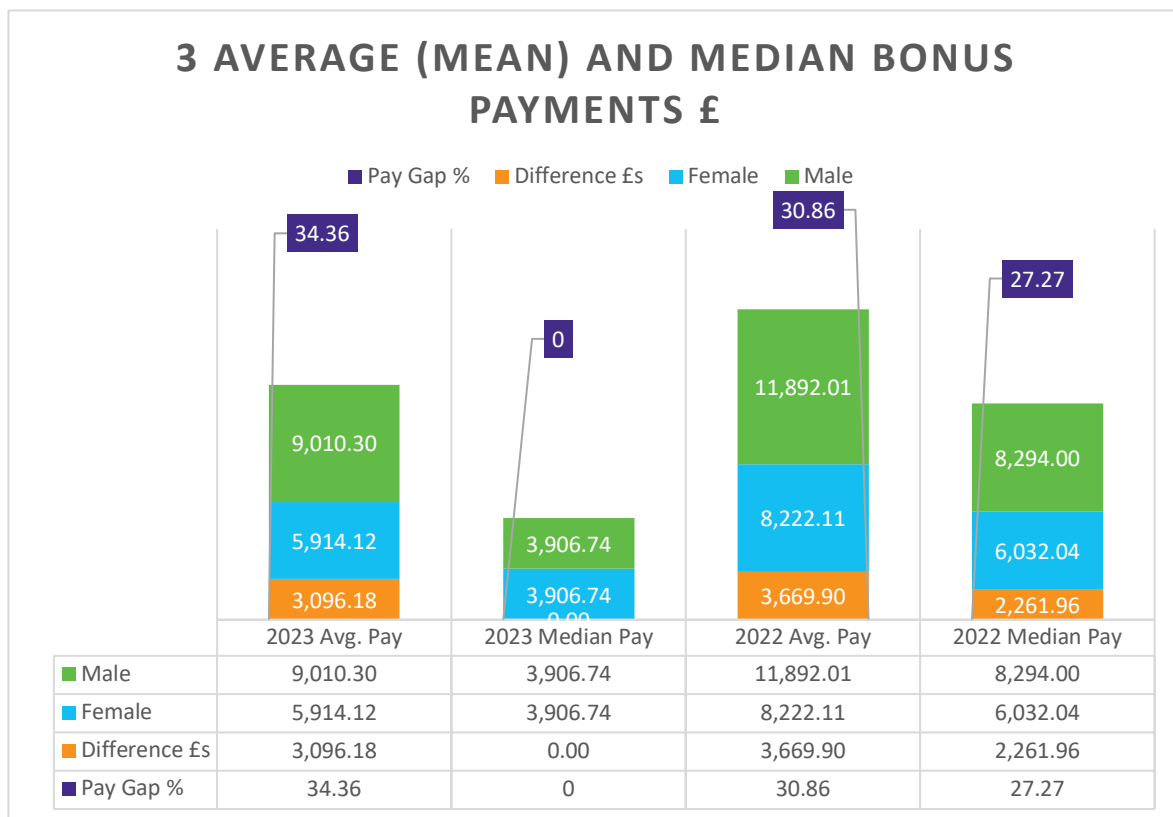
The male-female gender profile of the Trust on 31 March 2023 is 21% (888) male and 79% (3265) female. This figure is a breakdown of substantive staff (excluding bank workers).

2. Average (Mean) and Median Hourly Rates



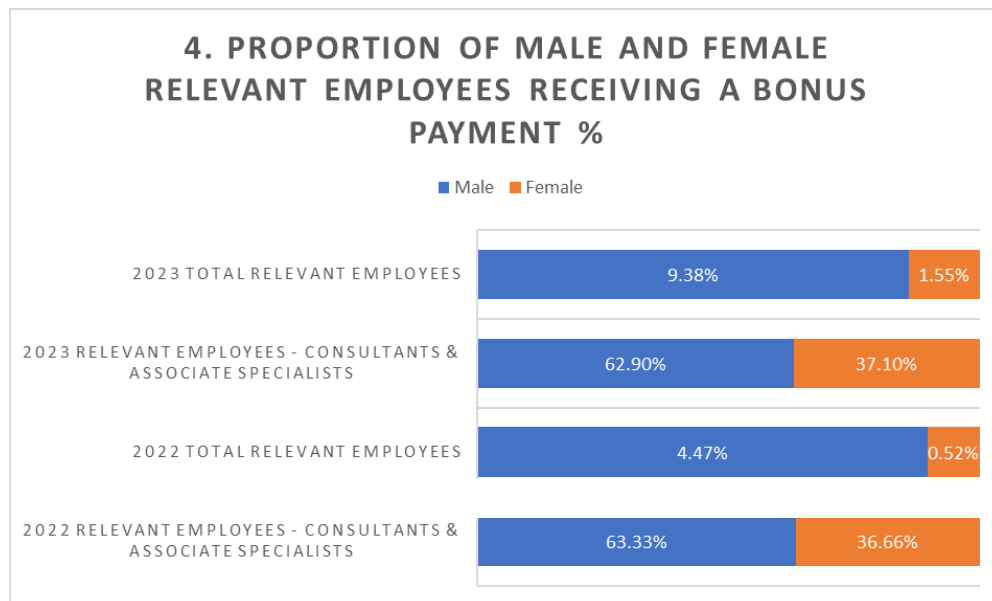
- 2.1. The average (mean) hourly rate of pay is calculated as of 31 March 2023. The hourly rate is calculated for each employee based on 'ordinary pay', which includes basic pay, allowances and shift premium pay. These figures also include bank workers.
- 2.2. The median hourly rate of pay is also calculated from 31 March 2023. The median rate is calculated by selecting the average hourly rate at the mid-point for each gender group.
- 2.3. The percentage variance for the average hourly rate of pay is 24.81%. This calculation is based on the average hourly rate of pay of female staff compared to male staff. Since the average is calculated over a wider distribution of staff (almost 4 times more female than male staff), some degree of variance is to be expected. This has reduced from 26.38% in the previous period (2022), 27.39% in 2021 and 28.86% in the 2020 period.
- 2.4. The percentage variance for the median hourly rate of pay is 14.36%. For MKUH, statistically, this is more indicative than the hourly rate of pay as it is not impacted as much by the female-to-male ratio. Consideration of the various roles within the Trust will need to be given when reviewing the variance. This has reduced from 16.10% in the previous period (2022), 18.74% in 2021 and 20.00% in the 2020 period.
- 2.5. Agenda for Change (AfC), other NHS pay grade structures, and Terms and Conditions of Service are negotiated at a national level. Progression (where applicable) through pay increments is applied in line with national policy for all staff. When calculated in this manner, the gender pay gap should be negligible, and gaps may therefore be attributed to factors highlighted within the conclusions of this report.

3. Average (Mean) and Median Bonus Payments



- 3.1. As an NHS Trust the pay elements that fall under the bonus pay criteria comprise annually negotiated and awarded local Clinical Excellence Awards (or Discretionary points for Specialty and Associate Specialist Grades) and are only applicable to certain groups of Medical and Dental Staff.
- 3.2. Average bonus pay is calculated from the total bonus pay period received in the 2023 financial year (01 April 2022 to 31 March 2023). The median values are based on the mid-point of all staff, including bank workers, receiving bonus pay by each gender group.
- 3.3. The percentage variance for the median bonus payment is 0%. The pool of consultants in receipt of Clinical Excellence Awards contains a mixture of new and old-style pay awards, dependent on the consultants' contract. The majority of consultants received a bonus of £3906.74 as the pot was split equally through a non-competitive award round, with senior consultants on older contracts in receipt of higher amounts. This means that the median pay gap is 0% however, because there are more male consultants in receipt of higher bonus amounts on the old-style award, the percentage variance for the average bonus payment is 34.36%

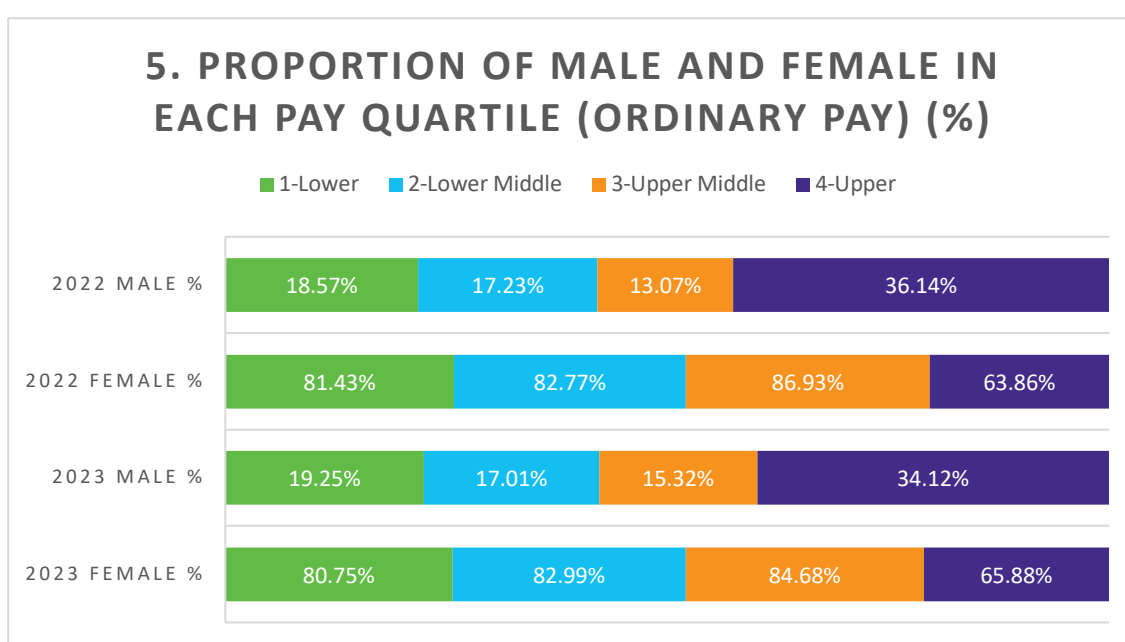
4. Proportion of Male and Female Receiving a Bonus Payment



- 4.1. This calculation expresses the number of staff receiving bonus pay as a percentage of the total number of relevant employees. It further expresses these as a percentage of the number of relevant employees who could be eligible for a bonus payment in each gender group.
- 4.2. The pay elements that fall within the eligibility for bonus pay criteria are annually awarded local Clinical Excellence Awards, which are only applicable to certain groups of Medical and Dental Staff.
- 4.3. The main form of reward within the Trust that is classified as bonus pay for the criterium purposes of this report applies to Consultant (medical and dental) staff and takes the form of Clinical Excellence Awards. These longstanding awards follow national guidance and are divided into local awards and national awards. Only one MKUH consultant (male) is in receipt of a national award.
- 4.4. Historically local clinical excellence awards have been subject to a competitive application process (open to all substantive consultants after their first year of employment in the grade) and once awarded, a clinical excellence award would be retained and paid annually on an ongoing basis. In more recent years, new awards have become non-consolidated and non-pensionable, paid as an annual lump sum (whilst those awarded prior to 2018 have been retained and paid recurrently in monthly salary).
- 4.5. For the last three years (on account of the pandemic and in line with advice from Trade Unions and NHS Employers), new local awards have been shared on a pro rata basis amongst eligible substantive consultants unless they actively opt out. Whilst the distribution of funds associated with older awards continues on an historic basis (subject to retirement and resignations), new funding allocations over the last three years have been made evenly across the eligible workforce. Over the last three years, any gender pay gap related to newly-awarded bonus pay is therefore a direct function of the demographic characteristics of the eligible group of employees. The future of local clinical excellence awards is currently subject to negotiations around national terms and conditions of employment for consultant staff.

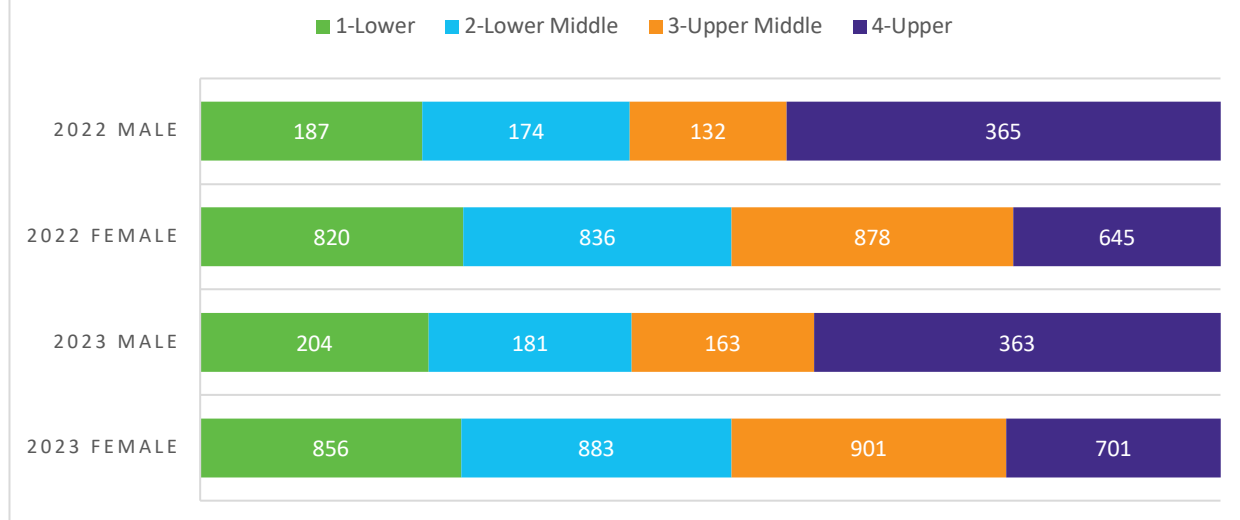
- 4.6. The gender split for this group of Medical and Dental staff is broadly replicated on a national scale. Whilst these data are of relevance to MKUH; they are less significant than the gap shown for average and median rates. The Trust, however, recognises that it can take steps locally to redress this imbalance by supporting appointments to underrepresented specialities.
- 4.7. 174 of 175 eligible consultants have received the bonus, with 1 female opting out. Of the total relevant number of employees who were paid a bonus, 36.78% are female, and 63.21% are male with no significant difference from the previous year.

5. Proportion of male and female in each pay quartile (Ordinary Pay)



- 5.1. To create the quartile information, all staff are sorted by their hourly rate of pay. This list is then split into four equal parts where possible.
 - 5.1.1. Quartile 1 – Lower: Includes all employees whose standard hourly rate places them at or below the lower quartile.
 - 5.1.2. Quartile 2 – Lower middle: Includes all employees whose standard hourly rate places them above the lower quartile but at or below the median quartile.
 - 5.1.3. Quartile 3 – Upper middle: Includes all employees whose standard hourly rate places them above the median quartile but at or below the upper quartile.
 - 5.1.4. Quartile 4 – Upper: Includes all employees whose standard hourly rate places them above the upper quartile.

5.1. PROPORTION OF MALE AND FEMALE IN EACH PAY QUARTILE (ORDINARY PAY) (N=)



- 5.2. The total staff analysed comprises a headcount of 4252 MKUH employees in receipt of ordinary pay as at 31 March 2023.
- 5.3. When reviewing the quartile information, account should be taken of the variety and types of roles available within the organisation and the gender distribution within specific roles.
- 5.4. The highest variances for quartiles for the Trust overall is found within the upper quartiles.
- 5.5. There is a higher proportion of female staff in the lower, lower middle and upper middle quartiles. Included within this group are Administration and Clerical staff, Ancillary Staff, Allied Health Professions, Nursing and Midwifery and Professional and Technical Staff Groups. A higher proportion of staff within these groups are female.
- 5.6. Quartile 1 is 80.75% female and 19.25% male, slightly changed from previous years (2022 – 81.43% female and 18.57, 2021 - female 82.02%, male 17.98%). This remains broadly representative of the overall Trust gender profile.
- 5.7. The upper quartile (Q4) at 34.12% has a lower number of male staff from the previous year, however it is still the most popular. The variance in this quartile is generally attributable to the significant gender differential amongst Medical staff and senior leadership/managerial roles within the Trust. This is countered by a higher proportion of female staff within the Scientific, and Nursing and Midwifery staff groups.

6. Conclusions

- 6.1. Whilst the gender profile of the Trust's workforce remains static, the gender pay gap is reducing. In 2020 the median pay gap was reported at 20.0%, and in 2021 it was reported at 18.74%; in 2022, the median pay gap was 16.10%. In 2023 the median pay gap is 14.36%.
- 6.2. The proportion of staff receiving bonus payments has changed from the previous year. All eligible staff received the bonus unless choosing to opt out and, instead of rewarding clinical excellence on a sliding scale depending on contribution, the award was pro-rated.

In effect, awards were given at the necessary value for Consultants on the old-style of contract and then the remainder was split equally between all those eligible for the new award.

- 6.3. There is a higher proportion of female staff within the lower, lower middle, and upper middle pay quartiles and a higher proportion of male staff within the upper quartile.

7. Recommendations

- 7.1. Encouraging female career progression through coaching and mentoring, and positive action initiatives.
- 7.2. Family-friendly policies and return to work from maternity leave.
- 7.3. Talent management pathway for women, which offers coaching and mentoring, including reverse mentoring opportunities.
- 7.4. Working with the Women's Network, the Trust should undertake a deep dive into workforce data to identify roles and bands where women are underrepresented.
- 7.5. Reporting on Gender and wider Equality and Diversity data.
- 7.6. Continuing to offer internal and external senior management and leadership development programmes for all managers and monitor their uptake by protected characteristics.
- 7.7. Providing oversight and assurance of delivery of the Trust's Equality, Diversity and Inclusion agenda through the Workforce Strategy, Workforce Board and to the Trust Board as delegated through the Workforce and Development Assurance Committee
- 7.8. Sharing gender pay gap results with the Women's Network and co-producing an action plan.
- 7.9. Continuing support and development of Staff Equality Networks

At Milton Keynes University Hospital NHS Foundation Trust, we will actively participate in opportunities that support our commitment to building an inclusive culture enabling us to improve equality, diversity and inclusion at all levels.

I confirm that the information contained within this report is accurate.

Joe Harrison
Chief Executive