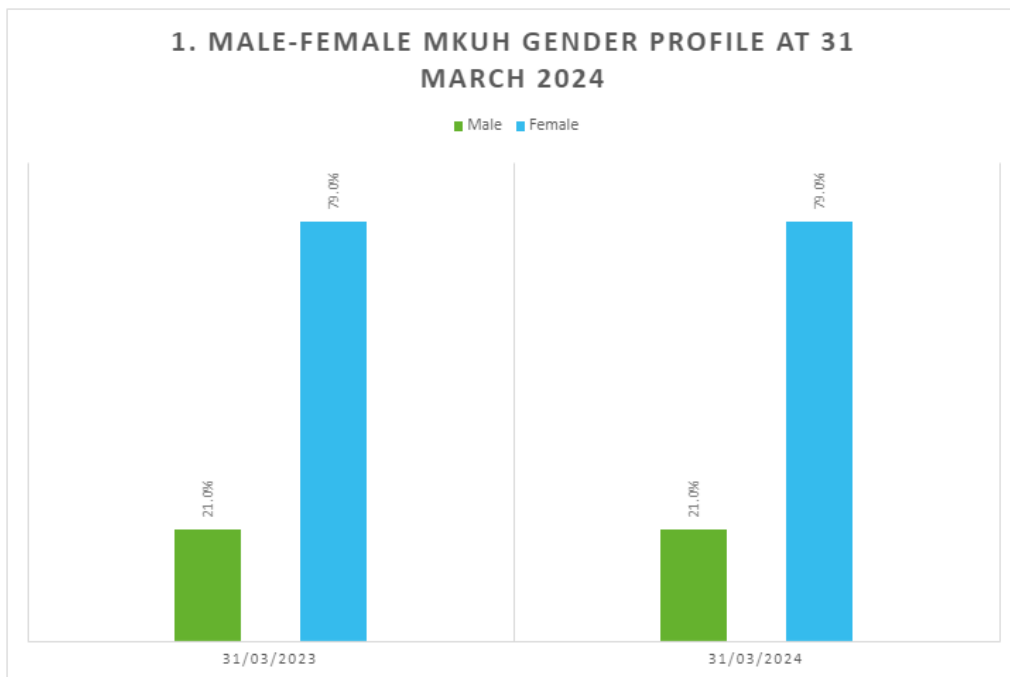


Milton Keynes University Hospital NHS Foundation Trust Gender Pay Gap Report as at 31 March 2024

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 2024 gender pay gap in comparison to 2023 data along with actions for the Trust to address its gender pay gap.

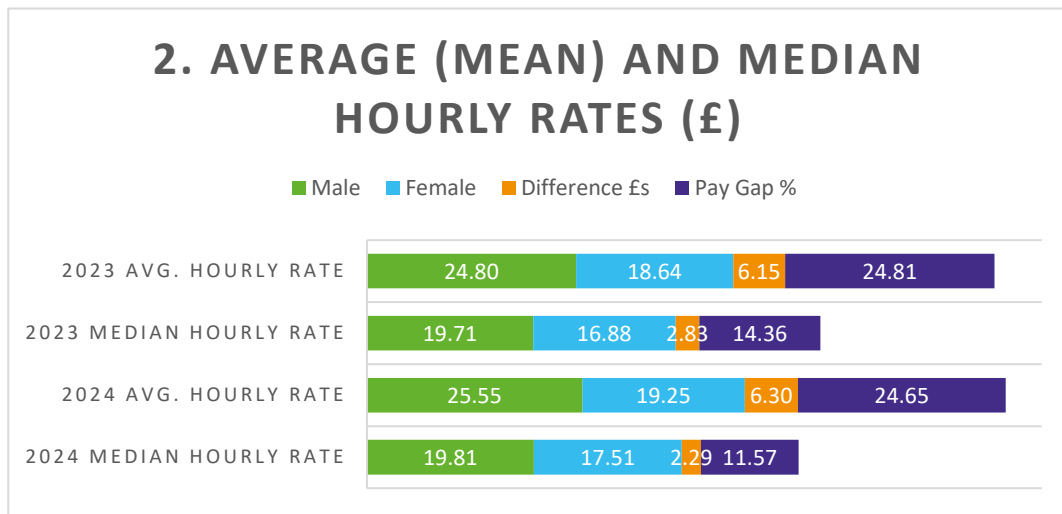
Whilst the gender profile of the Trust’s workforce remains static, the gender pay gap is reducing year on year, with the median gap moving from 20% in 2020 down to 11.57% in 2024. This is a significant improvement.

1. Gender Profile (Male – Female)

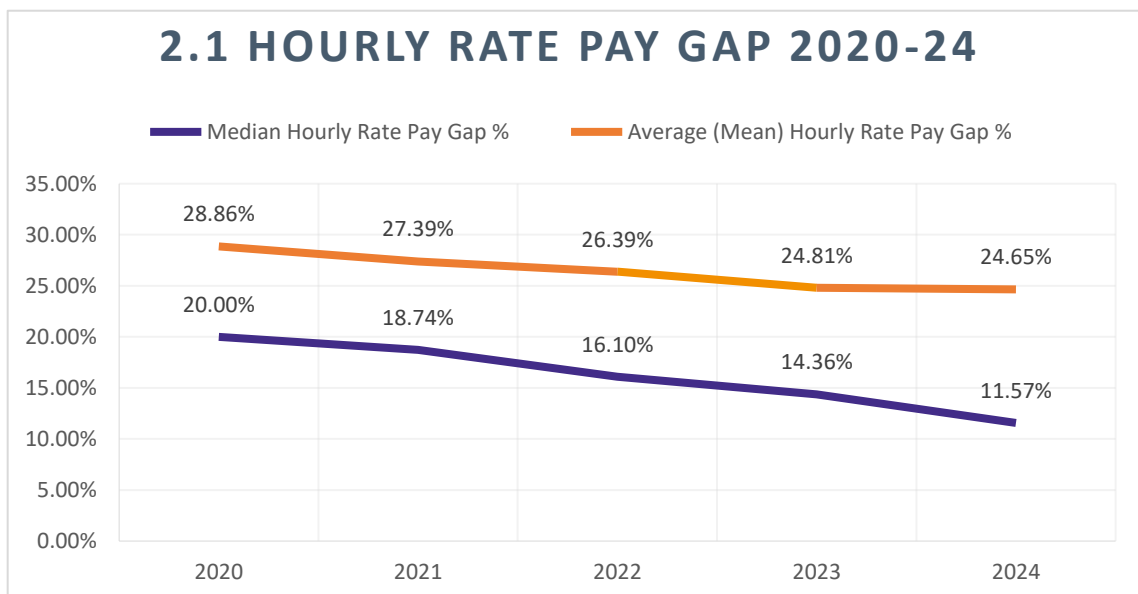


The male-female gender profile of the Trust on 31 March 2024 is 21% (952) male and 79% (3579) female. This includes all substantive assignments.

2. Average (Mean) and Median Hourly Rates



2.1. The average (mean) hourly rate of pay is calculated as at 31 March 2024. 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.

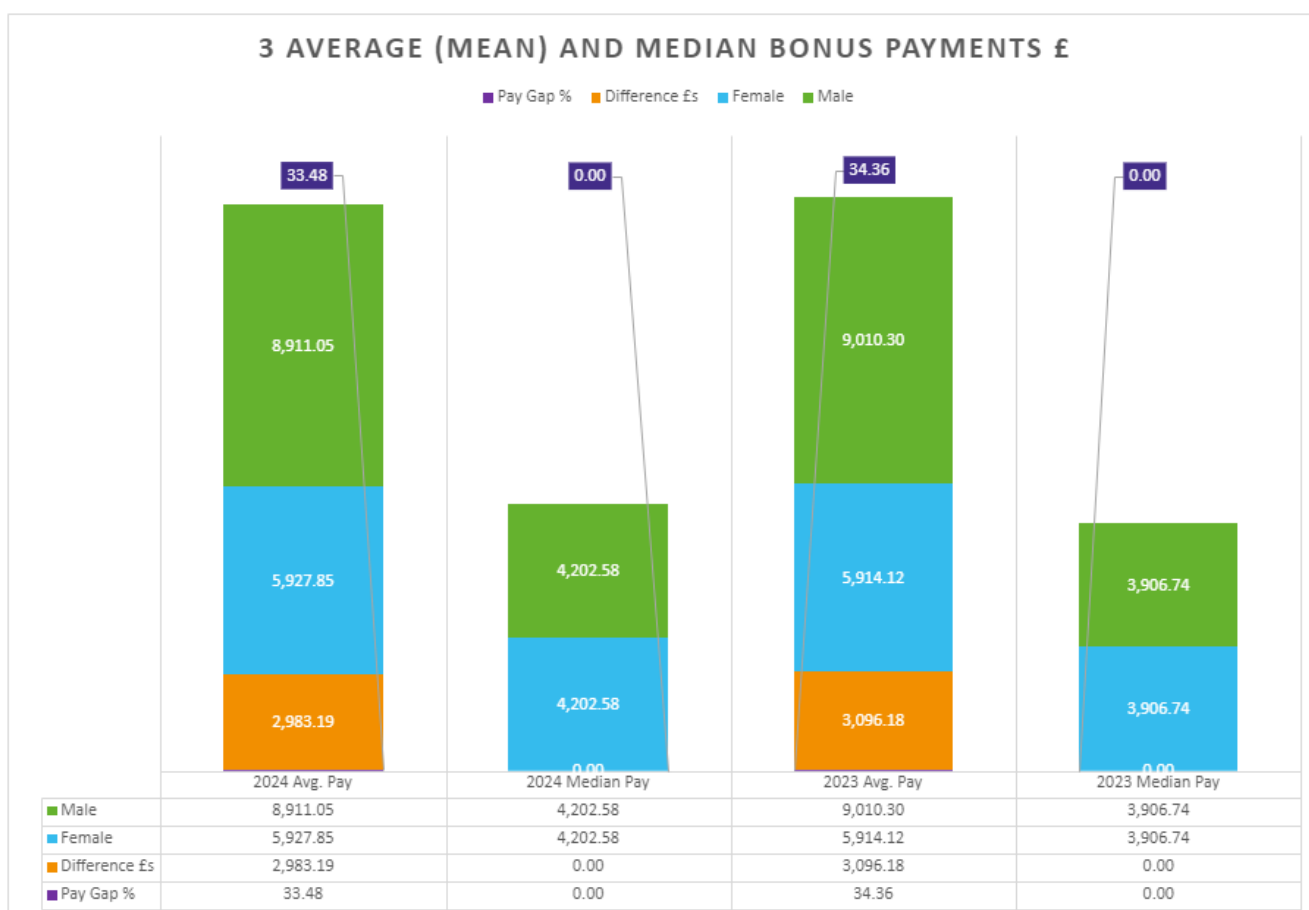


2.2. The percentage variance for the average hourly rate of pay is 24.65%. This calculation is based on the average hourly rate of pay of female staff compared to male staff. Since the average is calculated over a wider distribution of staff (almost 4 times more female than male staff), some degree of variance is to be expected. This has reduced from 24.81% in the previous period (2023).

2.3. The median hourly rate of pay is also calculated as at 31 March 2024. The median rate is calculated by selecting the middle salary point (based on hourly pay) for each gender group when arranged in order.

- 2.4. The percentage variance for the median hourly rate of pay is 11.57%. 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 14.36% in the previous period (2023).
- 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.

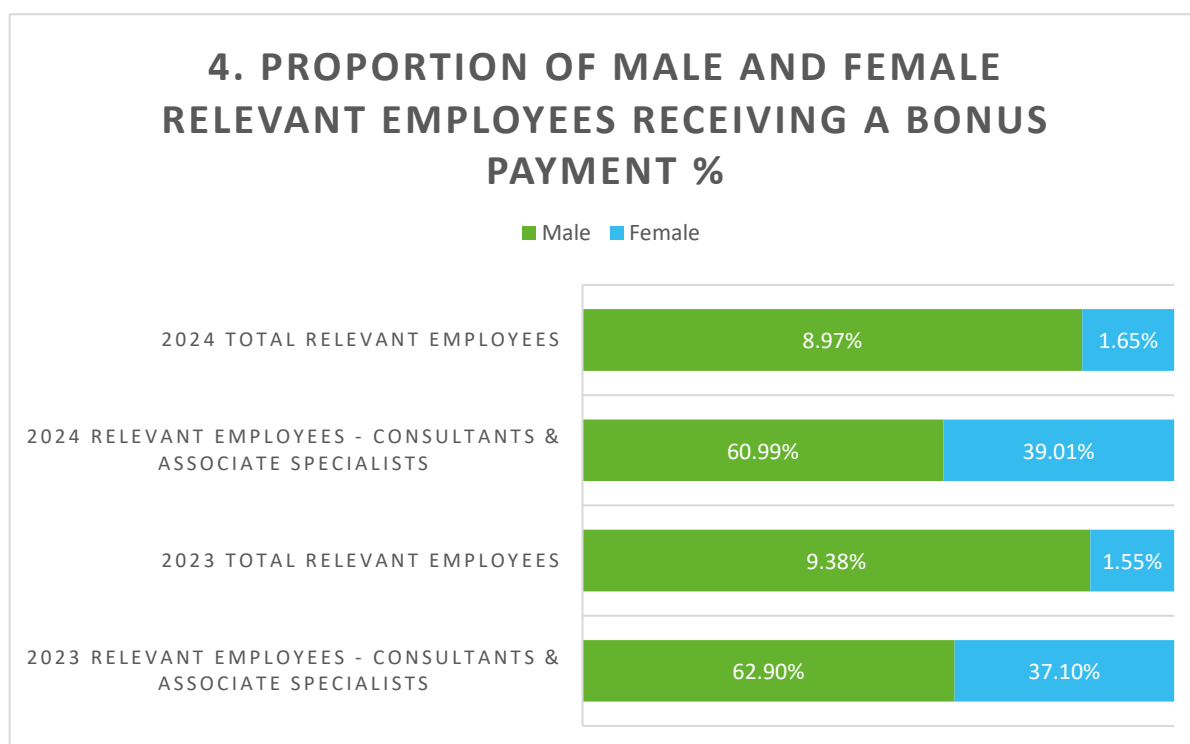
3. Average (Mean) and Median Bonus Payments



- 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 2024 financial year (01 April 2023 to 31 March 2024). 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 £4202.58 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 as 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 33.48%.

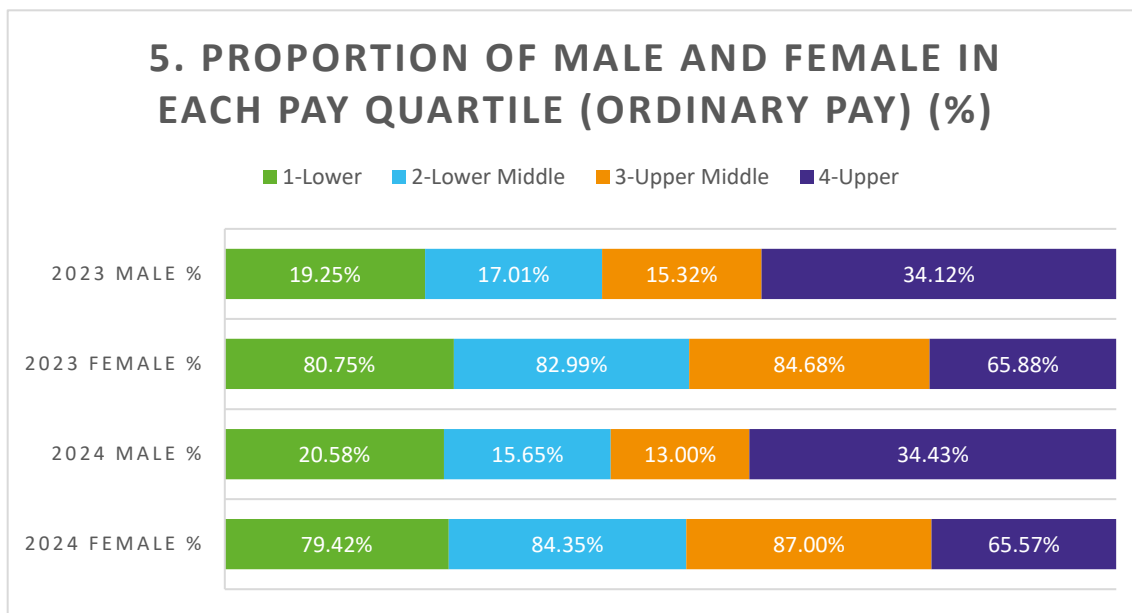
4. Proportion of Male and Female Receiving a Bonus Payment



- 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.

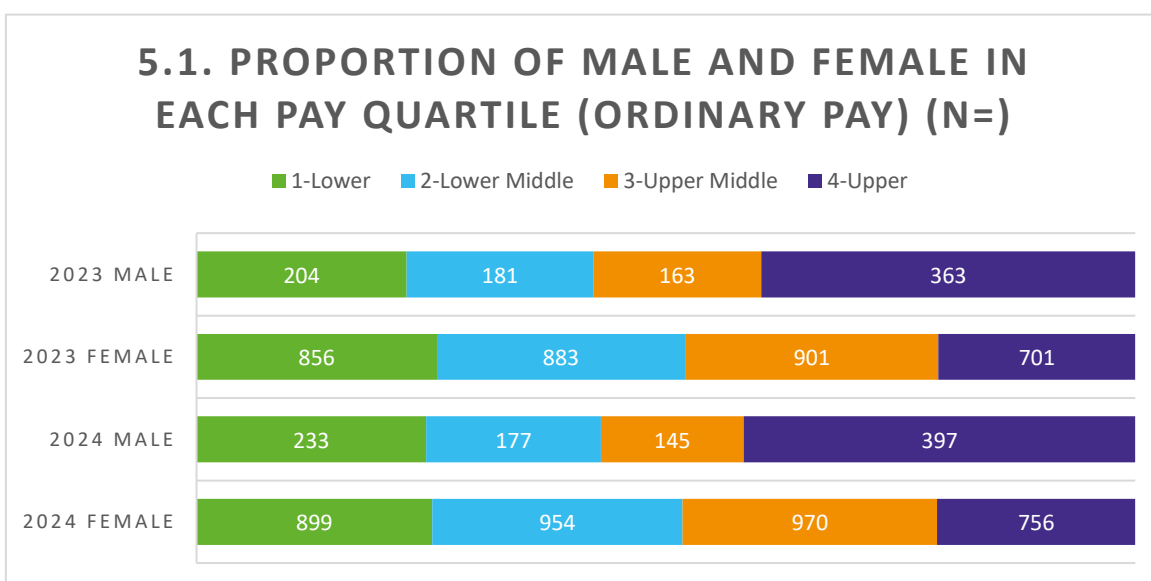
- 4.4. Historically local Clinical Excellence Awards have been subject to a competitive application process (open to all substantive consultants after their first year of employment in the grade) and once awarded, a clinical excellence award would be retained and paid annually on an ongoing basis. In 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 four 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 four years have been made evenly across the eligible workforce. Over the last four 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. 182 of 182 eligible consultants have received the bonus. Of the total relevant number of employees who were paid a bonus, 39.01% are female, and 60.99% are male. This is a 1.91% increase for female employees from 2023, which is the largest increase since 2020.

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.

- Quartile 1 – Lower: Includes all employees whose standard hourly rate places them at or below the lower quartile.
- Quartile 2 – Lower middle: Includes all employees whose standard hourly rate places them above the lower quartile but at or below the median quartile.
- Quartile 3 – Upper middle: Includes all employees whose standard hourly rate places them above the median quartile but at or below the upper quartile.
- Quartile 4 – Upper: Includes all employees whose standard hourly rate places them above the upper quartile.



- 5.2. The total staff analysed comprises a headcount of 4531 MKUH employees in receipt of ordinary pay as at 31 March 2024.
- 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 are 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. The lower quartile (Q1) is 79.42% female and 20.58% male, slightly changed from previous years (2023 – 80.75% female and 19.25% male, 2022 – 81.43% female and 18.57% male, 2021 – 82.02% female and 17.98% male). This remains broadly representative of the overall Trust gender profile.
- 5.7. The lower and upper middle quartiles (Q2 and Q3) have seen an increase in female employees, rising to 84.35% and 87.00% in 2024, from 82.99% and 84.68% in 2023.
- 5.8. The upper quartile (Q4) for male employees has grown slightly to 34.43% in 2024, from 34.12% in 2023. Whilst the lower three quartile changes for female show improvement, and the proportion of female employees in the upper quartile (Q4) has increased in number, the proportion of female employees in the upper quartile has decreased slightly to 65.57% in 2024, from 65.88% in 2023.
- 5.9. The variance in the upper 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 2024 the median pay gap is 11.57%. This is a reduction of 8.43% over five years.
- 6.2. The proportion of staff receiving bonus payments has changed from the previous year, with an increase of female employees receiving Clinical Excellence Awards. There were no employees who opted out this year and as with the previous year, 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 remains 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. Analyse upper quartile male data to understand reasons for disproportionate increase of male appointments to more senior roles.
- 7.2. Review of senior role job adverts, ensuring gender decoder utilised and flexible working promoted on all adverts.
- 7.3. Encourage female career progression through coaching and mentoring, and positive action initiatives.
- 7.4. Further promotion of family-friendly policies, return to work from maternity leave and menopause awareness.
- 7.5. Implement a Sexual Safety at Work Policy to address and prevent further challenges for females at work.
- 7.6. Continue Trust wide Cultural Awareness training with a focus on gender.
- 7.7. Talent management pathway for women, which offers coaching and mentoring, including reverse mentoring opportunities.
- 7.8. Work with the Women's Network, the Trust should undertake a deep dive into workforce data to identify roles and bands where women are underrepresented and barriers to progression.
- 7.9. Report on Gender and wider Equality and Diversity data.
- 7.10. Continue to offer internal and external senior management and leadership development programmes for all managers and monitor their uptake by protected characteristics.
- 7.11. Provide oversight and assurance of delivery of the Trust's Equality, Diversity and Inclusion agenda through the Workforce Strategy to the Trust Board as delegated through the Workforce and Development Assurance Committee
- 7.12. Share gender pay gap data with departments to ensure this is considered and helps form objectives and priorities in workforce and succession planning.
- 7.13. Continue support and development of Staff Equality Networks.
- 7.14. Share gender pay gap results with the Women's Network and co-producing a long-term action plan spanning three years.

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