

Somerset NHS Foundation Trust Gender Pay Gap Report (2020-21)

Introduction

1. This report provides the Trust's gender pay gap information based on data for the period including the snapshot date of 31 March 2021.
2. This report is published in line with the requirements set out in the Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017.

The Gender Pay Gap Indicators

3. Employers must publish calculations showing:
 - The gender pay gap as a mean average
 - The gender pay gap as a median average
 - Proportion of men and women divided into four quartiles from lowest to highest paid
 - Bonus gender pay gap as a mean average
 - Bonus gender pay gap as a median average
 - Proportion of men and women receiving a bonus payment
4. The Ordinary Pay calculations are based on hourly rate of pay that includes: basic pay, full paid leave including annual, sick, maternity, paternity, adoption or parental leave, shift premium pay, other allowances with exceptions where staff would be paid less than usual whilst on sick or maternity pay.
5. The Bonus Pay calculations include Clinical Excellence Awards (Medical and Dental staff only).

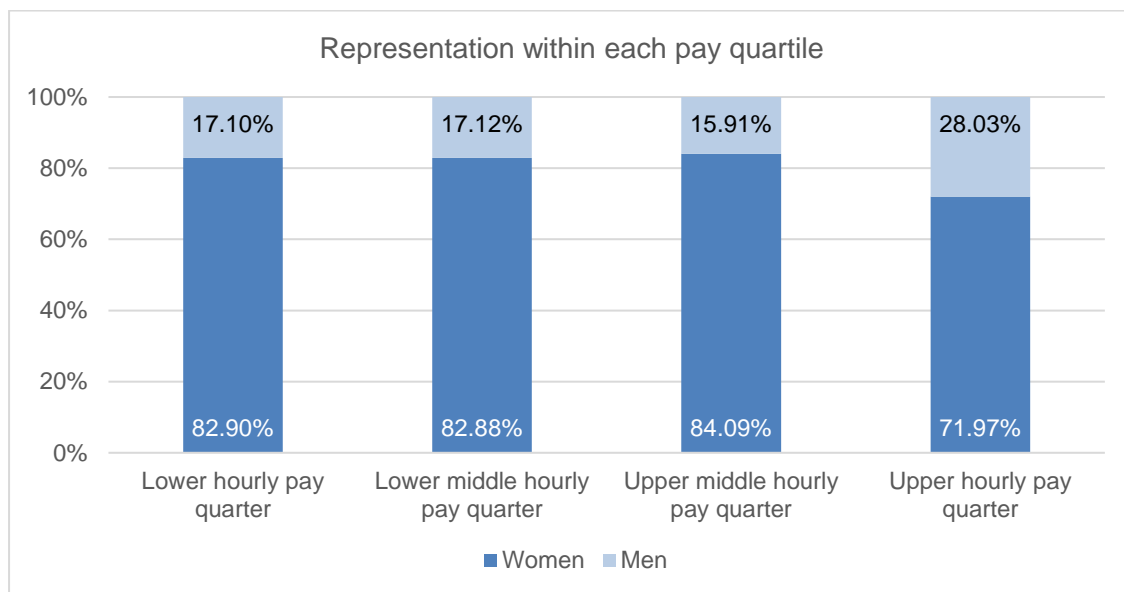
Gender Pay Gap Analysis

6. Ordinary Pay:
 - Mean Pay Gap = 22.3%
 - Median Pay Gap = 11.5%
7. Bonuses
 - Mean Bonus Gap = 28.7%

- Median Bonus Gap = 23.1%
- 0.54% of women received a bonus whilst 4.65% of men received a bonus.

8. We know that there are many factors that create the gender pay gap. Further analysis of our data has highlighted the following contributing factors:

- Data is reported within pay quartiles. While women represent the majority of colleagues at SFT (80%), the representation of women is lower within the upper pay quartile (72%). This will contribute to the gender pay gap as 36% of all male colleagues are in these higher-paying roles compared with 22% of female colleagues.



- The mean pay gap within each pay quartile is at 1%, with the exception of quartile 4, where the gap is 23%.
- When Medical & Dental roles are removed from quartile 4, the mean pay gap reduces to 6%.
- Within Medical & Dental roles, men are more highly represented in Consultant positions. The mean pay gap within Consultant roles is at 6%.
- Within different staff groups there are pay gaps that need further investigation. For example, within quartile 4 for Administrative & Clerical roles, the mean pay gap is at 13%.

9. The group of staff eligible for Clinical Excellence Awards (bonuses) are Consultants. Women represent 43% of Consultants, but received 32% of Clinical Excellence Awards. The total amount awarded in Clinical Excellence Awards to women was also lower, creating a mean bonus pay gap of 28.7%.

Next Steps:

10. In anticipation of the merger of Somerset NHS Foundation Trust and Yeovil District Hospital, the two trusts are working collaboratively to share progress and challenges, and to work towards developing a combined action plan to address the gender pay gap. In the development of this plan, we will be focusing our attention on addressing the underlying, systemic, drivers of the pay gap.
11. A more detailed analysis of our data is required to understand the key drivers of the pay gap. This detailed analysis will enable us to develop specific and impactful actions. This analysis will include:
 - Identification of any pay gaps that exist within Agenda for Change bands;
 - Identification of any pay gaps that exist within Medical & Dental pay bands;
 - An analysis of gendered representation at different pay points (i.e. salary scales within pay bands);
 - An analysis of pay gaps within Directorates;
 - An analysis of pay gaps for part time and full time colleagues;
 - An analysis of pay gaps within job roles (e.g. further exploration of the pay gap within higher-paying roles in Administrative & Clerical roles);
 - Pay gaps established at appointment, following recruitment into a new role;
 - Detailed analysis of the race pay gap, and an intersectional analysis for gender and race.
12. The analysis above will be discussed with relevant stakeholders, the women's network, and the Inclusion Steering Group. From this analysis, we will develop specific and measurable actions that target the underlying causes of inequality and underrepresentation throughout our workforce.
13. Data analysis, proposed actions, and a review of impact over time are presented and monitored through the People Committee annually.

For more information about this report, please email the Inclusion Team - inclusion@somersetft.nhs.uk