

## Gender Pay Analysis Report 2024/2025.



\*As of 31 March 2024 (snapshot date)

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#### 1. Introduction

Since April 2017, all organisations with more than 250 employees have been required to publish details of their gender pay gap. Gender pay reporting is different to equal pay which deals with the pay differences between men and women who carry out the same jobs, similar jobs, or work of equal value. The gender pay gap shows the difference in the average pay between all men and women in an organisation. Although we are only required to report on pay differentials between men and women, we do recognise that Gender is a spectrum that extends beyond the binary definition of male/female and men/women. We hope that national and local data gathering becomes more sophisticated and as more people feel comfortable to define their non-binary status (to prevent identification of individuals) to include and analyse wider (non-binary) pay.

This gender pay gap report for South Central Ambulance Service (SCAS) provides a 'snapshot' on 31 March 2024. The data for this report has been drawn from the organisation's Electronic Staff Records (ESR) and pay roll database.

## 2. Equality and our Values

At South Central Ambulance Service NHS Foundation Trust (SCAS) we are committed to promoting positive measures that eliminate all forms of unlawful or unfair discrimination on the grounds of age, marriage and civil partnership, disability, ethnicity, gender, religion/belief, sexual orientation, gender reassignment, domestic circumstances, social and employment status, political affiliation or trade union membership, HIV status or any other basis not justified by law or relevant to the requirements of the post.

The Trust, therefore, takes every reasonable step to ensure that individuals are treated equitably and fairly, with dignity and mutual respect, and that decisions in recruitment, selection, training, promotion and career management and the right to request flexible working and service provision are based solely on objective organisational factors and job-related criteria.

Our Values Based behaviours:



## 3. Message from Chief People Officer

"I confirm this report is accurate and reflects a snapshot of our organisation on 31st March 2024. We have identified several actions we will continue to undertake to improve the gender pay parity. We will undertake annual audits and publish data on our website as required by the regulations."

Natasha Dymond, Interim Director of People

#### 4. What this Audit covers

The purpose of a gender pay gap audit is to focus on comparing the pay of male and female employees and shows the difference in the average earnings.

This report provides information on the following indicators:

**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.

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.

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. South Central Ambulance Service NHS Foundation Trust has utilised the standard NHS Gender Pay Report provided as part of the NHS Business Intelligence Tool. This ensures that information is accurate, reliable, and easily contrastable and comparable with other healthcare partners and wider employers.

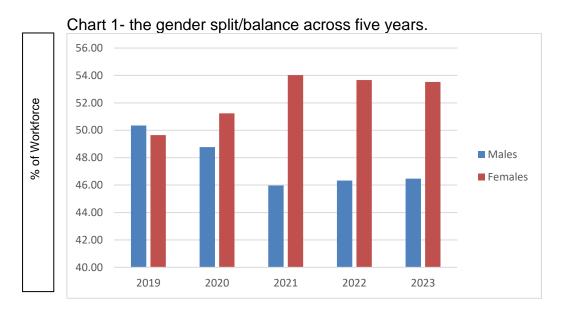
## 5. Our Workforce Gender profile

As of 31 March 2024, there were 4940 staff in post (an increase of 163 from the previous reporting period), the rounded gender split is now **45%** (2222) **male** employees and **55%** (2557) **female**. Table 1 below shows the profile over a 5 year period (on 31<sup>st</sup> March each year).

Table 1- Gender split over 5 years.

	2019	2020	2021	2022	2023	2024
Males	50.35	48.77	45.97	46.33	46.47	45.26
Females	49.65	51.23	54.03	53.67	53.53	54.74

What is worth noting is the proportion of female workforce has gradually increased over the last 5 years. However, there was a statistically insignificant dip of 0.14% from last year.



## 6. Our Gender Pay audit

#### 6.1 The Mean and Median gender pay gap

**Table 2** - Mean pay gap (hourly rate)

	Male	Female	% Gap
Mean Gender Pay Gap (hourly rate)	£18.85	£17.93	4.88%

The table above shows that men have a greater Mean hourly pay rate than women by a gap of 4.88%. This is a reduced gap from the previous year when the Mean gender hourly pay gap was 5.79% greater for men (a change of 0.91%). The changes of the percentage Mean hourly pay gap over a 5 year period show fluctuation generally in favour of men. The anomaly in 2021 suggests an impact due to the pandemic and other contributory factors such as the drop in workforce and reduction of national services.

**Table 3** -The % changes of Mean Gender Pay Gap (hourly rate) over a 5-year period.

	2020	2021	2022	2023	2024
Mean hourly % pay gap	0.74	-9.7	2.41	5.7	4.88

The <u>Median</u> hourly pay is also slightly greater for men by a gap of 0.78%. However, this is a shift (an increase of 0.2.8%) from the previous year when Median hourly rate figure for men was greater at 0.50%.

**Table 4** - Median pay gap (hourly rate)

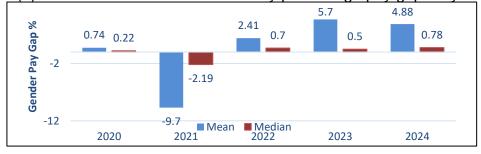
	Male	Female	% Gap
Median Gender Pay Gap (hourly rate)	£16.26	£16.13	0.78%

The changes of the percentage Median hourly pay gap over a 5 year period show that the gap has been fluctuating but has increased this year. The 'blip' in 2021 again, suggests an impact due to the pandemic and other contributory factors such as the drop in workforce and reduction of national services.

**Table 5** -The % changes of Median Gender Pay Gap (hourly rate) over a 5-year period.

	2020	2021	2022	2023	2024
Median	0.22	-2.19	0.7	0.5	0.78

The Chart (2) combined Mean & Median Hourly percentage pay gap - 5 year period.



# 6.2 Ambulance Trusts Comparison Data reported (to AACE as of February 2025)

Table 6 - Comparison of Mean & Median Gender pay gaps in England & Wales

Ambulance Trust - Mean	% Difference (hourly rate)
North East Ambulance Service NHS Foundation Trust	0.29%
London Ambulance Service NHS Trust	4.53%
South Central Ambulance Service NHS Foundation Trust	4.88%
Welsh Ambulance Service	5.60%
East Midlands Ambulance Service	6.80%
North West Ambulance Service NHS Trust	7.27%
Yorkshire Ambulance Service NHS Trust	9.78%
South East Coast Ambulance Service NHS Foundation Trust	9.96%
South Western Ambulance Service Foundation Trust	%
East of England Ambulance Service NHS Trust	%
West Midlands Ambulance Service NHS Foundation Trust	%

Ambulance Trust -Median	% Difference (hourly rate)
North East Ambulance Service NHS Foundation Trust	0.31%
South Central Ambulance Service NHS Foundation Trust	0.78%
Welsh Ambulance Service	6.00%
East Midlands Ambulance Service	7.51%
South East Coast Ambulance Service NHS Foundation Trust	8.54%
Yorkshire Ambulance Service NHS Trust	8.87%
London Ambulance Service NHS Trust	9.74%
North West Ambulance Service NHS Trust	11.17%
South Western Ambulance Service Foundation Trust	%
East of England Ambulance Service NHS Trust	%
West Midlands Ambulance Service NHS Foundation Trust	%

#### 6.3 Our Pay Quartiles

This data ranks all our employees and dividing them into **four equal parts** or quartiles and calculating the percentage of men and women in each of the quartiles (by hourly pay rate). However, this does not include any Over-Time payment (only hourly pay rate not 'take home' pay) or which gender is taking more over-time. Table 7 below contains data that ranks all our employees from lowest (Quartile 1) to highest paid (Quartile 4). The percentage figures given are a breakdown of each quartile gender split. The gender split overall for the Trust is 45% males and 55% female.

**Table 7** – Quartile proportions by gender and % pay differences

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	Male	Female	Difference		
Gender Proportions in Pay Quartile 1	49.96%	50.04%	-0.08%		
Gender Proportions in Pay Quartile 2	39.43%	60.57%	-21.14%		
Gender Proportions in Pay Quartile 3	40.70%	59.30%	-18.60%		
Gender Proportions in Pay Quartile 4	50.97%	49.03%	1.94%		

There is relative parity in the representation of men and women in Quartile 1 (lowest paid), with a difference of 0.08%. There are more men in Quartile 4 (highest paid) but has the second smallest gender split, with a difference of 1.94%. The most difference in gender representation occurred in Quartile 2 with 21.14% more women followed by Quartile 3 with 18.60% more women.

#### 6.4 Mean and Median Bonus pay gap

The mean bonus gender pay gap adds together bonus payments for all male and female pay and divides this by the respective number of male or female employees. There were no bonus payments made, this because SCAS does pay bonuses as part of the employment terms and conditions.

#### 7. Our 2023/24 Actions and Conclusions

Some actions we have taken to promote and advance gender equality include:

- Undertaken a further and disaggregated analysis of directorate and departmental data across a 4 year period and reported disparities by department.
- Taking positive action in our recruitment adverts to now include part time and flexi working (where possible).
- Having the recruitment team are prompted to speak and to encourage to managers to consider when roles are available to include part time and flexi working (where possible.
- Getting Managers to consider People who took maternity or paternity leave to provide flexible working options or a 'staged' return.
- For Executive Board recruitment the' Agencies' we used were briefed to ensure that their strategies were diverse and inclusive in order to have more female applicants. This has resulted in offers to a female Non-Executive Director |(NED) and a female applicant to an Executive role
- We looked into a tool that tried to gender neutralise our adverts which actually then had the opposite effect when we proofed them – so we came away from this.
- Taking a holistic approach to our employee health and wellbeing to further support our female workforce, we are focusing on issues that affect them such as our menopause café that provides a 'safe space' to discuss issues and find support.

#### **Conclusion:**

A detailed analysis of data across a 4 year period by department and their individual service functions was undertaken. The overall data from our 5 principal departments (Finance, Commercial services, HR & Education, Operations, Chief Executives office), found, all but the Commercial services departments had a pay gap (men being paid more) for women. We found some possible explanations and mitigation around the disparities for example many of the functions within these departments had gender disparities such as Finance (estates) was exclusively male until 2023, however it had less than 10 staff. Conversely, in the Chief Executives Office the Executive support function was all female also HR (operations) was exclusively female in 2022 with less than 10 staff but as more came in after that year and were in higher pay bands this had a significant impact on the pay gap. Another outlier was within the Operations department where NHS 111 was the only department in 2023 that paid women slightly more than men and has consistently the narrowest pay gap.

Anecdotally, women took maternity leave and frequently came back in part-time (reduced hours) positions (more so than men taking paternity leave and coming back to part-time positions), this could lead to women coming back to a lower banded position. There was also potential mitigation that more women are taking up flexible working opportunities and suggestions that this may be due to caring requirements that has led to some disparity.

While some progress has been made, the data indicates that a gender pay gap persists within South Central Ambulance Service (SCAS) with this trend remaining largely unchanged over the past few years. It is important to note that this challenge is widespread across the NHS and local government sectors and is not unique to SCAS.

There may be mitigating factors and anecdotal evidence that help explain aspects of the gap; however, the Trust remains committed to addressing this issue. We are actively implementing a series of targeted initiatives to improve our overall position, which are outlined in our Next Steps for 2024/25.

## 8. Our next steps for 2024/25

Objective	Action	Lead	Timeline	Improvement measure
Collate and assess data to build on our positive outcomes and understand any imbalances within our Trust	Continue to undertake further analysis of directorate and departmental data	HR and Head of EDI	Reporting period 2024/2025	Data and reports of and to departments to identify local and targeted actions to gain equitable pay differential
Continue to promote positive action to bring about pay equity and promote women into leadership	Ensure that we safeguard against any bias (conscious or unconscious). Look at positive action measures for retention: •Stretch assignments: Offer challenging projects or opportunities that build visibility and experience in	HR and Head of EDI	Reporting period 2024/2025	Narrowing of Mean hourly Gender pay gap

	senior-level responsibilities.  Outreach programs: Partner with women's networks, and external			
	universities, or NGOs to identify and encourage female candidates.			
Encourage the uptake of flexible working	Advertise and offer all jobs as having flexible working options, such as part-time work, remote working, job sharing or compressed hours Allow people to work flexibly, where possible	HR and Recruitment People Promise manager	Reporting period 2024/2025	More staff taking advantage of flexible working Roll out of manager self- serve
	Encourage senior leaders to role model working flexibility and to champion flexible working  Encourage men to work flexibly, so that it isn't seen as only a female benefit.  Utilise flexible reporting information in ESR through Manager self-serve Supportive return-to-work	Men's health Network		

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	programs: Provide re-skilling and confidence- building initiatives for women returning after career breaks.			
Maternity & Paternity leavers supported	People who took maternity or paternity and stayed on leave longer than statutory limit are encouraged to come back to the Trust with 'staged' support	Recruitment	Reporting period 2024/2025	More staff coming back to the Trust after any prolonged maternity or paternity leave
	Explore offering options for women to remain full time (if they wish to) with different flexible working options other than just reducing their hours.			
	Encourage men's rights to shared leave	Men's Network		
To understand reasons why women are not applying to more senior positions or receiving same hourly pay as men	Create a survey to get qualitative data to understand any 'barriers' or 'ceilings' to career or pay progression Blind applications: • Remove identifying details (e.g., names, gender) to reduce unconscious bias in the initial screening	HR	Reporting period 2024/2025	A better understanding of issues that prevent career or pay progression to enable action implementation planning

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	<ul> <li>Targeted mentoring: Pair aspiring women leaders with mentors or role models already in senior positions.</li> <li>Leadership training: Provide tailored programs to develop skills and confidence for senior roles.</li> </ul>			
Board Leadership visibility	CEO/Executive Board engagement to promote & prioritise Gender Equality  For Executive Board recruitment continue with the Agencies that have used attraction strategies with a review of how they would be fully inclusive within their recruitment / advertising campaign • Highlight women leaders: Showcase successful women in senior roles through case studies, blogs, or events.	CEO/ Executive Board  Recruitment	Reporting period 2024/2025	To increase applications for Board position from women
Engagement with the national	Further engaging the Women's Network in with	Women's Network	Reporting period 2024/2025	The Trust adapts and adopts good practice from
Ambulance	other gender staff			other Trust's

(and other NHS) Staff networks	networks across UK, particularly the NHS to source and adopt good practice.  Work with BOB ICS inclusive recruitment strategies.  Networking opportunities: Facilitate connections within and outside the organisation to enhance access to role models.	Recruitment/ Head of EDI		staff Women's/Gende r networks.
NHSE ED&I Improvement plan High Impact Action 2: Embed fair and inclusive recruitment processes and talent management strategies that target under- representatio n and lack of diversity	Report on specific metrics for High Impact Actions (HIAs) HIA 2 is specifically a measuring equitable recruitment	HR Recruitment ED&I	Reporting period 2024/2025	The measure for this is the Annual chair and chief executive appraisals on these EDI objectives
Recruitment and selection practices are inclusive for all staff and of all genders	Continue to review and analyse inclusivity of recruitment materials (including where adverts are placed)  Ensuring our adverts are fully inclusive on social media for	Recruitment  Communications  HR Operations	Reporting period 2024/2025	Recruitment policies and literature is reviewed to ensure that all genders feel welcome to apply for roles.  To find out and analyse any negative experiences and

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