

Board Of Directors - Public Meeting

Wed 30 March 2022, 13:00 - 14:15

Ms Teams

Agenda

1. Chair and Quorum

Information *Mark Jones*

2. Apologies for Absence

Information *Mark Jones*

Verbal item

3. Declarations of Interest

Information *Mark Jones*


4. Gender pay gap report

Approval *Alison Balson*

 Gender Pay Gap report 2021 (published 2022).pdf (6 pages)

5. Modern slavery Statement

Approval *Paul Howard*

 Modern slavery statement 2022-23.pdf (4 pages)

6. Use of common seal FY2021/22

Noting *Paul Howard*

 Use of the common seal.pdf (4 pages)

7. Resolution to exclude members of the press and public

Approval *Mark Jones*

Title of report:	Gender Pay Gap Report
Presented to:	Board of Directors
On:	30 rd March 2022
Presented by:	Alison Balson, Director of Workforce
Prepared by:	Sarah Berry, Assistant HR Business Partner
Contact details:	sarah.berry@wwl.nhs.uk

Executive summary

This report provides an analysis of the Trust's Gender Pay Gap information as at 31 March 2021 and is the fourth round of annual mandatory reporting the Trust has undertaken.

The data highlights that as at 31 March 2021 the Trust has a **30.21% mean average gender pay gap** with females earning **£6.64 an hour less** than males. This position is a slight improvement compared to 2020 (31.46%). As at March 2021 the Trust has a 15.02% median hourly rate gender pay gap with females earning **£2.39 an hour less** than males. This position has not significantly changed since 2020.

A key factor underpinning the Trust's gender pay gap is due to a significant proportion of male staff being constituted within the Medical & Dental staff group which is within the higher earning quartiles. If we exclude Medical & Dental staff from the Trust wide gender pay gap figures the Trust's mean average gender pay gap is **3.64%** which equates to females earning **£0.57 less** than male staff per hour. Section 2.4 of the report provides granular analysis of the pay gap at staff group level.

As at 31st March 2021 male staff proportionately continue to be heavily constituted within the highest earning quartile (quartile 4) accounting for **29.98%** of quartile 4 when male staff represent 19% of the overall Trust workforce. A key factor is due to the Medical & Dental workforce being predominantly male at 69% and this staff group are predominantly constituted within the highest earning quartile. Compared to the previous year in 2020 there were a similar percentage of males in the highest earning quartile at **29.42%**.

As at 31st March 2021 female staff proportionately continue to have lower representation in the highest earning quartile at **70.02%** compared with female staff representing 81% of the overall workforce. Compared to the previous year in 2020 there were a similar percentage of females in the highest earning quartile at **70.58%**.

The average bonus gender pay gap as at 31st March 2021 is 55.92%. This is a slight deterioration compared to the previous year when the figure was 53.58% in 2020. The bonus pay is primarily related to clinical excellence awards that are awarded to recognise and reward Consultants who perform 'over and above' the standard expected in their role, but awards made in the reporting year were distributed equitably among all eligible consultants. New local clinical excellence awards are not paid in the same month each year, though are always backdated to April. This can also impact slightly on the reported pay gap position.

Gender Pay Gap actions will be included within the EDS action plan for 2022-2023 and progress will be detailed in the EDI Annual Report. Gender Pay Gap actions will relate to reducing the overall gender pay gap in addition to specifically targeting the Medical & Dental staffing group. The actions will broadly involve further investigations to identify contributing factors, pursuing inclusive recruitment and selection processes and the development of positive action such as coaching and sponsorship.

Link to strategy

People Strategy

Risks associated with this report and proposed mitigations

Financial implications

There are possible risks of employment tribunal claims relating to discrimination arising from the gender pay gap which would have financial implications in terms of legal and compensation costs. However, to date no claims of this nature have arisen within the Trust.

Legal implications

As noted above there are possible risks of employment tribunal claims relating to discrimination arising from the gender pay gap. To date no claims of this nature have arisen within the Trust.

People implications

Gender Pay Gap is a complex issue and there are many contributing factors including external societal factors and internal workforce factors. The people issues which arise from the gender pay gap are wide ranging and at the heart of this issue is fairness and equality of opportunity for female staff within the organisation. Gender Pay Gap actions will be included within the EDS action plan for 2022-2023 and progress will be detailed in the EDI Annual Report.

Wider implications

It is noted there are possible risks of adverse publicity being generated due to the Trust's gender pay gap, however, to date no publicity of this nature has arisen in response to the publishing of the Trusts previous Gender Pay Gap data over the past 4 years.

Recommendation(s)

The Board is recommended to receive the report and approve the Gender Pay Gap report for national reporting.

Statutory Gender Pay Gap Reporting

1 Background

On the 31 March 2017, it became mandatory for public sector organisations with more than 250 employees to report annually on their gender pay gap.

The gender pay gap differs from equal pay and the two terms are not interchangeable. Equal pay deals with the pay differences between men and women who carry out the same jobs, similar jobs or work of equal value. It is unlawful to pay people unequally because they are a man or a woman.

The gender pay gap shows the differences in the **average pay** between men and women. If a workplace has a particularly high gender pay gap, this can indicate there may be a number of issues to deal with, and the individual calculations may help to identify what those issues are.

The Trust is obliged to publish the following information on our public-facing website and report to government by the 31st March 2022:

- The difference between the mean hourly rate of pay of male full-pay relevant employees and that of female full-pay relevant employees ('the mean gender pay gap');
- The difference between the median hourly rate of pay of male full-pay relevant employees and that of female full-pay relevant employees ('the median gender pay gap');
- The difference between the mean bonus pay paid to male relevant employees and that of female relevant employees ('the mean gender bonus gap');
- The difference between the median bonus pay paid to male relevant employees and that of female relevant employees ('the median gender bonus gap');
- The proportions of male and female relevant employees paid bonus pay ('the proportions of men and women getting a bonus'); and
- The proportions of male and female relevant employees in the lower, lower middle, upper middle and upper quartile pay band ('the proportion of men and women in each of four pay quartiles').

2 Gender Pay Gap Reporting Key points

Appendix 1 includes a full copy of the Trust's Gender Pay Gap information which has been obtained from the Electronic Staff Record (ESR) standard reports. The ESR standard reports are nationally produced to ensure the NHS meet their gender pay gap reporting requirements and the reporting period for the gender pay gap data is as at 31 March 2021.

2.1 Key Points to note are:

- The Trust workforce is **81% female and 19% male**.
- The Trust Medical & Dental workforce is 69% male and 31% female with 26% of the Trust's overall male workforce being constituted within the Medical & Dental staff group.
- As at March 2021 the Trust has a **30.21% mean average** gender pay gap with females earning **£6.64 an hour less** than males. The mean average gender pay gap in 2021 has slightly improved in comparison with 2020 data when as at 31st March 2020 females earned **£6.86 an hour less** than males with a 31.46% mean average gender pay gap.
- As at March 2021 the Trust has a **15.02% median hourly rate** gender pay gap with females earning **£2.39 an hour less** than males. The median gender pay gap in 2021 has not significantly changed in comparison with 2020 data when as at 31 March 2020 females earned **£2.35 an hour less** than males with a **15.14%** median gender pay gap.

- As at 31st March 2021 male staff proportionately continue to be heavily constituted within the highest earning quartile at 29.98% within quartile 4 compared to male staff representing 19% of the overall workforce. A key factor is due to the Medical & Dental workforce being predominantly male at 69% and this staff group are predominantly constituted within the highest earning quartile.
- As at 31st March 2021 female staff proportionately continue to have lower representation in the highest earning quartile at 70.02% compared with female staff representing 81% of the overall workforce. Compared to the previous year in 2020 there was a similar percentage of females in the highest earning quartile at 70.58%.
- The data highlights that the average bonus pay gap for females as at March 2021 is 55.92% and the median pay gap is 41.03%. The bonus pay is primarily related to clinical excellence awards that are awarded to recognise and reward Consultants who perform `over and above` the standard expected in their role. It should be noted the Consultant workforce is predominantly male at 75% excluding locum consultants.

2.2 Gender Pay Gap Granular reporting

In response to the gender pay gap reporting the Trust has undertaken a granular analysis of the gender pay gap data by staff group to identify any hot spot areas. Medical & Dental and Administrative & Clerical staff groups continue to be areas where gender pay is a particular concern.

The medical & dental staff group has a **23.68%** mean gender pay gap with female medical & dental staff earning **£9.46 per hour less** than male medical & dental staff. This is due to female medical & dental staff being primarily constituted within this staff group's lower pay quartiles with only 11% of female medical & dental staff being constituted within the medical & dental highest pay quartile (quartile 4).

If we exclude Medical & Dental staff from the Trust wide gender pay gap figures the Trust's mean gender pay gap is **3.64%** which equates to females earning **£0.57 less** than male staff per hour. This compares with the Trust's overall gender pay gap (inclusive of Medical & Dental staff) of 30.21% which equates to females earning **£6.64 an hour less than male staff**.

An analysis of the gender pay gap for the Administrative & Clerical staff group highlights this staff group has a **25.54%** average pay gap with female staff earning **£4.55 an hour less** than male staff. This is an improving position compared to the previous year where there was a 29.28% average pay gap with female administrative & clerical staff earning £5.25 an hour less than male administrative & clerical staff in 2020. Males within this staff group remain significantly constituted within the highest pay quartile at 40% male in quartile 4 compared with 13% male in quartile 1, 10% male in quartile 2 and 29% male in quartile 3.

It should be noted that in a number of staff groups there is a negative pay gap ie. females earn more than males, and these are within:

- Healthcare Scientists staff group **-3.36%** pay gap (females earn **£0.61** more than male staff per hour).
- Nursing and Midwifery registered staff group **-2.72%** pay gap (females earn **£0.50** more than male staff per hour).
- Additional Clinical Services staff group (includes HCA, Nursing Auxiliaries, ST & T Assistants) with a **-1.53%** pay gap (females earn **£0.17** more than male staff per hour)
- Allied Health Professionals staff group **-0.64%** pay gap (females earn **£0.12** more than male staff per hour)

Although these gaps are much smaller compared to the pay gaps in which males earn more than females e.g. Admin & Clerical and Medical & Dental.

Appendix 1

Gender Pay Gap Report summary data

As at 31st March 2021

2.1 Table 1- Average & Median Hourly rate

Gender	Avg. Hourly Rate	Median Hourly Rate
Male	£21.99	£15.94
Female	£15.35	£13.54
Difference	£6.64	£2.39
Pay Gap %	30.21%	15.02%

2.1.1 Average Hourly rate

As at March 2021 the Trust has a 30.21% mean average gender pay gap with females earning £6.64 an hour less than males. The mean average gender pay gap in 2021 has slightly improved in comparison with 2020 data when as at 31st March 2020 females earned £6.86 an hour less than males with a 31.46% mean average gender pay gap.

2.1.2 Median Hourly rate

As at March 2021 the Trust has a 15.02% median hourly rate gender pay gap with females earning £2.39 an hour less than males. The median gender pay gap in 2021 has not significantly changed in comparison with 2020 data when as at 31 March 2020 females earned £2.35 an hour less than males with a 15.14% median gender pay gap.

2.2 Table 2- % male and female employees in each pay quartile

Quartile	Female	Male	Female %	Male %
1	1256.00	220.00	85.09	14.91
2	1438.00	295.00	82.98	17.02
3	1372.00	235.00	85.38	14.62
4	1126.00	482.00	70.02	29.98

This calculation requires an employer to show the proportions of male and female full-pay relevant employees in four quartile pay bands with quartile 1 being the lowest paid and quartile 4 being the highest paid. All employees are placed into the cumulative order according to their pay which is undertaken by dividing the workforce into 4 equal parts.

Compared with quartiles 1-3 males are more highly constituted within quarter 4 at 29.98% compared with an average of between 14.62%- 17.02% within the other quartiles. Comparatively the reverse is true for females and they constitute 70.02% of quartile 4 compared with an average of between 82.98%- 85.38% within the other quartiles.

The information compares % within the individual quartiles. However, if we review the broader picture comparing the overall workforce constitution there are 1232 male employees and of these 482 are within

quartile 4 which represents 39.1% of all male employees. Comparatively of 5192 female employees only 1126 females are constituted within quartile 4 which represents only 21.6% of all female employees.

2.3 Bonus information

Table 3

Gender	Avg. Pay	Median Pay
Male	12,786.18	7,350.96
Female	5,635.56	4,335.00
Difference	7,150.63	3,015.96
Pay Gap %	55.92%	41.03%

Table 4

Gender	Employees Paid Bonus	Total Relevant Employees	%
Female	40.00	5450	0.73%
Male	148.00	1255	11.79%

The data in tables 3 & 4 relates to clinical excellence awards for medical staff as this is the only payment identified within the ESR standard report which falls within the set definition of `bonus pay`. Clinical Excellence Awards recognise and reward Consultants who perform `over and above` the standard expected in their role. The payments within the Trust's bonus information contains both local and national Clinical Excellence Awards. The Local CEA's are administered within the Trust on an annual basis and the national CEAs are determined externally and administered by the Department of Health.

The data highlights that the average bonus pay gap for females as at March 2021 is 55.92% and the median pay gap is 41.03%. The Local CEA's awarded during the relevant period did not have to be applied for by consultants, they were equally split between eligible consultants due to Covid-19. Therefore, the bonus gap data cannot be compared to the previous year like for like as a different process was followed.

As at 31st March 2021 0.73% of female staff received a bonus payment in comparison with 11.79% of male staff. When reviewing these figures consideration should be given to the overall consultant workforce profile which is predominately male at 75%. Consideration should also be given to the number of consultants excluding locums and the proportion of these receiving a bonus. There were 215 consultants excluding locums, 74% of female consultants were paid a bonus and 92% of male consultants were paid a bonus.

Title of report:	Modern Slavery Statement 2022/23
Presented to:	Board of Directors
On:	30 March 2022
Presented by:	Director of Corporate Affairs
Prepared by:	Director of Corporate Affairs, with workforce and procurement teams
Contact details:	E: paul.howard@wwl.nhs.uk

Executive summary

The foundation trust is required to approve a statement under the Modern Slavery Act 2015 each year. The attached statement has been prepared by the leads for key areas and endorsed by the executive team.

Link to strategy

There is no direct link to the foundation trust’s strategy.

Risks associated with this report and proposed mitigations

It is a statutory requirement to have an approved statement. Approval of the attached mitigates any risk of non-compliance.

Financial implications

There are no financial implications arising from this report.

Legal implications

This report mitigates the risk of non-compliance with relevant legislation.

People implications

There are no people implications arising from this report.



Wider implications

There are no wider implications arising from this report.

Recommendation(s)

The Board of Directors is recommended to approve the Modern Slavery Statement as presented.

Slavery and human trafficking statement

Wrightington, Wigan and Leigh Teaching Hospitals NHS FT (WWL) is an NHS foundation trust, providing acute hospital and community care to the population of Wigan Borough and beyond. Each year we treat around 85,000 inpatients and around 480,000 outpatients and we deal with around 90,000 Emergency Department attendances. We also provide around 44,000 walk-in centre appointments and deal with over 177,000 referrals from GPs. We employ over 6,000 members of staff and have an annual turnover of c.£400m. Further detail about what we do can be found on our website.

Policies and initiatives

We fully support the Government's objective to eradicate modern slavery and human trafficking and recognise the significant role that the NHS has to play in combatting it and in supporting victims.

We are committed to ensuring that there is no modern slavery or human trafficking in any part of our business and, insofar as possible, we require our suppliers to adopt a similar approach. We are also committed to using our role as a healthcare provider and a key organisation in the borough to ensure that our staff and patients can access all available support and, as such, we are committed to the sharing of information and raising awareness.

At WWL, we:

- Comply with legislation and regulatory requirements
- Make suppliers and service providers aware that we promote the requirements of the legislation
- Consider modern slavery factors when making procurement decisions
- Develop awareness of modern slavery issues

For our workforce, we:

- Confirm the identities of all new employees and their right to work in the United Kingdom, and pay our employees in line with national terms and conditions, such as Agenda for Change
- Have dedicated policies in relation to grievances and raising concerns and we have a good working relationship with our staff side partners which gives our employees an outlet to raise any concerns about poor working practices
- Have an independent Freedom to Speak Up Guardian that colleagues can contact in person, by telephone or email to raise concerns about their own circumstances or those of others

For procurement and our wider supply chain, we:

- Encourage suppliers and contractors to take their own action and understand their obligations under the Modern Slavery and Human Trafficking Act 2015
- Ensure that due diligence is carried out prior to selecting new suppliers. All new suppliers are required to confirm whether or not they are classed as a Section 54 supplier and then a further declaration to confirm they compliant with the Act

- Provide information and support to suppliers who have been identified as not following this best practice
- Reserve the right to end business relationships where suppliers have failed to meet their obligations and/or meet our ethical standards

The procurement team will:

- Wherever possible, include the use of selection and award criteria with an appropriate weighting given to modern slavery criteria in tenders
- Aim to check and draft specifications to include a commitment from suppliers to support the requirements of the Act
- Will not award contracts where suppliers will not commit to complying with the Act
- Continue to support the use of regional and national public sector frameworks which incorporate selection and award criteria to support goals of the Act

During the financial year 2022/23, we will:

- Ensure that all procurement staff, and other key members of our team such as our safeguarding leads, undertake modern slavery and human trafficking training to raise awareness of this important issue within the team and the wider organisation
- Not award contracts where suppliers cannot commit to complying with the Act
- Review our terms and conditions of business to ensure that they reflect our obligations under the Act
- Undertake an audit of our supply chain with the aim of ensuring that all suppliers meet the obligations of the Act and to identify high-risk categories within our supply chain so that we can work with the suppliers who provide these goods and/or services to ensure they have robust processes in place

This statement is made pursuant to section 54(1) of the Modern Slavery Act 2015 and constitutes our slavery and human trafficking statement for the financial year ending 31 March 2023.

The Board approved this statement at its meeting on 30 March 2022.

Signed:

Silas Nicholls
Chief Executive

Title of report:	Use of the common seal during FY2021/22
Presented to:	Board of Directors
On:	30 March 2022
Presented by:	Director of Corporate Affairs
Prepared by:	Director of Corporate Affairs
Contact details:	E: paul.howard@wwl.nhs.uk

Executive summary

This report outlines the occasions on which the foundation trust's common seal has been applied during the latter part of financial year 2020/21 and financial year 2021/22.

Link to strategy

There is no link to the organisational strategy.

Risks associated with this report and proposed mitigations

There are no risks associated with the content of this report.

Financial implications

There are no financial implications arising from this report.

Legal implications

There are no legal implications to bring to the board's attention.

People implications

There are no people implications arising from this report.

Wider implications

There are no wider implications to highlight.

Recommendation(s)

The Board of Directors is recommended to receive the report and note the contents.

1. BACKGROUND

- 1.1. All foundation trusts are required to have a common seal.¹ The constitution of Wrightington, Wigan and Leigh Teaching Hospitals NHS FT provides that the seal shall only be affixed under the authority of the Board of Directors.²
- 1.2. The Board has previously resolved in May 2019 (minute reference 100/19 refers) that attestation by any two directors shall be deemed to be affixing the seal under the board's authority.³ It is good practice to review this on a regular basis. The Board is recommended to confirm that this approach remains acceptable and that attestation by any two members of the Board of Directors shall be deemed to be affixing the seal under the board's authority.
- 1.3. A seal must be applied in order for the foundation trust to execute documents as a deed. Certain types of document are not legally binding unless they are executed by deed; the most common being those that deal with transfers of land, some leases or tenancies, mortgages, powers of attorney and certain business agreements. It can also sometimes be beneficial to execute other documents as a deed rather than as a simple contract because the time limit for bringing a claim under a deed is double the time limit for a simple contract (12 years as opposed to 6 years).
- 1.4. The board has reserved to itself responsibility for reviewing the use of the common seal, and this report is presented in order to satisfy that requirement.

2. USE OF THE COMMON SEAL

- 2.1. Since the last report to the board, the common seal of Wrightington, Wigan and Leigh Teaching Hospitals NHS FT has been applied on 17 occasions, as shown in the table below:

Seal No	Date seal applied	Description of document	Use attested by:
4	23 Nov 2020	Deed of covenant relating to Leigh Health Centre, The Avenue, Leigh, WN7 1HR	1. S Nicholls 2. R Mundon
5	4 Dec 2020	Deed of covenant relating to Leigh Health Centre, The Avenue, Leigh, WN7 1HR	1. S Nicholls 2. R Mundon
6	30 Mar 2021	Deed of surrender relating to Astley Clinic, Astley Hall Drive, Astley, M28 7TX	1. S Nicholls 2. R Mundon
7	30 Mar 2021	Underlease for part of Boston House Health Centre, Wigan, WN6 7LB	1. S Nicholls 2. R Mundon
8	26 May 2021	Deed of covenant relating to Leigh Health Centre, The Avenue, Leigh, WN7 1HR	1. A Balson 2. R Tindale

¹ Sch.7, para.29(1) National Health Service Act 2006

² At Paragraph 20.2

³ On 29 May 2019 (minute reference 100/19)

Seal No	Date seal applied	Description of document	Use attested by:
9	24 Jun 2021	JCT Intermediate Building Contract in relation to the alterations and refurbishments to form new Community Step Down Ward	1. A Balson 2. S Nicholls
10	26 Aug 2021	JCT Intermediate Building Contract in relation to the alterations and refurbishment of Orrell Ward	1. S Nicholls 2. R Mundon
11	5 Oct 2021	Deed of covenant relating to Leigh Health Centre, The Avenue, Leigh, WN7 1HR	1. R Tindale 2. S Arya
12	11 Nov 2021	Underlease for part of Platt Bridge Health Centre, Rivington Avenue, Wigan, WN2 5NG	1. A Balson 2. R Mundon
13	11 Nov 2021	Deed of covenant relating to Leigh Health Centre, The Avenue, Leigh, WN7 1HR	1. A Balson 2. R Mundon
14	2 Dec 2021	Transfer of whole of registered title in respect of Aspull Clinic, Haigh Road, Aspull, WN2 1HX	1. R Tindale 2. M Fleming
15	9 Dec 2021	Deed of novation relating to the transfer of rights and obligations to First Intuition	1. S Arya 2. R Tindale
16	21 Dec 2021	Deed of covenant relating to Leigh Health Centre, The Avenue, Leigh, WN7 1HR	1. S Arya 2. R Mundon
17	21 Dec 2021	Wayleave agreement	1. S Arya 2. R Mundon
18	1 Mar 2022	JCT Minor Works Building Contract in respect of the Urgent Treatment Centre expansion on the RAEI site	1. R Mundon 2. A Balson
19	1 Mar 2022	Lease of premises at Pemberton Health Centre	1. R Mundon 2. A Balson
20	24 Mar 2022	Deed of covenant relating to Leigh Health Centre, The Avenue, Leigh, WN7 1HR	1. R Mundon 2. P Howard

2.2. All occasions on which the common seal is applied are recorded in a register which is held by the Director of Corporate Affairs. This is available for inspection by directors on request.

3. RECOMMENDATIONS

- 3.1. The Board is recommended to note the occasions on which the common seal has been applied during financial year 2021/22.
- 3.2. The Board is also recommended to resolve that attestation of the use of the common seal by any two members of the Board of Directors shall be deemed to be affixing the seal under the board's authority.