



The National Maternity Hospital
Vita Gloriosa Vita ~ Life Glorious Life



National Maternity Hospital Gender Pay Gap Report 2023

Contents

Definitions and Abbreviations	Page 3
Executive Summary	Page 5
Tables and Figures	Page 6&7
Gender Pay Gap (GPG) Analysis 2023	Page 8
Proposed Actions	Page 9

Definitions and Abbreviations

- Gender Pay Gap - GPG
- National Maternity Hospital – NMH
- Clinical Staff – All employees who operate within a clinical roles within the NMH, such as Consultants, Non-consultant hospital doctors(NCHD's), midwives, nurses, health care professionals
- Non-Clinical Staff – All employees who operate within support roles within the NMH, such as Administrators, Porters, Catering, Household, Multi-Task attendees etc.
- Social Care Professionals – All employee who operates in support of clinical roles within the NMH and form part of the wider multi-disciplinary team, such as Dieticians, Psychologists, Radiographers, Physiotherapists, Social Workers, Laboratory Aids and Medical Scientists.
- Permanent Employee's – those on a contract of employment that are permanent and pensionable.
- Part-Time Employee's – those who work less than the whole time equivalent of the role.
- HSE Salary Scales – Graded Salary scales as required by the DPER for all HSE employees
- Department of Public Expenditure and Reform - DPER.
- Hourly Paid Workers – Workers of a casual nature engaged as required by the NMH, such as contractors.
- Ordinary Pay – includes basic pay and any shift premiums, pay for leave, allowances and overtime pay.
- Reporting Year – The GPG reporting year is the 12 months encompassing the snapshot date. All calculation are completed for the reporting year 2023.
- Snapshot date – the NMH snapshot date is the 28th June 2023, on which the data fir the GPG report was taken for 2023.

GPG Reporting Year Pay: This is defined as the sum of;

- Ordinary pay (as defined by hourly rate as it aligns to DPER HSE salary scales)
- Bonus Pay- (the NMH does not issue bonus pay)

Definitions and Abbreviations

Median GPG:

Median(male Hourly rate of pay) –Median (female hourly rate of pay)

Median (male hourly rates of pay)

The median is the difference between the hourly pay of the median male and the hourly rate of the median female e.g the male or female who is in the middle of a list of hourly pay ordered from highest to lowest. If there is an odd number of results, the median is the middle number. Medians are useful to indicate the typical situation. However this means that they can fail to pick up some GPG issues, they may also fail to pick up where issues are pronounced within the higher or lower paid employee's.

Mean GPG:

For calculation purposed this is expressed as;

Mean(male Hourly rate of pay) –Mean (female hourly rate of pay)

Mean (male hourly rates of pay)

The Mean Gender pay gap figure uses hourly pay of all employees to calculate the difference between the mean hourly pay of males, and the mean hourly pay of females. A mean (average) involves adding up all the figures and dividing the result by the number of figures in the list. It is useful as it places the same value on every number they use, to give a good overall indication of the GPG.

Executive Summary

- **What is the legislation; The legislation-** The Gender Pay Gap Information Act 2021 and Regulations 2022. Reporting obligation for organisations with over 250 employees. This threshold will reduce within two years to include employers with 150 employees or more, and finally to those with 50 employees or more in the following year. It impacts on both public and private sector employers.
- **What is the gender pay gap;** this is the difference in the average hourly wage of men and women across a workforce – it compares the pay of all working men and all working women; not just those in the same jobs, with the same working patterns or the same competencies qualifications or experience - not just men and women doing the same job, or with the same experience or working pattern.
- **What is it's aim;** its aim is to address gender gaps in the workplace and barriers to the full socio-economic equitability of women. The roots of the gender pay gap are multiple and nuanced. Pay disparity, as measured by the gender pay gap, is not just an organisation level issue, but is rather symptomatic of how we think of men, women and gender, and how society has evolved over time. There are several complex factors that typically lead to a gender pay gap, and often these causes are interrelated.
- **What is the GPG gap for 2023;** The NMH's 2023 GPG is **18.98% Mean** and **-25.34% Median**, this calculation includes all NMH employees regardless of their status (i.e. permanent, full-time, Part-time, contractors, hourly paid). For contracted employees only the GPG is **21.04% Mean** and **-20.81% Median**.
- **Part-time employees have the highest GPG;** The NMH's 2023 GPG is **16.15% Mean** and **-53.27% Median**, for part-time employees.

Tables

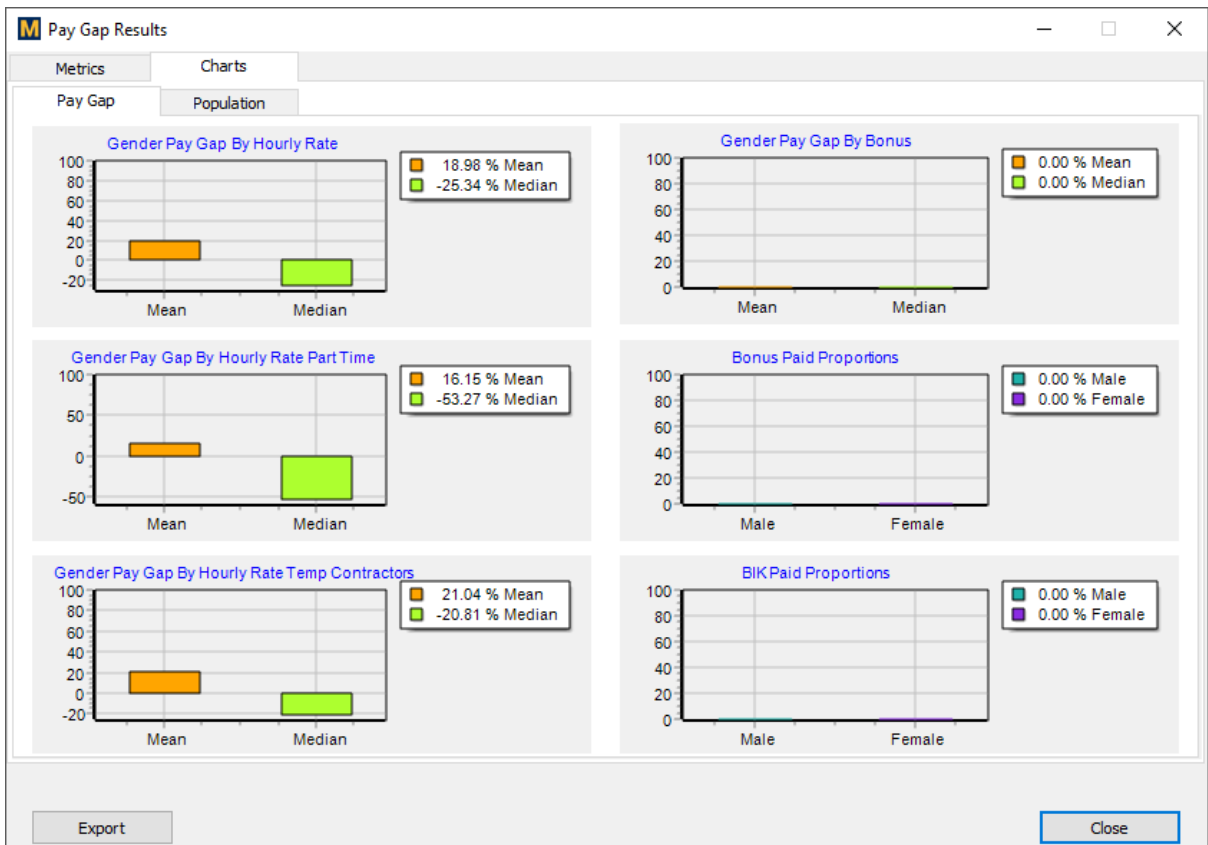
Table 1 - Overview of Data

Entity: National Maternity Hospital
Payroll Company: All companies for this entity

Gender Pay Gap by			Population by pay quartiles			
	Mean	Median		Male	Female	
Hourly Rate	18.98%	-25.34%	Lower	Q1	16.52%	83.48%
Bonus	0.00%	0.00%	Lower Middle	Q2	21.16%	78.84%
Hourly Rate Part Time	16.15%	-53.27%	Upper Middle	Q3	9.57%	90.43%
Hourly Rate Temp Contractor	21.04%	-20.81%	Upper	Q4	17.39%	82.61%

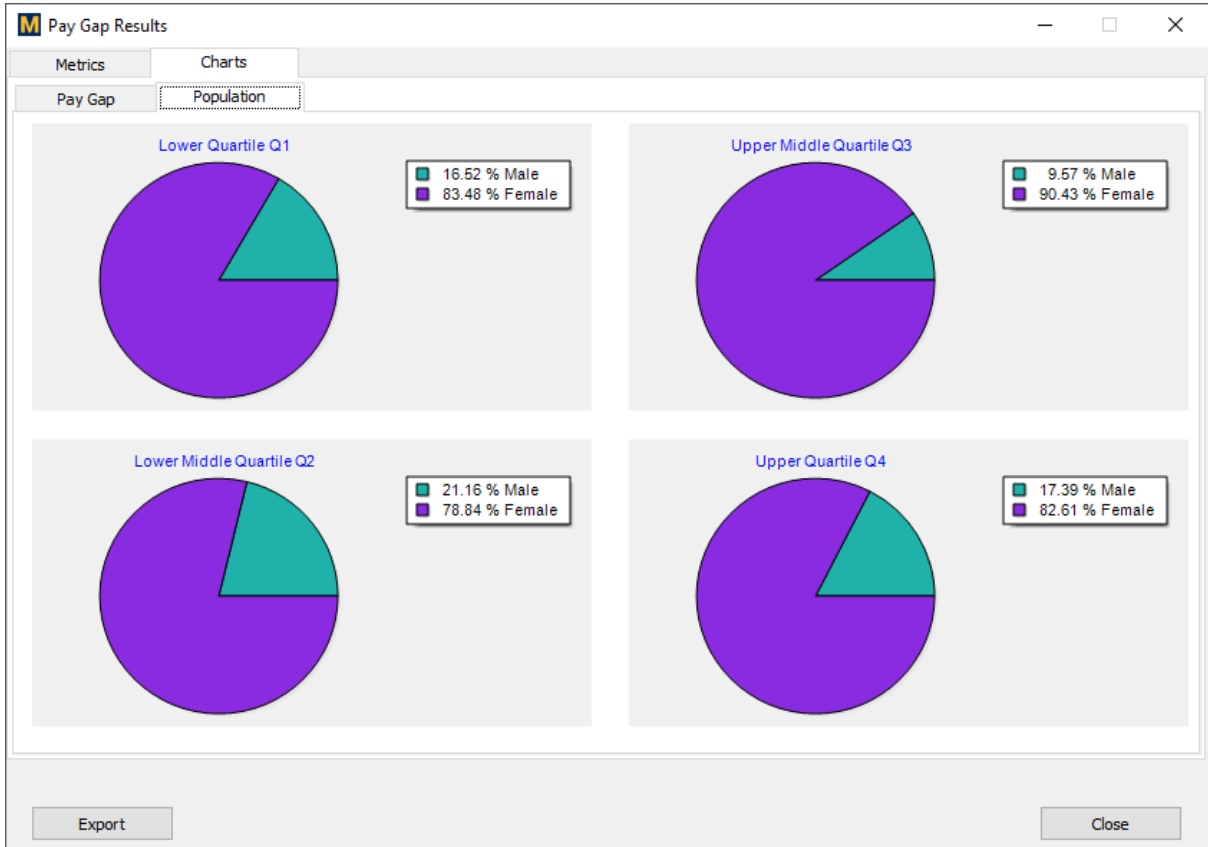
Bonus Paid Proportions			BIK Paid Proportions		
	Male	Female		Male	Female
	0.00%	0.00%		0.00%	0.00%

Table 2 – Gender Pay Gap in Bar chart form



Tables

Table 3 – Population by Quartile in Pie Chart from



Total Figures

Gender Pay Gap Mean:	18.98%
Gender Pay Gap Median:	-25.34%
Gender Pay Gap Part Time Mean:	16.15%
Gender Pay Gap Part Time Median:	-53.27%
Gender Pay Gap Temp Contractor Mean:	21.04%
Gender Pay Gap Temp Contractor Median:	-20.81%
Bonus Pay Gap Mean:	0.00%
Bonus Pay Gap Median:	0.00%
Bonus Pay Proportion Male:	0.00%
Bonus Pay Proportion Female:	0.00%
BIK Pay Proportion Male:	0.00%
BIK Pay Proportion Female:	0.00%
Upper Quartile Male:	17.39%
Upper Quartile Female:	82.61%
Upper-Middle Quartile Male:	9.57%
Upper-Middle Quartile Female:	90.43%
Lower-Middle Quartile Male:	21.16%
Lower-Middel Quartile Female:	78.84%
Lower Quartile Male:	16.52%
Lower Quartile Female:	83.48%

Gender Pay Analysis - Narrative

Total Head count within the NMH is 1210, of which 17.85% are male and 82.15% are female.

Total Clinical breakdown within the NMH 9.15% males and 90.85% female.

Total Non-clinical breakdown within the NMH 32.62% males and 67.38% female.

Total Social Care Professional breakdown within the NMH 14.17% males and 85.83% female.

The largest difference in figures observed since the 2022 report relates to the Hourly Rate Mean and Median. Reported at 27.53% Mean and 15.53% Median in 2022. We attribute this difference to a system issue as related to fortnightly paid staff as the hourly rate was being calculated incorrectly as related to the division hours worked over a fortnightly period.

As Ireland's leading centre for women's health, we are committed to supporting a fair and equal workplace for all our employees, we strive to attract, retain and support the best talents for our roles, as we understand this is key to supporting our vision "To be renowned as a world class hospital for the care of women and babies".

From the figures you will note that the majority of our staff across all of the percentiles are predominately female, we would attribute this as being the norm traditionally within women's health care providers and in particular across Maternity Care providers.

Consultants and /or Locum posts are reported on, based on who the hospital currently are the paymaster for, however it should be noted that the vast majority of Consultants and / or Locums are a shared resource across the HSE and therefore their time is shared across two or more hospital sites, which cannot be reflected within the average hourly wage .

NCHD's are reported on based on those on the NMH's payroll during the reporting period, however it should be noted that the vast majority of NCHD's are a shared resource across the HSE as such they are required to regularly rotate between hospitals.

We have observed, low levels of male staff in each quartile, but in particular in the upper middle quartile 9.57% , with the highest representation in the upper quartile.

Given the industry and the requirement for the NMH to operate on a 24/7 basis, the majority of our Clinical Staff have opted to work 3 condensed days starting and ending at various times, we feel that this is a key attraction and retention tool, that offers flexibility and alternative to part-time working. In addition it offers females the opportunity to maintain a full time presence within our workforce, by offering this flexibility in working hours.

The NMH are encompassed by the broader HSE terms and conditions pay scales and remuneration packages, therefore the NMH does not supply bonuses to its employees and all employees are on HSE salary scales and incremental requirements.

Proposed Actions

Due to the nature of our patient profile (given that we are a leading healthcare provider in respect to Women's health and babies) culturally it is expected that there will be a higher proportion of female to male staffing due to our largest category of employees being predominantly made up of Midwives and Nurses. Also it is more likely that females are more attracted to roles within our hospital due to our patient profile.

That noted, there is still an opportunity to attract and retain males into the other categories of staffing within the Hospital and focus on a greater gender balance.

We propose to achieved this through;

Recruitment: continuing to ensure job advertisements are equally balanced towards both male and female applicants. Including the use of gender balanced interview panels and ensuring that recruitment documentation is simple and contains gender neutral language. Noting that the NMH like other HSE hospitals may be impacted by the recruitment freeze which came into operation in Q4 2023 amongst most grades.

Training & Development: continuing to ensure access for all to both internal and external training and support this through our Study and Exam Leave Policy. This includes a partnership with the RCSI to support leadership development.

Career Progression: Continuing to ensure that all employees are equally encouraged to progress and continue to challenge unconscious bias. Continue to develop and promote potential career progression pathways and performance achievement across all grades and in line with our People Strategy.

Policy Development: continue to evolve and promote the NMH's Diversity and Inclusion Policy and Blended Working Policy within the hospital. In addition to the NMH's Recruitment and Study and Exam Leave Policy.