



THE MATER
HOSPITAL

Gender Pay Gap Report

What is the Gender Pay Gap?

In its simplest form, the gender pay gap is the difference in the average hourly wage of all men compared to the average hourly wage for all women across a workforce.

It compares the pay of all working men and women; not just those in similar jobs, with similar working patterns, or with similar competencies, qualifications, or experience.

The gender pay gap is different to equal pay which means paying women and men the same salary for performing the same, similar, or equivalent work.

Purpose

The purpose of this document is to present the metrics as set out in the Gender Pay Gap Information Act 2021, look to identify what we believe are the underlying reasons for the gap, and outline actions which will work towards reducing this gap.

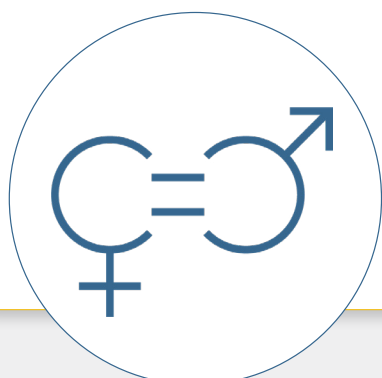
The Act requires that we report on the hourly gender pay gap across a range of metrics, as set out below. The legislation also includes metrics relating to Bonus Payments and Benefit in Kind but these are not relevant to HSE funded Section 38 agencies such as acute hospitals and are therefore excluded.



Reported metrics

The **percentage** of male and female employees in each quartile based on their hourly rate of pay:

- Lower
- Lower middle
- Upper middle
- Upper



The **mean** hourly gender pay gap for:

- All employees
- Part-time employees
- Temporary contract employees

The mean pay gap is calculated by adding all employees' pay together for each gender to derive an hourly rate of pay for that gender and dividing by the total number of employees of that gender

The **median** hourly gender pay gap for:

- All employees
- Part-time employees
- Temporary contract employees

The median pay gap is calculated by finding the midpoint in all employees' hourly pay and discarding the lowest and highest rates of pay or 'outliers.' Therefore, half of the employee's earnings will be above the midpoint and half will be below the midpoint. Often, a median pay gap will be lower than its corresponding mean pay gap

Important Information when reviewing the metrics

1. Reporting periods

We were free to choose any date in June 2022 as our snapshot date for the purpose of this reporting. The reporting period is then defined as the 12-month period immediately preceding and including the snapshot date.

The reporting period used for monthly payroll was 1st of July 2021 to 30th of June 2022.

The reporting period used for fortnightly payroll was 24 June 2021 to 23 June 2022.

2. Headcount on 30th of June 2022

We included all Mater Misericordiae University Hospital (MMUH) employees with an active contract within these reporting periods. The number of active contracts as of 30 of June 2022 was 4,427. The number of employees within the above total to receive at least one payment during the reporting periods was 4,258. The following groups were excluded based on the definition of an employee:

- Suantrai
- Pensioners
- St Paul's Child and Family Care Centre
- Creche
- Agency

3. Ordinary Pay

Ordinary pay included the normal salary paid to an employee, allowances, overtime payments, pay for piecework, shift premium pay, pay for sick leave, any salary top-ups for statutory leave like maternity leave/paternity leave/parental leave.

4. Working Hours

The hours recorded as worked as per our payroll system. Working hours when an employee is on paid leave e.g. annual leave, sick leave, or parental leave are recorded for the purpose of gender pay gap reporting.

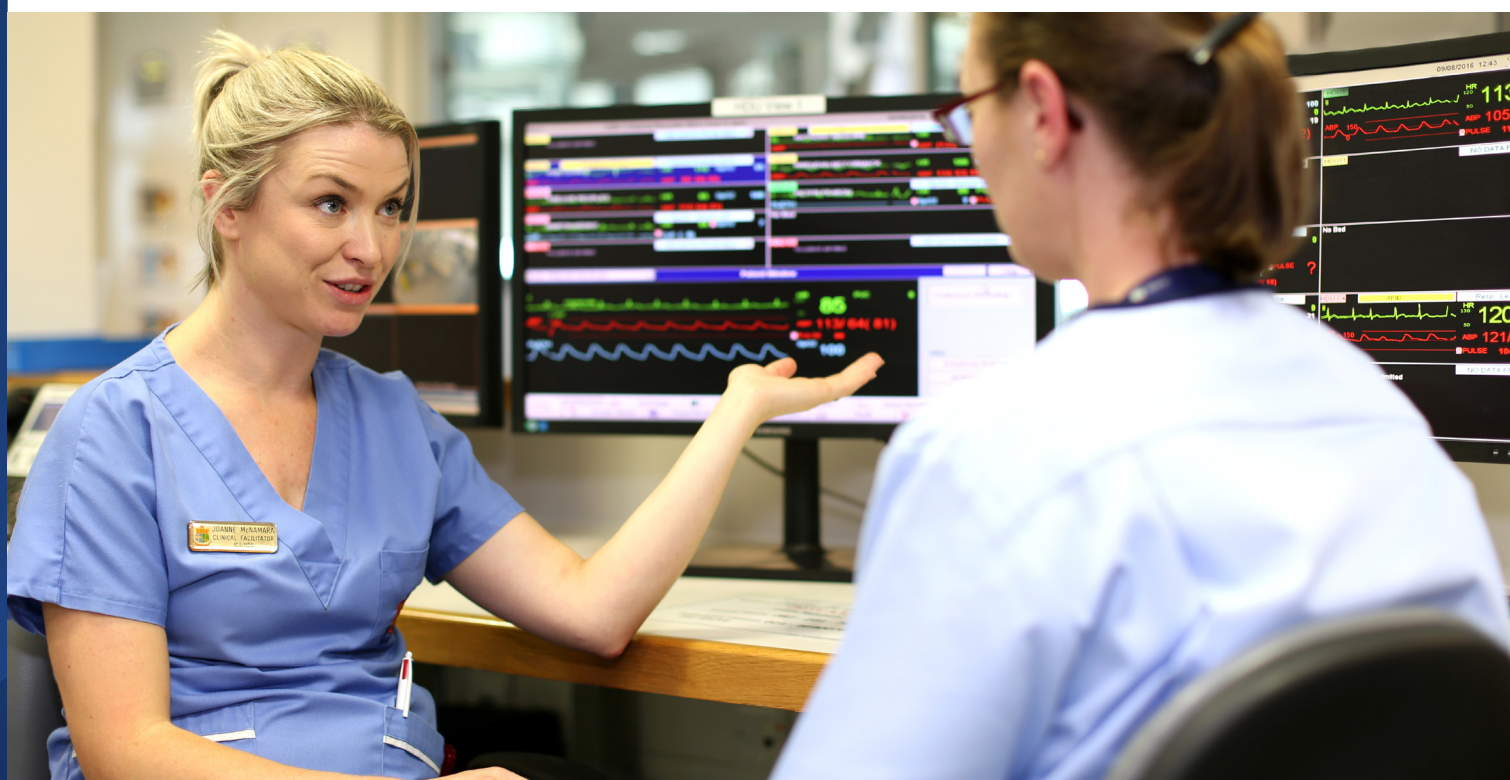
5. Work in other Organisations

Situations arise where MMUH pays an employee for hours completed in another organisation but then gets reimbursed by the other organisation.

As the employee is effectively getting paid by a different organisation, we have excluded this pay amount from Ordinary Pay.

6. Hourly Rate

The hourly rate is generated by dividing the total ordinary pay in the reporting period by the total working hours in the reporting period.

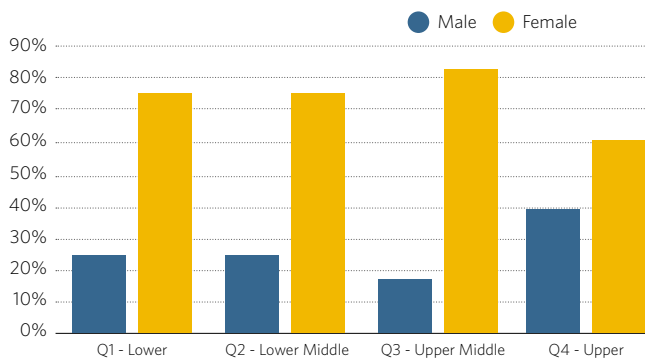


Outputs for MMUH

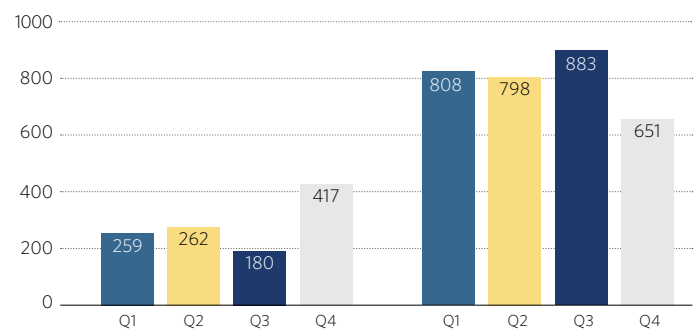
The **percentage** of male and female employees in each quartile based on their hourly rate of pay.

	Male %	Female %	#Male	#Female
Q1 - Lower remuneration	24.27%	75.73%	259	808
Q2 - Lower Middle remuneration	24.72%	75.28%	262	798
Q3 - Upper Middle remuneration	16.93%	83.07%	180	883
Q4 - Upper remuneration	39.04%	60.96%	417	651

Quartiles in percentage



Quartiles in numbers

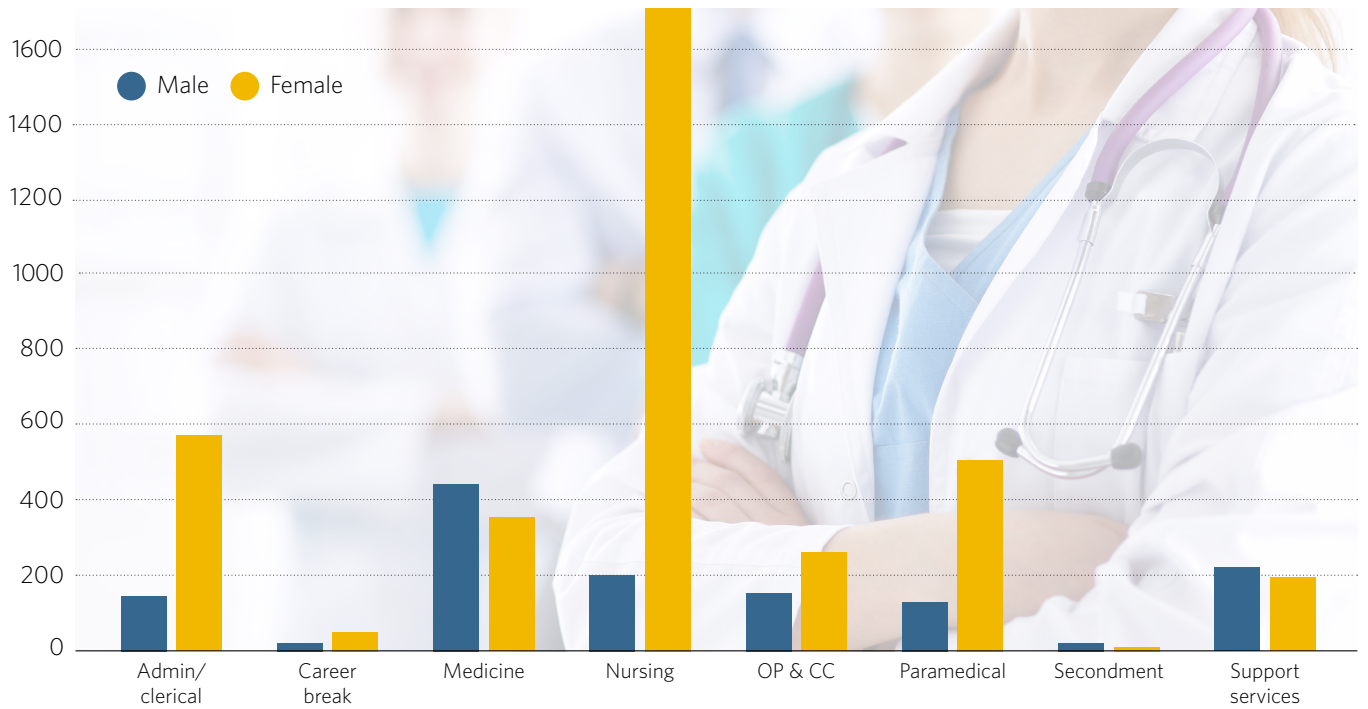


The **mean and median** hourly gender pay gap for all employees, part-time employees, and temporary contract employees

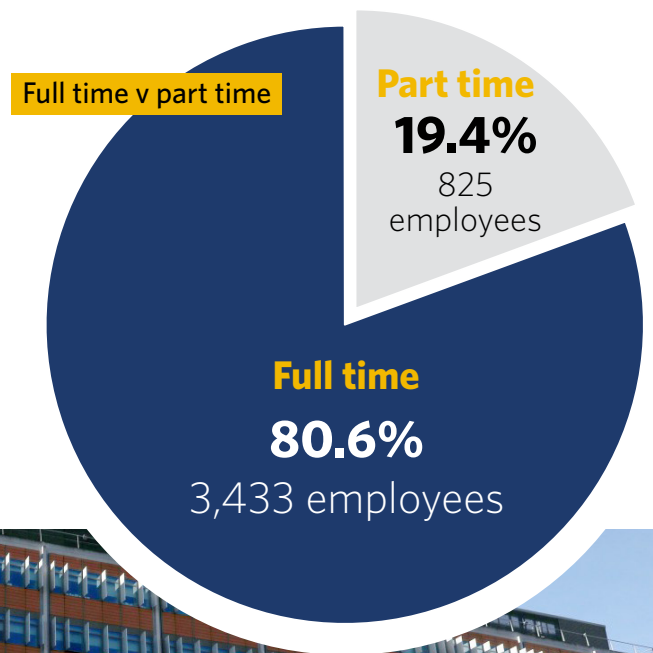
Category	Pay Gap %
Mean Hourly Gender Pay Gap (All)	24.14%
Mean Hourly Gender Pay Gap (Part-time)	19.08%
Mean Hourly Gender Pay Gap (Temp)	18.93%
Median Hourly Gender Pay Gap (All)	6.52%
Median Hourly Gender Pay Gap (Part-time)	-0.75%
Median Hourly Gender Pay Gap (Temp)	15.45%



Gender breakdown across division



Staff breakdown across employment type



Observations

What Factors are Driving this Gap?

We are made of up professions, for the most part, that tend to attract more female than male participants. For that very reason, it may be a surprise for those, who work in the acute hospital setting, that there is any gap of significance due to the numbers of each gender in the different professions all of which are governed by HSE pay rules.

Therefore, we give some further context to the figures below. We hope this will allow us, as an employer and also as a society, to focus our efforts in reducing this gap. We do so with this focus in mind and not in any way to negate or attempt to explain away the figures.



Observation on MEAN and MEDIAN hourly rates

The first question we asked is if there were any obvious reasons for the MMUH Gap and where this gap may emanate from? The conclusion to this review was that the gap was as a result of a specific grouping, Medical, which are, in general, the higher paid professions in the Hospital.

Overall ratio of male to female employees 1:2.8

If we look at the breakdown of those in the medical category, the ratios change significantly:

NCHD's: Ratio of male to female = 1:1 **Consultants:** Ratio of male to female = 1.8:1

As these figures show nearly a third of the male population in the hospital occupy NCHD or consultant roles which subsequently resulted in a significant impact on average pay rates. If we remove this cohort from the overall figures the results change dramatically, as the chart below shows.

Category	Pay Gap %
Mean Hourly Gender Pay Gap (All)	1.90%
Mean Hourly Gender Pay Gap (Part-time)	-5.75%
Mean Hourly Gender Pay Gap (Temp)	8.94%
Median Hourly Gender Pay Gap (All)	-6.07%
Median Hourly Gender Pay Gap (Part-time)	-7.26%
Median Hourly Gender Pay Gap (Temp)	7.58%

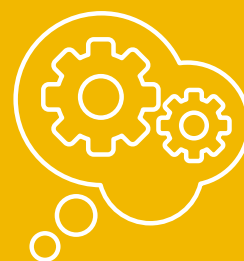


Observation on the PERCENTAGE of male and female employees in each quartile based on their hourly rate of pay

Whilst the representation variation in the quartiles explains the gender pay gap overall, further work is required to analyse why this is. Through our analysis of the pay quartiles, we know that there are more women in all our quartiles, but this reduces in quartile 4 where there are more senior, higher-paid roles.

It is interesting to note that 37% of all men are in quartile 4 whilst only 21% of all women are in this quartile.

	% of men	% of women	Ratio of men: women
Q 1	23%	26%	1:3
Q 2	23%	25%	1:3
Q 3	16%	28%	1:5
Q 4	37%	21%	1:1.5



Assumptions

Whilst there are many assumptions we can take from the above observations, those we will be focusing our actions on initially are:

- The majority of career paths for women reach their peak in the third quartile
- Women drop out of the profession before they reach the 4th quartile
- Women do not always see the role of a Consultant as a realistic or preferred choice for them when making career choices in healthcare.

Going forward...

How do we plan to support the advancement of women in MMUH and reduce the Gender Pay Gap?

As an organisation we are committed to strengthening accountability and governance through regular monitoring and reporting of the Gender Pay Gap information. In addition, a number of specific actions will be taken in this inaugural year which we hope will help address this gap and lay the foundations for us to build on for the years ahead.



Actions being taken to address the gap

Career Development & Support

We will:

- Provide career development and leadership programmes for female talent to support acceleration to senior positions e.g. IMI women in leadership.
- Ensure all employees have equal access to opportunities - development support.
- Launch our capability framework which provides a clear foundation and roadmap on the skills we look for in MMUH. This will enable a more consistent and clear approach, for example in how we define and articulate roles, how we recruit, how we plan development with our teams, and how we provide career options and pathways.
- Continue to offer career coaching to those who may be unsure of their next career step.

Recruitment & Promotion

All recruitment is currently carried out in an open and transparent manner in line with the Code of Practice for Appointment to Positions in the Civil Service and Public Service as set out by the Commission for Public Service Appointments (CPSA). As a fair and equal employer, we look to appoint the best candidates during our recruitment campaigns regardless of gender or other protected characteristics.

We will further enhance this by:

- Implementing transparent and open recruitment and promotion processes via a Recruitment Policy.
- Ensuring that all interview panels have the opportunity to take part in inclusive interview training.
- Ensuring that we use gender-neutral language in job descriptions.
- Ensuring that we have gender-balanced interview boards.
- Targeting women to apply for senior roles.

- Continuing our inclusive approaches to recruitment and talent management via our internal expression of interest process, allowing employees streamlined access to career progression opportunities via a simplified application process.
- Enabling and supporting flexible ways of working for colleagues at all levels of the organisation e.g. flexible working policy.

Learning & Development

Learning and Development plays a central part in the career of MMUH employees. As well as providing all of the necessary technical training, we plan to deliver a large number of people-focused training to all managers and employees. This will ensure a solid foundation for a working environment that treats all employees fairly, equally, and free from bias.

Inclusion and Diversity to Include Gender Inclusion

We will:

- Continue to embed inclusion and diversity into our policies, practices, and platforms.
- Ensure that key projects that lead and drive strategic initiatives for the organisation are carefully staffed through a strong mix of women and men.

Health & Wellbeing

We will:

- Deliver an employee Wellbeing Programme that supports and enables staff to take more responsibility for their health and wellbeing
- Grow our online well-being platform, making the programme accessible at all times; therefore, supporting colleagues to work around busy work and home-life commitments.
- Set out our commitment, via our Dignity at Work Policy, to maintaining a workplace environment that encourages and supports the right to dignity at work and highlight the procedures we have in place to handle complaints, including on the gender ground.





Actions to be considered for 2024 and beyond to address the Gap

The following actions are already in our plans for 2024 and we envisage that this list will expand as we look to review the results next year.

Networks

We will:

- Establish working groups to drive local, tailored initiatives to improve gender balance.
- Establish a Senior Leadership Working Group focusing on women's career issues.
- Introduce a women's mentoring programme which will enable those looking to move up in their careers to benefit from those who may be in the more senior posts.

Talent Management & Succession Planning

From 2024 onwards there will be a focus on the diversity of our talent pipeline with supporting L&D opportunities and Senior Leadership Development Programmes.

Inclusion and Diversity to Include Gender Inclusion

We will:

- Introduce Unconscious Bias training in the Context of Good Decision Making.
- Present gender-sensitive communication guidelines.