

Gender Pay Gap Report

East Kent Hospitals University NHS Trust

2024-2025



Publication: 31st March 2026

Contents

Executive Summary	3
Introduction	5
Purpose.....	6
What is the Gender Pay Gap?	6
Context.....	6
The Six Statutory Measures	7
Gender Pay Gap: Local & National Benchmarking	12
Conclusion	13
Gender Pay Gap Action Plan: 2025/26	14

Executive Summary

This report presents the Gender Pay Gap (GPG) for East Kent Hospitals Foundation NHS Trust as at the snapshot date of 31 March 2025, in line with the requirements of the Equality Act 2010 (Gender Pay Gap Information) Regulations 2017.

Gender Pay Gap reporting measures the difference in the average earnings of men and women across an organisation, regardless of role or banding. It is important to distinguish this from equal pay, which relates to men and women receiving equal pay for equal work. The Gender Pay Gap reflects the distribution of men and women across different roles and pay levels within the workforce.

Statutory Gender Pay Gap Measures

In accordance with statutory reporting requirements, East Kent Hospitals University Foundation NHS Trust has calculated the following six measures:

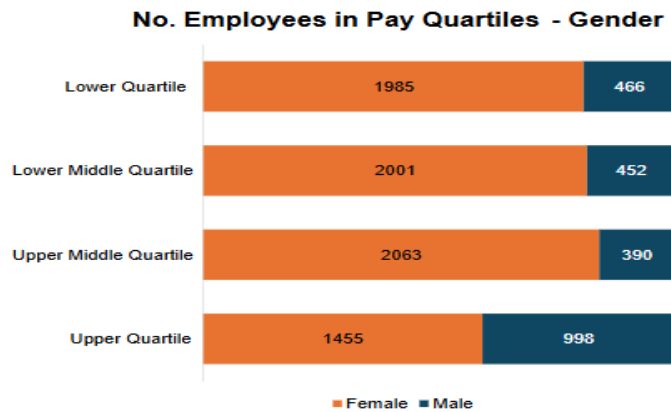
- 1. Mean gender pay gap: 31.2%**
The difference between the average hourly pay of men and women.
- 2. Median gender pay gap: 17%**
The percentage difference between the midpoint hourly pay for men and women.
- 3. Mean gender bonus gap: 19.7%**
The percentage difference between the average bonus pay for men and women.
- 4. Median gender bonus gap: 0%**
The percentage difference between the midpoint bonus pay for by men and women.
- 5. Proportion of staff receiving a bonus payment:**
The percentage of each gender who received any bonus pay.

Men: 13.08%	Women: 1.86%
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6. Proportion of men and women in each pay quartile.

Pay quartiles show how men and women are represented across the Trust's pay levels. They are produced by ranking all employees by hourly pay and splitting the list into four equal groups; from the lowest paid to the highest paid.

- Lower quartile: 19% men / 80% women
- Lower middle quartile: 18% men / 82% women
- Upper middle quartile: 16% men / 84% women
- Upper quartile: 41% men / 59% women



Understanding Our Results

We recognise that the Gender Pay Gap results highlight areas that require continued focus within the organisation. Women make up the majority of the overall workforce; however, they are proportionally less represented in the highest pay quartile and more concentrated in the lower and middle pay quartiles.

As seen across many NHS organisations, the Gender Pay Gap is influenced by occupational segregation and overall workforce composition. This includes the distribution of men and women across different professional groups, senior leadership positions, and specialist roles.

The Trust is confident that men and women are paid equally for work of equal value. However, the data shows differences in representation at various pay levels, and this distribution contributes to the overall gender pay gap.

Our Commitment to Improvement

At East Kent Hospitals University NHS Trust, we are committed to creating a fair, inclusive, and supportive workplace where all staff have equal opportunities to develop and progress. We recognise the importance of understanding the factors that contribute to the Gender Pay Gap and taking meaningful action to address them.

Our ambition is to continue reducing the Gender Pay Gap over time, with the long-term aim of closing the gap entirely by 2050. To support this ambition, the Trust will focus on:

- a. Supporting career development and progression opportunities
- b. Improving representation in senior and leadership roles
- c. Promoting flexible and inclusive working practices
- d. Monitoring workforce data to track progress and identify areas for improvement

We will continue to review our workforce data regularly and ensure that gender equality remains a key consideration in our workforce planning and organisational development.

Introduction

Since April 2017, organisations in England, Scotland, and Wales with over 250 staff have been required to report the difference in pay between men and women each year. These rules apply to employers in both the public and private sectors. Equal Pay and the Gender Pay Gap are often confused, but they describe two very different issues. Equal Pay is a legal requirement under the Equality Act 2010 and ensures that men and women are paid the same for doing the same or similar work, or work of equal value. The Gender Pay Gap, however, does not compare individuals doing the same job; instead, it measures the difference between the average hourly pay of all men and all women across the organisation. This gap reflects the distribution of men and women across different roles, levels of seniority, and working patterns, rather than unequal pay for the same work. An organisation can therefore have a gender pay gap without breaching equal pay law, as the gap often arises from workforce structure rather than pay inequality.

At East Kent Hospitals University NHS Foundation Trust (EKHUFT), we are committed to creating an environment where all colleagues feel supported, valued, and able to thrive. We recognise that our workforce is made up of individuals with diverse experiences, backgrounds, and perspectives, and this diversity is one of our greatest strengths. This year, we have published a comprehensive Pay Gap Report that examines differences in gender pay and provides a clearer understanding of the structural factors that contribute to these disparities across our organisation.

This report aims to provide clear, evidence-based insights into where inequalities exist within our organisation, as well as to demonstrate our commitment to taking meaningful action. By shining a light on these gaps, we can develop targeted strategies to foster greater equity in pay, career progression, and opportunities across the Trust. Our ongoing goal is to ensure that EKHUFT remains a fair, inclusive, and empowering workplace for everyone, where talent and dedication are recognised and rewarded regardless of gender, background, or ability.

East Kent Hospitals University Foundation NHS Trust's Three Equality, Diversity & Inclusion (EDI) Priorities:



Purpose

The purpose of this report is to present our Gender Pay Gap (GPG). This report covers a snapshot of GPG data from March 2025, covering our GPG submission for the 2024/2025 period (unless otherwise stated) and is legally required to be published no later than the statutory date of 30 March 2026.

What is the Gender Pay Gap?

The Gender Pay Gap (GPG) measures the difference between the average hourly earnings of all men and all women across the organisation, expressed through mean and median averages. It is not a comparison of pay for people doing the same work; rather, it reflects the distribution of men and women across job roles, pay bands and working patterns. A GPG could therefore exist even when Equal Pay requirements are fully met. Reporting this data each year helps the Trust identify underlying structural factors such as occupational segregation, representation at senior levels and the impact of part-time work. This supports targeted action to improve fairness and career progression for our workforce. We also recognise that some wider structural and societal factors influencing these outcomes may sit outside the Trust's direct control and sit within a wider national and international picture. According to the OECD's *'Gender Gaps in Paid and Unpaid Work Persist'* report, longstanding societal norms around work, family responsibilities, and labour market participation continue to contribute to gender pay gaps globally. Referencing this broader evidence helps us understand the interplay between internal workforce structures and external societal factors. [Full Report: Gender gaps in paid and unpaid work persist | OECD](#)

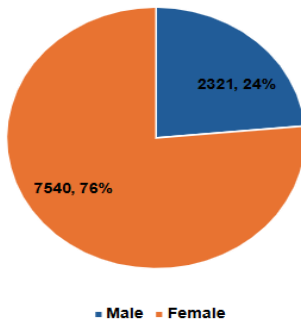
This year marks the first time East Kent Hospitals has published a full Gender Pay Gap report for public access, alongside our ninth consecutive year of submitting our statutory figures to the government.

Context

East Kent Hospitals University NHS Foundation Trust (EKHUFT) is one of the largest hospital Trusts in England, employing around 10,000 staff, providing acute and specialist healthcare to a local population of approximately 720,500–759,000 people in East Kent. The Trust operates five hospital sites: Kent and Canterbury Hospital in Canterbury, William Harvey Hospital in Ashford, Queen Elizabeth the Queen Mother Hospital in Margate, Buckland Hospital in Dover, and the Royal Victoria Hospital in Folkestone, alongside a range of community clinics. Three of these are acute hospitals, delivering urgent and emergency care, surgery, critical care, maternity, children's services, diagnostics, and medical care, while the two community hospitals provide a range of outpatient and day services.

As a major acute and teaching Trust, EKHUFT plays a significant role in clinical education and training, working with King's College London and Kent & Medway Medical School. The Trust employs a large and diverse workforce, with women comprising 76% of staff and men 24%, reflecting national NHS patterns in which women are over-represented in many clinical and support roles.

EKHUFT Total Workforce - Gender March 2025



According to our Electronic Staff Record (ESR) data from March 2025, our demographic of staff showed 58% of our staff are White, 31% of our staff are ethnically diverse, and 11% of our workforce is unknown. This organisational context is essential when interpreting the Gender Pay Gap. Like many NHS trusts, our workforce structure is shaped by long-standing occupational trends, including high female representation in nursing, midwifery and administrative roles, and higher male representation in certain senior medical and technical roles, which all influence average pay across the Trust. Understanding the size, scope, and workforce composition of EKHUFT helps explain the structural drivers behind the reported gender pay figures and informs the Trust’s ongoing commitment to fairness, inclusion, and workforce equity.

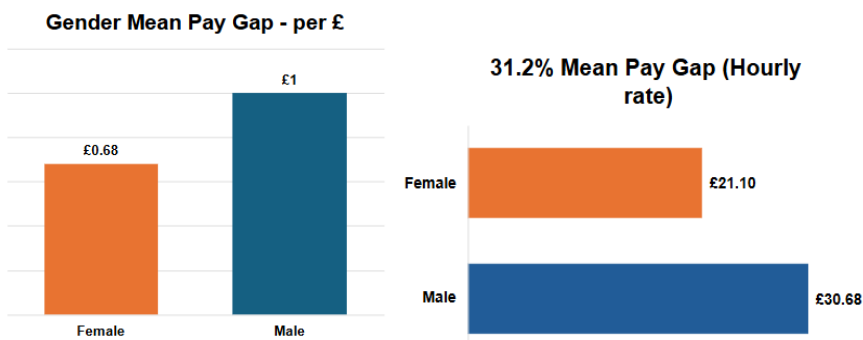
The Six Statutory Measures

Our Gender Pay Gap report is reflective of the snapshot taken on the 31st March 2025. At this time, there were 9861 staff recorded as full-pay employees, which includes full-time, part-time, and fixed-term employees.

Mean Gender Pay Gap

The difference between the average hourly pay of men and women.

East Kent has a **mean gender pay gap of 31.2%**. This is larger than both the national average and the majority of our regional comparator Trusts, placing us in the lower quartile of peer performance. The mean gender pay gap indicates that male staff have a higher average hourly rate of pay (£30.68) than female staff (£21.10). In practice, this reflects an organisation where, on average, **men earn £9.58 per hour more than women**. This shows that on average; women earn approximately 68 pence for every pound that men earn.



The size of this gap is not due to unequal pay for equal work. Pay within comparable bands is broadly balanced. Instead, the gap is primarily a result of unequal representation across the workforce. This is compounded by under-representation of women in senior posts and by wider cultural and structural barriers to progression.

The mean gender pay gap is largely driven by the **gender composition of consultant roles**. Consultants are some of the Trust’s highest-paid posts and are disproportionately held by men; their salaries therefore increase the male average hourly rate and widen the headline gap.

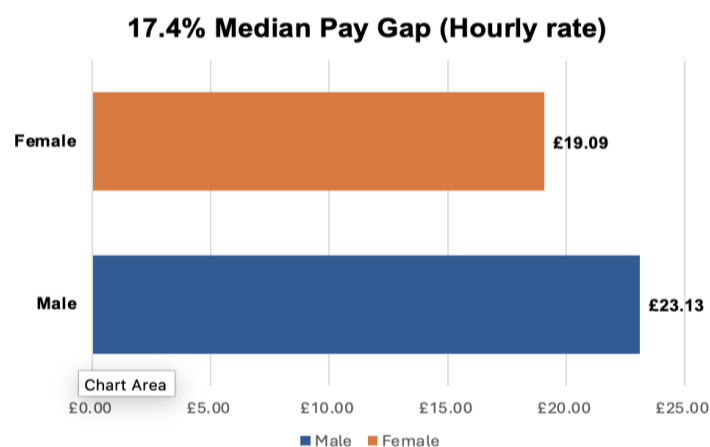
Additionally, women are under-represented in senior leadership across the Trust, a pattern reflected in the pay-quartile data where the proportion of women remains similar in the lower and middle quartiles but falls by roughly 25% in the upper quartile. Senior leadership roles are concentrated in that highest-paid quartile, so the lower representation of women in those posts reduces the average hourly pay for women and is a significant driver of the overall gender pay gap.

Whilst the above reflect the local drivers of our pay gap, it is important to acknowledge this gap is also impacted by a range of wider cultural and structural barriers that restrict women’s progression into higher-paid roles – for example, gendered caring responsibilities and parental leave patterns, part-time working profiles, occupational stereotypes and recruitment practices, and gaps in access to sponsorship, coaching and leadership development. These factors reduce the pipeline into senior and consultant posts and therefore materially contribute to the Trust’s overall gender pay gap.

Median Gender Pay Gap

The percentage difference between the midpoint hourly pay for men and women.

The median hourly rate is the midpoint of all hourly earnings. Half of our employees earn more and half earn less. It provides a more reliable indicator of typical pay because it is not skewed by a small number of very high earners.



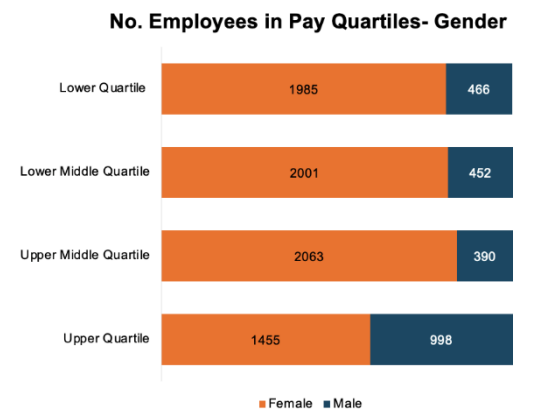
At East Kent, the median hourly rate for men is £23.14, compared with £19.09 for women. This results in a **median gender pay gap of 17.4%**, meaning women have a lower median hourly rate than men.

Although the median gender pay gap is smaller than the mean average hourly rate, it still indicates a measurable difference in typical hourly earnings between men and women. The median measure is useful for identifying pay differences that affect the wider workforce rather than those influenced by the distribution of employees in the highest-paid roles. For this reason, the median is considered a reliable indicator when assessing structural pay patterns across the organisation.

Proportion of Men and Women in each Pay Quartile

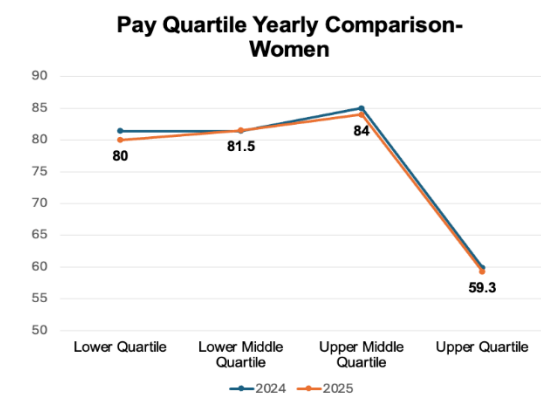
The gender distribution when the workforce is divided into four equal pay-based quartiles.

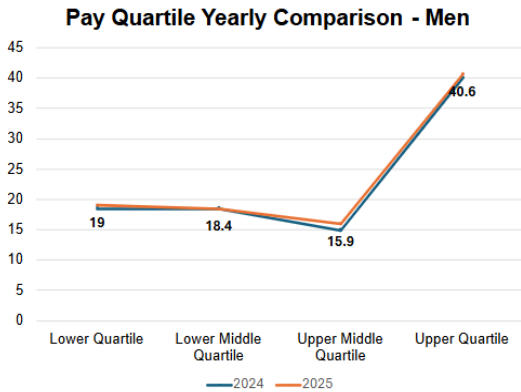
Pay quartiles provide a simple way of showing how men and women are distributed across our organisation's pay structure. To create them, all colleagues are lined up according to hourly pay and then divided into four equal-sized groups. Looking at the gender balance within each quartile helps us understand where representation is strongest, when it weakens, and how this pattern contributes to our overall gender pay gap.



The above graph illustrates the distribution of male and female employees across each pay quartile. Quartiles are decided by ordering all staff by hourly pay and splitting them into four equal groups.

The data of the pay quartile distribution within East Kent Hospitals University Foundation NHS Trust shows that women make up the majority of the employees across all four quartiles; however, **the proportion of women decreases in the highest-paid quartile**. In the lower three quartiles, women represent between approximately 80% and 84% of employees. In the upper quartile, this reduces to around 59%.





For women, representation remains consistently high in the lower, lower-middle, and upper-middle quartiles, where women make up approximately 80% to 84% of the workforce. In the upper quartile, this proportion decreases to around 59%, reflecting a reduction of approximately 25 percentage points compared with the other quartiles.

For men, the pattern differs. Men represent between 16% and 19% of employees in the first three quartiles, with the lowest proportion in the upper-middle quartile (390 men). In the upper quartile, the number of men increases to 998, representing around 41% of employees. This increase **contrasts with the pattern observed for women** and indicates greater male representation in the highest-paid roles.

These opposing patterns contribute to the gender pay gap, as the upper quartile contains the highest-earning positions within the organisation.

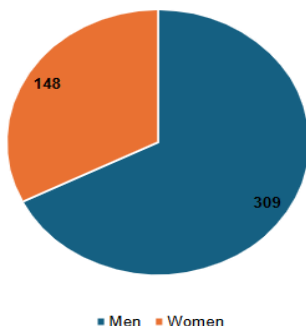
Gender Bonus Pay Gap

The GPG data requirement also looks at the difference between bonus payments received by men and women. In March 2025, the proportion of individuals receiving a bonus by gender is as follows:

Male: 309 - 67.6% of total recipients

Female: 148 - 32.3% of total recipients

Bonus Distribution - Gender



Mean Bonus Pay Gap

The percentage difference between the average bonus pay for men and women.

Bonus payments during the reporting period were **almost exclusively awarded to medical consultants**. A total of 309 male consultants and 148 female consultants received a bonus, representing 91% of eligible male consultants and 88% of eligible female consultants.

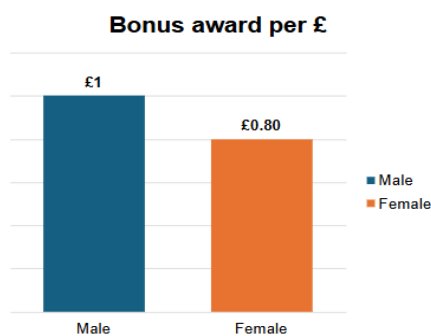
The **mean bonus gender pay gap of 19.7%** is influenced by the gender profile of our consultant workforce, which is 68% male and 32% female. Because consultants receive a disproportionate share of bonus payments, the higher number of male bonus recipients raises the male average bonus and widens the headline gap. This pattern reflects representation and eligibility rather than clear evidence of unequal bonus awards for equivalent roles.

The mean bonus gender pay gap also reflects the variation in bonus values outside the equal Local Clinical Excellence Award (LCEA) allocation for medical consultants. The average bonus amounts were:

Male mean bonus: £5,675.56

Female mean bonus: £4,553.17

Difference: £1,122.39



This means that, on average, women received £1,122.39 less in bonus payments than men. **For every £1 paid to men in bonus awards, women received approximately 80p.**

The higher mean bonus gender pay gap is driven by a combination of factors relating to workforce composition, the variation in bonus award values, and the distribution of roles associated with higher-value payments.

In addition to the equal Local Clinical Excellence Award (LCEA) allocation, further discretionary or legacy awards vary in size and are not distributed uniformly. From the snapshot data reported on 31st March 2025, bonus values for men range from £2,300 to £59,000, whereas bonus values for women range from £2,800 to £30,000, creating a wider spread of bonus amounts for men and increasing the mean difference. Higher-value bonus payments are also concentrated in specific specialties or roles that are more commonly occupied by men within the consultant workforce, and this distribution further contributes to the higher mean bonus gender pay gap.

Median Bonus Gap

The percentage difference between the midpoint bonus pay for by men and women.

The **median bonus gender pay gap is 0%**. This outcome is due to the Trust’s Local Clinical Excellence Award (LCEA) funding being distributed on an equal basis to consultants, with approximately 90% of consultants receiving an equal share of £1,328.56 in legacy award funding. This warrants further review of the bonus award criteria to understand why the distribution did not reach 100% of consultants, and to ensure that no eligibility or allocation requirements have been overlooked.

Gender Pay Gap: Local & National Benchmarking

Local Peer Group Comparison- 2025

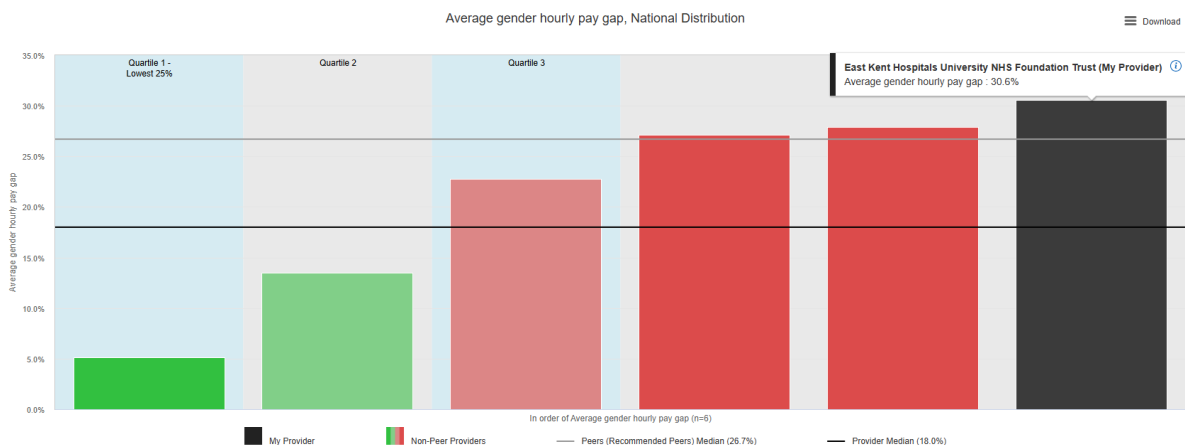
Employer	GYP (hourly pay) Mean %	GYP (hourly pay) Median %	Lower	Lower Middle	Upper Middle	Upper
Kent Community Health NHS Foundation Trust	5%	-0.8%	85.8%	88.8%	90.4%	84.3%
Kent and Medway Mental Health NHS Trust	13.5%	3.7%	80.9%	71.6%	77%	68%
Maidstone And Tunbridge Wells NHS Trust	22.8%	4.4%	77%	76%	82%	62%
Dartford And Gravesham NHS Trust	27%	18.66%	85%	84%	81%	64%
East Kent Hospitals University NHS Foundation Trust	31.2%	17.4%	81%	81%	85%	59.9%

Based on the 2024/25 NHS South East benchmarking, East Kent Hospitals mean gender pay gap is 31.2% (median 17.4%), placing the Trust **below most regional peers**.

While women are strongly represented in the lower and middle quartiles (approximately 81% in the lower and lower-middle quartiles and 85% in the upper-middle quartile), their share falls to 59.9% in the highest-paid quartile which is a lower proportion than seen across much of the region.

This concentration of men in the top quartile, where the highest-paid roles sit, is the principal factor driving our wider pay gap compared with other South East Trusts.

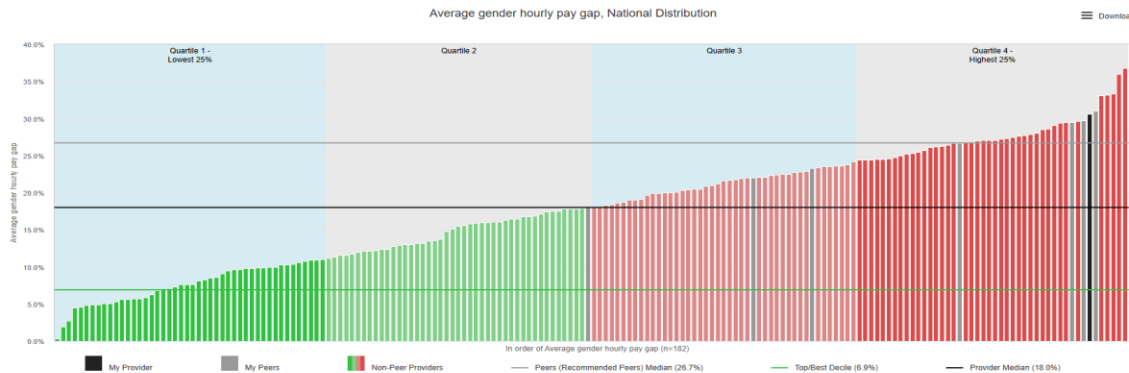
Local Peer Group Comparison- 2024



East Kent Hospitals had an average gender hourly pay gap of **30.6% in 2024**, placing it as

the highest peer when compared with other organisations. This gap was higher than both the peer median (26.7%) and the overall provider median (18.9%). The Trust's 2025 figure has increased further to 31.2%, meaning **the pay gap has widened** compared with the previous year.

National Peer Comparison- 2024



East Kent Hospitals is ranked within the fourth quartile nationally, placing it among the highest gender pay gaps out of 229 providers across the country. This means the Trust sits in the section where the largest gaps are concentrated, positioned well above both the national median and peer median.

Conclusion

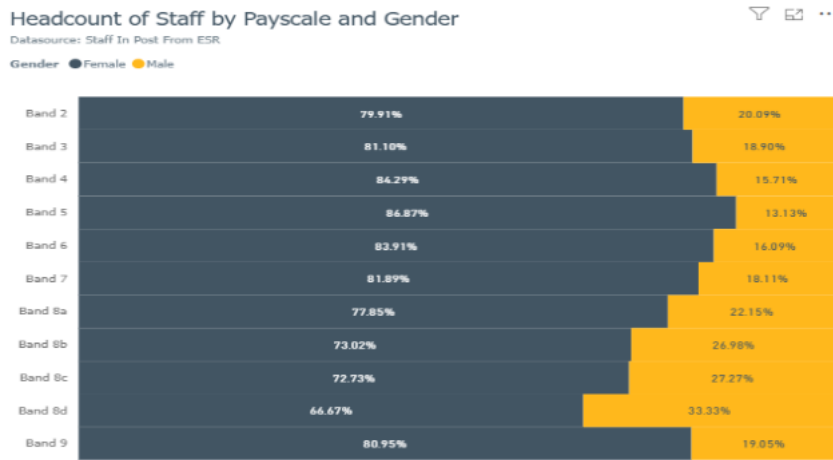
Closing the Gaps: Our Commitments to Pay Equality in 2026 and Beyond

East Kent Hospitals University NHS Foundation Trust recognises that our gender pay gap remains significant, and is committed to addressing it with honesty, ambition and sustained action. The most recent data show a **mean gender pay gap of 31.2%**, placing the Trust in the highest national quartile among nearly 230 providers; this means our gap is larger than most NHS organisations regionally and nationally. We acknowledge these findings, understand the structural factors that drive them, and are determined to make measurable progress.

Our analysis indicates the gap is driven primarily by the distribution of roles rather than by unequal pay for equivalent work. Women are well represented in the lower and middle pay quartiles, demonstrating that our workforce is rich in female talent at the foundation and operational levels. However, they are under-represented in the highest-paid quartile and in senior clinical and leadership roles; consultants and other senior posts are concentrated in that top quartile and are disproportionately male. These patterns reflect national trends but are more pronounced in East Kent. Addressing representation, progression pathways, and the cultural and structural barriers that limit advancement is therefore central to closing the gap.

While our current data highlights areas of concern, there are positive signs that give us confidence. Women are strongly represented across our Agenda for Change workforce (Bands 2 to Band 9), demonstrating that our organisation has deep female expertise and

commitment at its core. Maintaining this strength while improving representation in senior roles is central to closing the gender pay gap in a way that supports both fairness and organisational effectiveness.



The Trust will take a long-term, accountable approach to change. We have set a strategic ambition to **close the gender pay gap by 2050**, recognising that meaningful workforce transformation requires time, investment and consistent focus. We will publish our data annually, report progress against clear, measurable actions, and strengthen partnerships across clinical teams and system partners to remove barriers and expand opportunities.

Our initial action plan will be co-designed and refined with Staff Congress, staff networks, change ambassadors, wider advocates and key stakeholders and will be further developed throughout the year following the establishment of a **Pay Equity Task & Finish Group**. The plan will set out the interventions, timelines and metrics we will use to track progress and ensure transparency and accountability as we work to improve representation at senior levels and ultimately, close the gap.

Gender Pay Gap Action Plan: 2025/26

Theme	What actions will we take over the next 12 months
Data & Insight	<ul style="list-style-type: none"> - Develop an intersectional pay-gap reporting dashboard to provide clearer, more granular visibility of disparities across protected characteristics and staff groups. - Establish a Pay Equity Task & Finish Group to oversee analysis, identify priority actions, and ensure continuous improvement in pay-equity monitoring and governance.
Recruitment	<ul style="list-style-type: none"> - Introduce Recruitment Inclusion Ambassadors as independent panel members for Band 7+ appointments, prioritising panels where senior leadership teams lack gender diversity. - Promote acting-up and secondment opportunities to help staff gain experience and progression pathways, particularly in areas with limited recruitment activity. - Develop diverse talent pools for unsuccessful candidates, offering follow-up mentoring, coaching, and careers guidance to support future applications and broaden the pipeline for senior roles.
Career Development	<ul style="list-style-type: none"> - Strengthen mentorship opportunities for female consultants, ensuring access to tailored guidance, peer support, and career-advancing networks.

	<ul style="list-style-type: none"> - Introduce a dedicated Career Development Programme for women in leadership, providing a structured, peer-led space with resources, knowledge-sharing, and support to progress into senior roles. - Encourage managers to hold regular career development conversations, including through the appraisal process, with a particular focus on supporting women to identify opportunities, build confidence, and plan their progression pathways.
Governance	<ul style="list-style-type: none"> - Review and update relevant Trust policies that support women through key life stages that may affect career progression, including Menopause and Period Policies. - Identify any policy gaps or barriers and ensure guidance is evidence-based, accessible, and aligned with best practice across the NHS. - Strengthen governance oversight by incorporating these policies into routine reviews and ensuring consistent application across all sites and staff groups.
Engagement & Outreach	<ul style="list-style-type: none"> - Work collaboratively with Staff Networks to co-design and lead meaningful initiatives that strengthen inclusion, support development, and reflect the lived experiences of colleagues across the Trust. - Establish regular focus groups and feedback opportunities to understand what staff value, identify barriers to progression, and shape development support based on direct staff insight.
Psychological Safety	<ul style="list-style-type: none"> - Increase awareness of the Trust's Sexual Misconduct Policy, supported by clear communications, confidential reporting routes, and accessible advocacy and support options. - Expand civility and respectful workplace training, including compassionate leadership, cultural awareness, and anti-racism programmes, delivered consistently across all sites and staff groups. - Promote flexible working options proactively, including at Trust Welcome Days and through Occupational Health, ensuring staff understand available pathways and support.