

Gender, ethnicity
and disability
pay gaps report
2022

Foreword

As the independent regulator of more than 758,000 nursing and midwifery professionals and employer of more than 1,000 colleagues, the Council and Executive Board of the NMC are determined that all our work must be built on a solid foundation of tackling discrimination, advancing equality, valuing diversity and promoting inclusion.

Analysing the information we hold is key to understanding where we should be focusing our efforts. These pay gap reports raise important issues for us to address.

I'm personally disappointed, and I know my senior colleagues feel the same, that our pay gaps for gender and ethnicity have increased. We also need to ensure colleagues are supported to share with us if they have a disability. The number is lower than expected and likely distorting that data. We have much more to do but recognise that it can take time to achieve the impact we want to see.

The pay gaps set out in this report do not mean we have an equal pay issue – our grading structure ensures that colleagues are rewarded fairly for the work they do at each level.

What the pay gaps do demonstrate though is that we have an under-representation of women and people from Black and minority ethnic (BME) backgrounds at senior levels in the organisation. This has been exacerbated in 2021-2022 as our additional recruitment, largely to address the high fitness to practise caseload, has resulted in proportionately more

women and more people from BME backgrounds in lower grades.

We're absolutely committed to establishing stronger foundations to tackle our pay gaps, including the launch of our new People Plan and Equality, Diversity and Inclusion (EDI) Action Plan.

We particularly need to focus on race inequality, and have embedded specific actions in our EDI action plan to improve race equality and support the progression of BME colleagues.

We know we cannot be complacent about our gender gap. We're a predominantly female organisation and yet we see women are underrepresented in senior management roles, and men are underrepresented in junior roles compared to the overall employee population.

We also need to make sure all colleagues feel confident to declare their disability so we can ensure they are properly supported and able to progress in the organisation too.

In previous years we have published separate reports for gender, ethnicity and disability pay gaps. I'm glad we have pulled everything together into this one report this year. There's a lot for us to do as the report makes very clear. It'll take a concerted effort on behalf of the whole leadership team and all managers to make the difference we want to see across the organisation so everyone can flourish and develop their careers with us.

You have my personal commitment that that's exactly what we'll do.

Andrea Sutcliffe
Chief Executive and Registrar

Our 2022 pay gaps report

What are pay gaps?

Pay gaps are an equality measure that shows the difference in average earnings for different groups of people in an organisation. At the NMC we publish our gender, ethnicity and disability pay gaps each year. Publishing our gender pay gap is a legal requirement, and we voluntarily publish our ethnicity and disability pay gaps as part of our commitment to transparency and improvement in these areas.

Gender pay gap

As an employer with over 250 employees, we have had a legal duty since 2017 to publish our gender pay gap data, a written statement on our website and report our data to the online government pay gap reporting service.

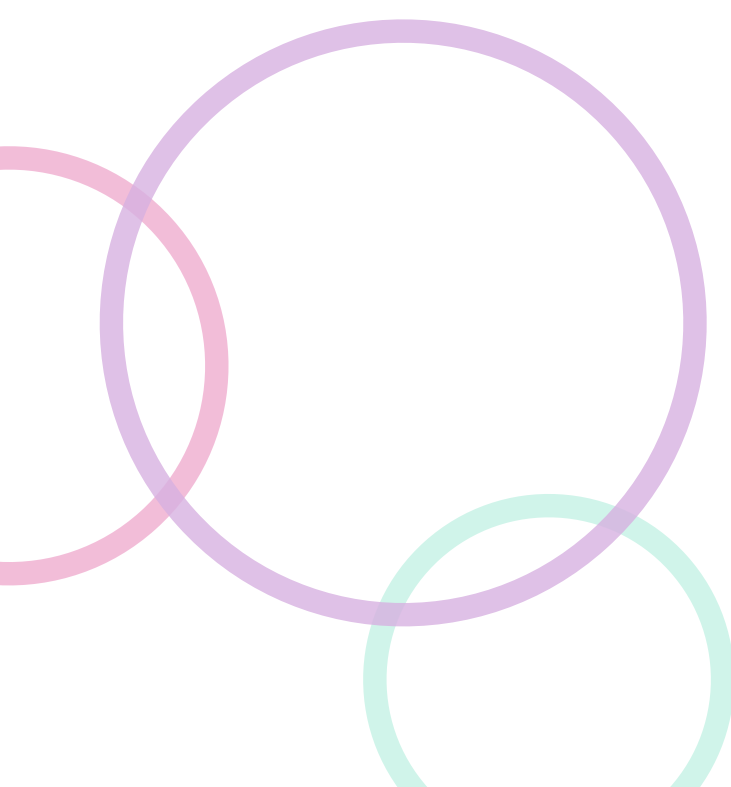
The gender pay gap measures the gap between the average pay for women against the average pay for men.

Ethnicity pay gap

The ethnicity pay gap measures the difference between the average pay for BME colleagues, and the average pay for white colleagues. We publish our ethnicity pay gap using the same criteria as the gender pay gap to be transparent and to help us set actions to tackle race inequality.

Disability pay gap

We also publish our data on the average pay for disabled and non-disabled colleagues using the same criteria. This is to help us understand where gaps may exist, and what actions we need to take to improve disability equality in the workforce.



At a glance: what does our data show?

This page sets out our pay gap data as of April 2022. We don't award bonuses at the NMC, so we don't report a bonus gap.

Gender pay gap

	Mean	Median
2022	6.2% ↑	12.7% ↑
2021	4.9%	8.3%

Ethnicity pay gap

	Mean	Median
2022	25.5% ↑	27.1% =
2021	23.7%	27.1%

Disability pay gap

	Mean	Median
2022	-4.4% ↓	-11.8% ↓
2021	-3.4%	-9.8%

What's the difference between mean and median?

The mean pay gap measures the average pay for one group against another, for example the average pay for women in an organisation compared to the average pay for men.

The median pay gap compares the 'middle' pay for one group against another, when all values are ranged from low to high. The median is less affected by outliers when compared to the mean.

What does this data mean?

Why do we have pay gaps?

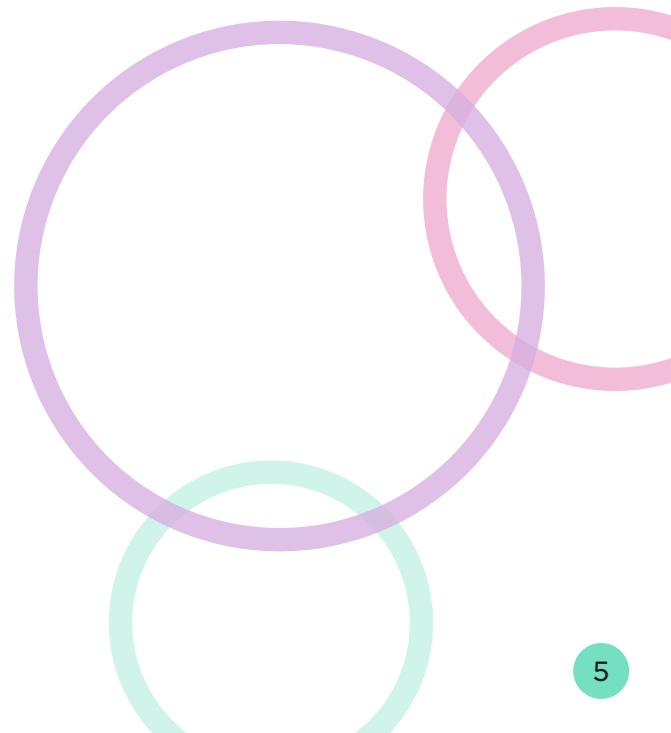
Our gender and ethnicity pay gaps exist for many different reasons, a primary one being the underrepresentation of BME people in higher grades at the NMC. This is the main reason we have a median ethnicity pay gap. An under-representation of women in the middle upper quartiles is the reason we have median gender pay gap. We recognise that under-reporting of disability in the workforce may be a cause of the inverse disability pay gap, as our data shows that people in our upper pay quartile are more likely to declare their disability status. Our data declarations overall for colleagues with a disability are below the national average: approximately 20 percent of the UK working age population have a disability, whereas just 7 percent of the NMC workforce have declared a disability.

In the past year the number of people working at the NMC increased by 7.3 percent (from 988 to 1,060 employees). This was partly due to us increasing the number of employees as part of our fitness to practise improvement programme, and this increase has mainly been in lower grades. The increase in our gender pay gap can be partly explained by this change, as we know there are higher proportions of women in these roles. The increase in our ethnicity pay gap is mainly because our upper quartile, which contains our highest paid employees, has seen a 2 percent increase in white employees over the last year.

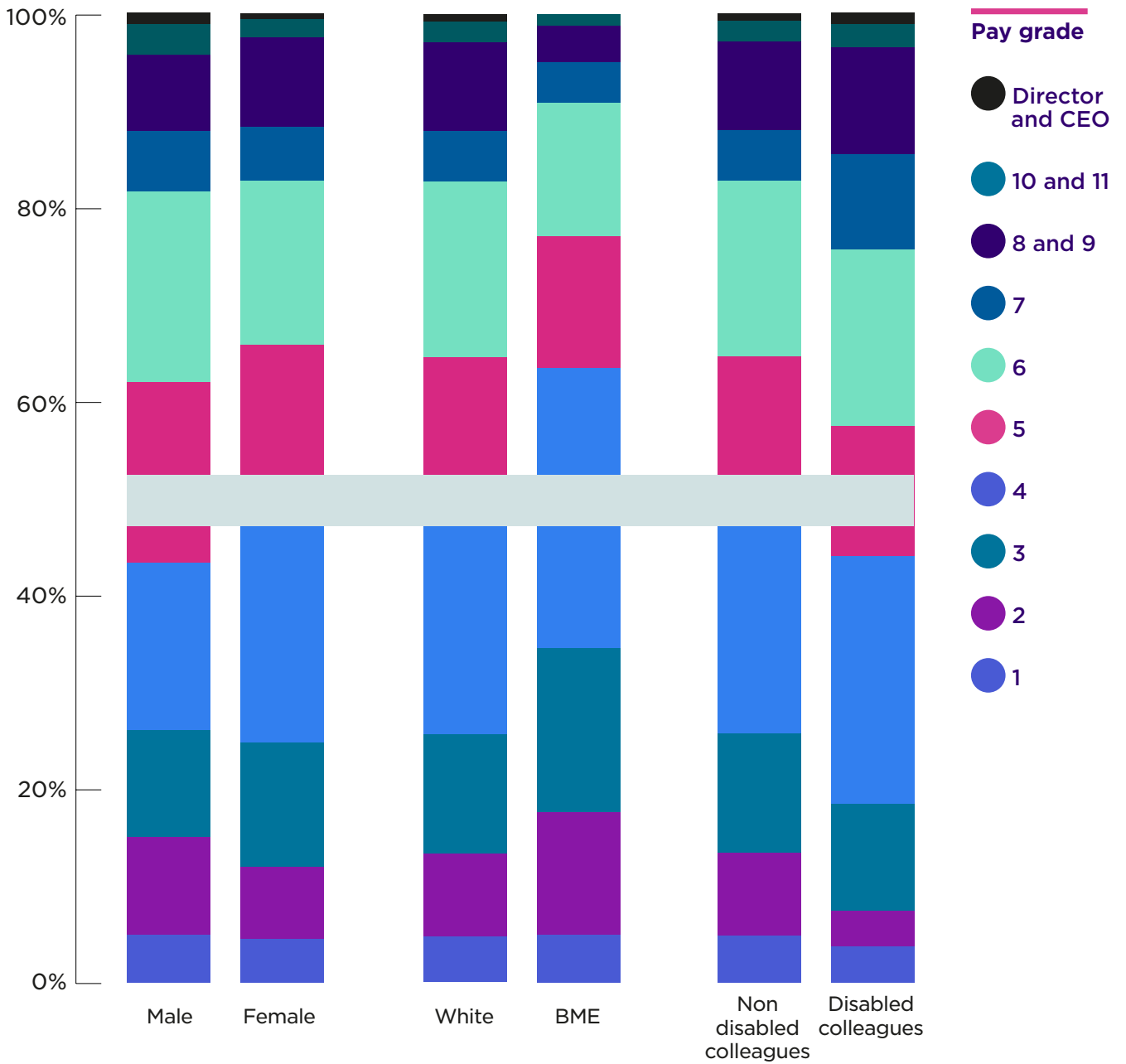
What is the difference between pay gaps and equal pay?

A pay gap compares the average pay for different groups of people. It's different from equal pay, which instead looks at whether people are paid the same for work of equal value and whether there is pay inequity across protected characteristics for people in the same or similarly graded roles.

Our analysis highlights that there are no significant pay differences on the basis of gender, ethnicity or disability when we compare employees doing the same (or 'like for like') roles.



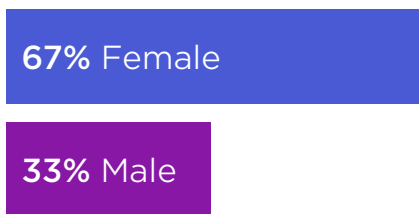
Representation of gender, ethnicity and disability across grades at the NMC



Workforce gender: quartiles

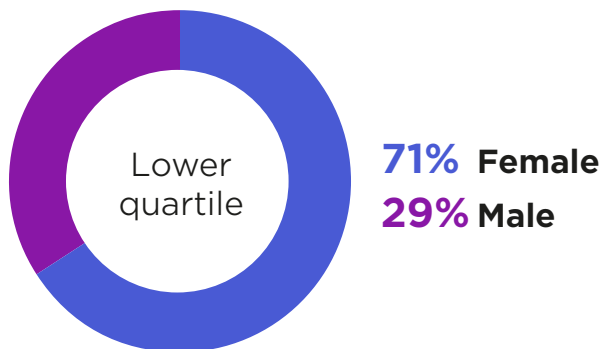
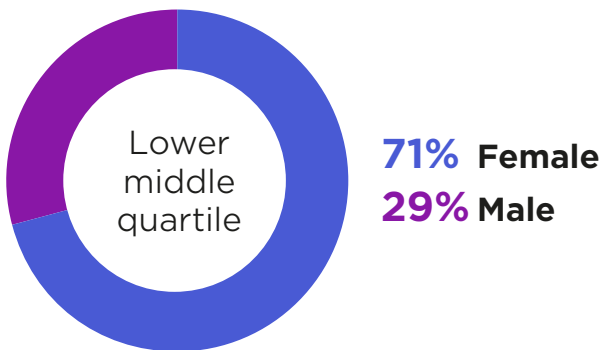
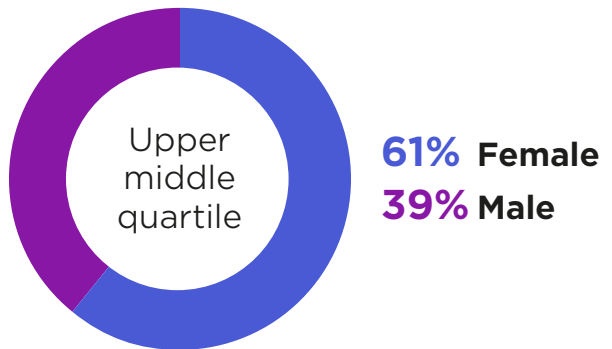
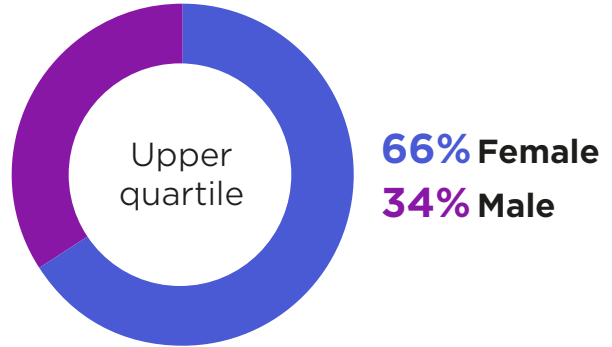
Overall our workforce is made up of 67 percent women and 33 percent men¹.

The proportion of women working at the NMC has slightly increased since 2021:



There were also small changes in the quartiles compared to last year.

	2021	2022
Upper quartile female colleagues	64%	66% ↑
Upper middle quartile male colleagues	38%	39% ↑
Lower middle quartile female colleagues	67%	71% ↑
Lower quartile female colleagues	70%	71% ↑

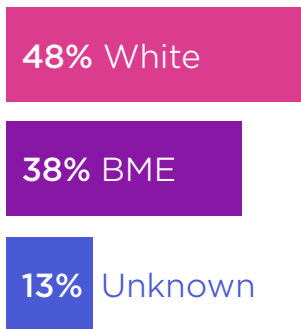


¹ We recognise that the requested data collection for statutory reporting purposes is binary, and that this does not reflect the identity of some of our colleagues. We are working to ensure our processes and policies are fully inclusive of trans and non-binary people, and acknowledge that the nature of this report as a pay gap report to compare men and women may limit our understanding of pay gaps in relation to some trans and non-binary people. We have committed to disaggregating and cross-referencing this data further.

Workforce ethnicity: quartiles

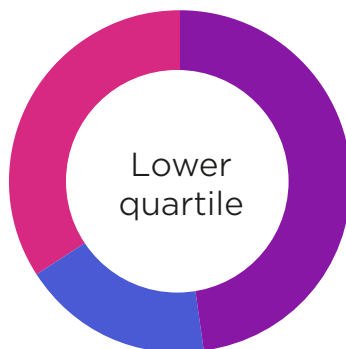
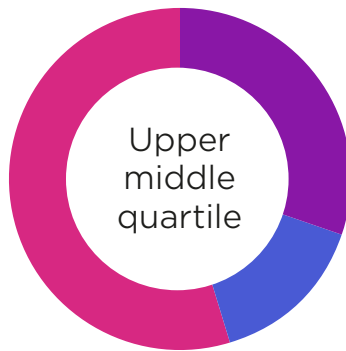
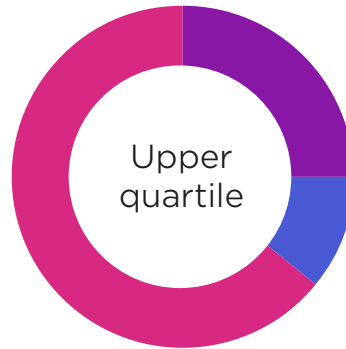
Overall our workforce is made up of 38 percent BME colleagues and 48 percent white colleagues. 13 percent of colleagues have not declared this information in their monitoring data.

Since 2021 the proportion of employees declaring their ethnicity has slightly decreased resulting in a decrease in both white and BME employees:



There were small changes in the quartiles compared to last year.

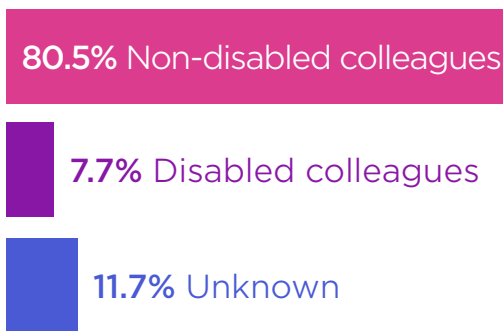
	2021		2022
Upper quartile	62%	white colleagues	64%↑
Upper middle quartile	57%	white colleagues	53%↓
Lower middle quartile	42%	white colleagues	40%↓
Lower quartile	52%	BME colleagues	48%↓



Workforce disability: quartiles

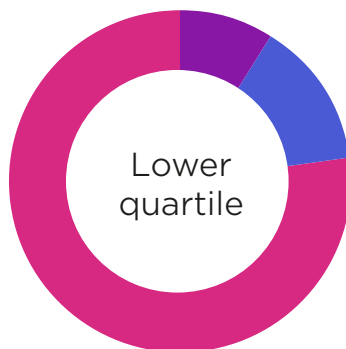
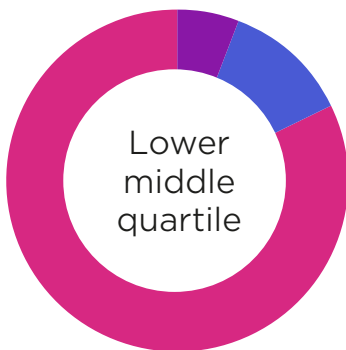
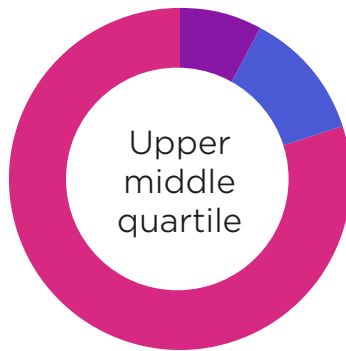
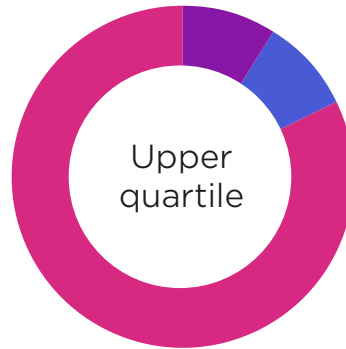
Overall our workforce is made up of 7.7 percent disabled colleagues and 80.5 percent non-disabled colleagues. 11.7 percent of colleagues have not declared this information in their monitoring data.

The biggest change this year was an increase in disabled colleagues disclosing their disability:



There were small changes in the quartiles compared to last year.

	2021	2022
Upper quartile	5% disabled colleagues	9%↑
Upper middle quartile	9% disabled colleagues	8%↓
Lower middle quartile	3% disabled colleagues	6%↑
Lower quartile	5% disabled colleagues	9%↑



What are we doing to tackle our pay gaps?

We recognise that we need to take meaningful action to address our pay gaps.

We've established good foundations for this through our People Plan (2022 - 2025) and EDI Plan, both of which launched in 2022. Our EDI Plan is holistic in its approach; however, it sets out specific actions which will move the dial particularly on race equality, and actions which directly relate to tackling our gender and disability pay gaps too. We recognise that progress takes time and have set out a number of actions which we believe will have a positive impact on the recruitment, progression and retention of colleagues from under-represented groups, over a three-year period.

Our immediate priorities are:

- to review and improve our recruitment, promotion, and progression of underrepresented colleagues
- to improve the capability and confidence of our leaders and colleagues on EDI.

Actions which directly relate to tackling our pay gaps in our People Plan (2022 - 2025) and EDI Plan include:

- reviewing and strengthening our internal recruitment and promotion processes to improve outcomes for underrepresented groups
- listening to and learning from evidence such as exit interviews and recently appointed internal candidates to support us to create targeted interventions
- implementing positive action into our new management and leadership programmes from 2022 to support the progression of under-represented groups
- supporting our senior leaders to develop and publish EDI objectives which ensure they take accountability for improving EDI outcomes in their Directorates
- role modelling part time and job share working at every level with a particular focus on senior roles.

By the end of year one:

We hope to see an improvement in leadership accountability and oversight for EDI. We'll have implemented our new Applicant Tracker System which will enable us to better monitor the diversity of applications and therefore identify any disparities in our recruitment processes. We'll have an established offer of leadership development with a diverse community of employees accessing this to support their progression. We'll ensure women and BME colleagues have access to these opportunities by targeting activity in areas where there is low representation of these groups and implementing positive action.

By the end of year two:

Our colleagues will be more skilled on EDI to be competent and confident on topics directly relevant to their role, and be equipped to recruit, develop and support diverse teams effectively. We'll see fewer barriers and issues arising in relation to recruitment and progression for women and BME colleagues, and an improvement in the provision of disability inclusion and reasonable adjustments. We also want to role model part time and job share working at every level but particularly senior roles.

By the end of year three:

We hope to see an increase in diversity across all tiers of our workforce and begin to see a reduction in our gender and ethnicity and pay gaps, and better data to help us understand the picture for disabled colleagues. We'll have business plans for each directorate which are informed by EDI data and will be able to embed best practice EDI considerations in our next NMC Strategy for 2025 and beyond.

Our People Plan and EDI Plan have further detail on these actions.

How will we know we're making progress?

We'll use a range of internal and external measures to make sure we are held accountable for making progress on our EDI ambitions and pay gaps.

This includes analysing our pay gap data intersectionally and in more depth to understand where recruitment and career progression barriers exist. It also includes collecting feedback from colleagues via our internal Your Voice survey and our recruitment and onboarding survey, our EDI employee networks, and stakeholder views via benchmarks such as the NHS Workforce Race Equality Standard and the Business Disability Forum's Disability Smart Audit.

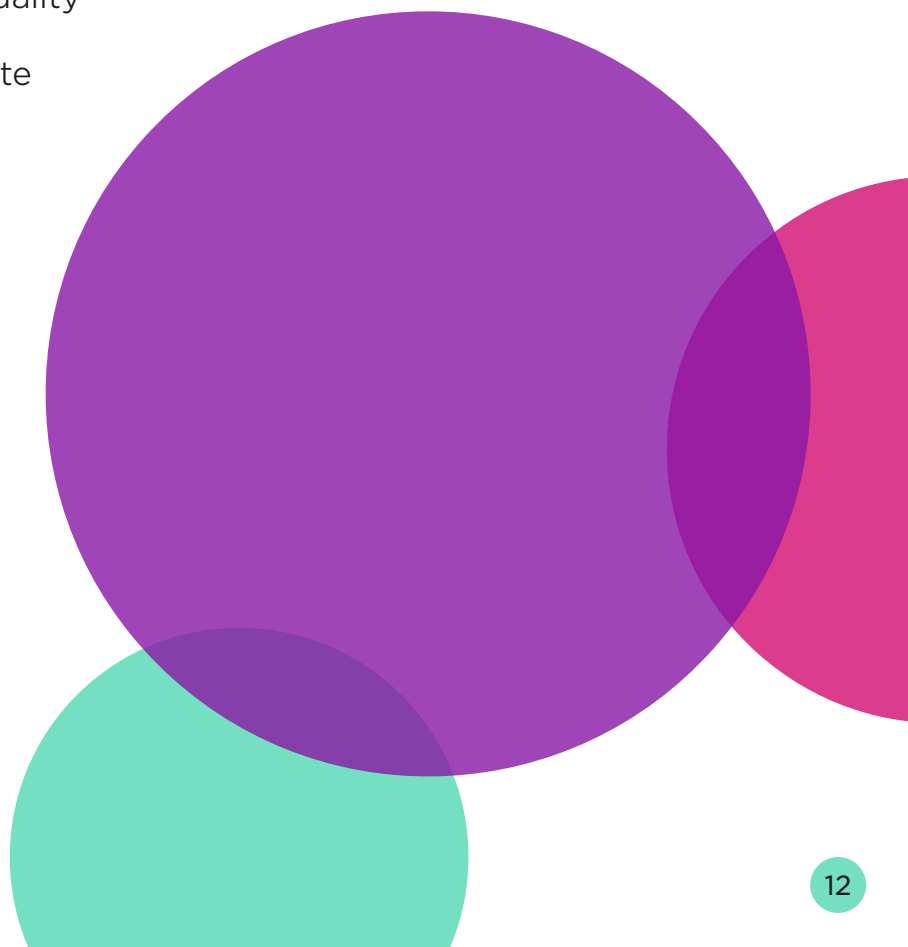
The actions to tackle our pay gaps will be monitored as part of our EDI action plan under the leadership of EDI Leadership Group members and the scrutiny of members of Executive Board and Council.

Summary

We're taking action, but we have much more to do. We recognise our individual and collective responsibilities to address the issues causing our pay gaps. And we're committed to working with our colleagues to make change.

We have work to do as an employer to address the challenges shown by our pay gap data. We have developed a clear, focused action plan to support our EDI Plan and will be held to account for our progress. And we're continuing to work closely with our employee networks and other stakeholders to help us.

Some change can be made quickly, but some changes will take time, continued effort and, at times, uncomfortable conversations. Creating the long-lasting change needed to embed workforce equality can't be done in isolation. Collectively, we can all help create the conditions and ambitions to make this possible.



nmc
**Nursing &
Midwifery
Council**

23 Portland Place,
London W1B 1PZ
+44 20 7637 7181
www.nmc.org.uk

 @nmcnews

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