

## Gender Pay reporting 2024 - 2025

### **General information**

Primacy Healthcare 21 Gender Pay Reporting 1 July 2024 to 30 June 2025

As at the snapshot date of 30 June 2025, Healthcare 21 employed 273 people in Ireland, comprising 99 women and 174 men. This report has been prepared in line with the Gender Pay Gap Information Act 2021 and associated regulations, based on 12 months of remuneration data for employees who were employed on the snapshot date.

The figures include full-time, part-time and temporary employees, and reflect base pay, bonus payments and benefits-in-kind as required under the legislation

Gender pay gap is different to equal pay. Gender pay gap measures the difference in the average gross hourly earnings of all male and all female colleagues in a company. It should not be confused with equal pay, which instead looks at the pay difference between men and women who are performing the same or similar roles.

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7 (1) the difference between the mean hourly remuneration of relevant employees of the male gender and that of relevant employees of the female gender expressed as a percentage of the mean hourly remuneration of relevant employees of the male gender

Hourly remuneration Mean % difference: 10%

8 (1) the difference between the median hourly remuneration of relevant employees of the male gender and that of relevant employees of the female gender expressed as a percentage of the median hourly remuneration of relevant employees of the male gender.

Hourly remuneration Median % difference: 9%

9 (1a) the difference between the mean bonus remuneration of relevant employees of the male gender and that of relevant employees of the female gender, expressed as a percentage of the mean bonus remuneration of relevant employees of the male gender

Bonus mean % difference: 20%

9 (1b) the difference between the median bonus remuneration of relevant employees of the male gender and that of relevant employees of the female gender, expressed as a percentage of the median bonus remuneration of relevant employees of the male gender

Bonus median % difference: 17%

9 (1c) the percentage of all relevant employees of the male gender who were paid bonus remuneration and the percentage of all relevant employees of the female gender who were paid such remuneration.

F: 91%

M: 91%

9 (1d) the percentage of all relevant employees of the male gender who received benefits in kind and the percentage of all relevant employees of the female gender who received such benefits.

F: 20%

M: 19%

10. (1) The information which is required to be published or made available under Regulation 6(1)(a)(iv) is the respective percentages of all relevant employees who fall within - (a) the lower remuneration quartile pay band, (b) the lower middle remuneration quartile pay band, (c) the upper middle remuneration quartile pay band, and (d) the upper remuneration quartile pay band".

Hourly Pay by Quartile	F	M
lower quartile	37%	63%
lower middle quartile	43%	57%
upper middle quartile	32%	68%
upper quartile	33%	67%

#### Healthcare 21 commentary

For the reporting period 1 July 2024 to 30 June 2025, Healthcare 21's overall gender pay gap in mean hourly remuneration is 10%, and the median hourly remuneration gap is 9%. This represents a change from a mean hourly gap of -1% in 2023/2024.

The primary drivers of this change are workforce composition and movements during the period. We have had an increase of 8 employees in this snapshot year, all of whom are men, and these roles sit predominantly in higher-paid functions. At the same time, there were a number of female employees on family leave which was not fully paid during the reporting period. This combination has contributed to the shift in the overall hourly gender pay gap.

Despite this, the median hourly remuneration for women has increased by 1 percentage point compared to 2023/2024. This is largely due to the appointment of a female Head of Operations in August 2024, which has strengthened female representation in senior roles.

Looking at hourly pay by quartile, the proportion of women in the lower quartile has increased by 5 percentage points year-on-year, and the proportion of women in the upper quartile has increased by 2 percentage points. The number of women in the upper-middle quartile has decreased by 3 percentage points. These movements reflect both new hires and internal progression during the period, as well as the impact of family leave patterns. It also shows that women are represented at all pay levels but are under-presented in some higher-paid quartiles.

Regarding bonus remuneration, the difference between the mean and median bonus for men and women has increased compared to the previous year. This is driven mainly by new male joiners who are eligible for higher bonus opportunity and by changes in the timing of bonus payments. In particular, our female CEO moved from a quarterly to an annual bonus structure, which reduced the

level of bonus paid to her within this specific 12-month snapshot, even though her overall bonus opportunity has increased.

In the snapshot period, 91% of both male and female employees received a bonus. Although coverage is high and balanced between genders, within this group men received, on average, a higher bonus amount than women, which contributes to the bonus gender pay gap.

The proportion of employees receiving benefits-in-kind (BIK) is 20% for women and 19% for men. Over the reporting period, the mean and median BIK values for men decreased slightly, while the equivalent values for women remained stable. Overall, BIK does not materially drive the gender pay gap at Healthcare 21, but we continue to monitor access to and the value of BIK to ensure equity.

### **Key drivers of our gender pay gap**

Our gender pay gap is primarily driven by workforce composition, patterns of leave, and the distribution of men and women across roles and seniority levels.

During the 2024/2025 reporting period, our overall headcount increased by eight employees, all of whom are men. These roles are largely in higher-paid functions, which has contributed to the shift from a small gap in favour of women last year to a 10% mean hourly gap in favour of men this year.

The period also included a number of female employees taking family leave that was not fully paid. This reduced their measured remuneration within the 12-month snapshot window, impacting hourly pay and widening the gender pay gap. In response, Healthcare 21 has moved to providing full pay during ordinary maternity leave for eligible employees, which we expect will support better gender equity in future reporting periods.

At the same time, we have made progress in increasing female representation in senior roles, including the appointment of a female Head of Operations in August 2024 and a female CEO which was outside this snap shot period but whose bonus structure moved from quarterly to annual. While the change in bonus timing for the CEO reduced the level of bonus captured in this particular snapshot, it does not reflect a reduction in overall opportunity, and we expect the impact to normalise over time.

The quartile data shows that women are better represented in some lower and lower-middle quartile roles, with a smaller proportion in upper-middle and upper quartiles compared with men. This distribution, combined with the concentration of some higher-paid roles among men, continues to drive part of the overall gender pay gap.

We will continue to monitor these drivers closely, focusing on recruitment, progression, family-friendly policies and reward practices to ensure that pay and opportunity remain fair and equitable for all employees.

### **How Healthcare 21 moves to improve gender pay differences**

Healthcare 21 is committed to reducing our gender pay gap over time. We are focusing on the following actions:

- Fair and transparent pay structures

Healthcare 21 operates fair pay structures that clearly define how salaries are determined, taking into account skills, experience and responsibilities while eliminating gender bias in pay decisions.

- Fair starting salaries

Starting salaries are based on the candidate's qualifications and experience rather than on previous pay or gender. Setting pay fairly at the point of hire helps prevent long-term pay disparities.

- Equal access to progression

We create pathways for career progression that are equally accessible to all employees, including development opportunities, internal promotions and succession planning.

- Diversity, inclusion and bias awareness

Healthcare 21 invests in diversity and inclusion training, with a focus on unconscious bias. This supports leaders and managers to make fair decisions in areas such as recruitment, promotion and compensation.

- Supportive and family-friendly policies

We are committed to a work environment that supports work-life balance for all employees.

Healthcare 21 has moved to full pay during ordinary maternity leave and enhanced financial support for both maternity and paternity leave from H1 2025. We also launched our Fertility Support Programme in H1 2024 to support and encourage women to progress within the organisation.

- Female representation in leadership

The Senior Leadership team is currently 75% female-led, reflecting our focus on increasing female representation at senior levels.

We will continue to monitor our gender pay gap annually, review our policies and practices, and take further action where necessary to ensure that pay and progression are fair and equitable for all colleagues.