



NHS PAY PROPOSAL

29/03/2018

NHS PAY PROPOSAL – BRANCH UPDATE

The NHS Staff Council framework agreement proposal was released last week and we have all had time to understand it's complexities now, so we wanted to produce this overview from our LAS Branch perspective. We are in an initial stage of consultation with our health members nationally ending mid April when we will individually be asked to make a decision. The ballot will be sent to all members that have a valid email address on their membership record so it is important all members have ensured we have their up to date details (home address, email address and workplace) to be able to have their say which you can do through our website or the freephone UNISON Direct number 0800 0857 857.

This proposal is a three year package, fully funded, which is recommended by both UNISON and the other main Trade Unions that form the staff side of the NHS Staff Council. This proposal and recommendation, however, has not come about easily or quickly and we want our members to understand more than just the main headlines of the proposal to be able to make an informed choice in April whether to accept this proposal or reject it.

You can easily stop reading at this point and make a decision based on the above facts and your personal opinions which will come from various origins. However we think it is important that our members understand the wider background to this proposal and the potential implications of both accepting or rejecting it. This is where things get wordy so stick with us and we will try to make this overview as clear and relevant as possible.

It would be simple for us as Trade Union activists to allow our decision to be ruled by our politics and recommend to reject this proposal off hand as another below inflation pay award. Our Branch Committee and our National Officers are all staunch Trade Unionists and individually would go to any extent to progress pay and rights for our members. However, that's not what we do as a Trade Union nor as a branch, we don't act as individuals, we ensure that what we do is best for our members

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collectively, which is entirely more complicated and why we support this proposal as the best option available to us.

Firstly, let us explain where this proposal originated from. As you may know our employment terms and conditions are governed by a nationally agreed system commonly referred to as Agenda for Change (a4c). This was created in partnership with the NHS employers in 2005, pioneered by UNISON as we have the largest membership of the recognised Trade Unions in the NHS and lead the NHS Staff Council Trade Unions. Contained within a4c are the pay bands which are reviewed yearly by the Pay Review Body, an independent body that takes evidence from both employers and the Trade Unions to make a recommendation for yearly pay changes. The pay review body has, for the past few years, followed government policy and recommended a 1% rise across the board despite the evidence we supplied to the contrary. After the sustained pressure from both the UNISON Pay Up Now campaign and parliamentary pressure through our Labour Link, the government announced in November last year that more money would be made available for NHS pay and pay structure if agreement can be reached between employers and Unions. Since then all the NHS Unions, led by Sara Gorton (UNISON National Officer for Health) have been engaged in intensive talks with the government through the NHS Employers that has resulted in this proposal. All NHS Unions were in agreement with this process and with the resulting progress throughout. All NHS Unions except the GMB have recommended their members now endorse the proposal.

This full proposal itself is available at www.nhspay.org. The first main principle is that no one will lose out which is a fact. It reflects a real substantial rise in actual pay spread across all bands and is achieved in two ways, a 6.5% rise spread over three years across all pay bands and a compression of the bands themselves. The big percentages quoted in the press are the combination of these two measures and can be charted on the individual pay journey document available here <https://www.nhspay.org/pay-calculator/>. What this means is we will move through the existing yearly increments over a shorter time. This addresses both the issue of getting more money in our pay each of the next three years than just the below inflation percentage rise and also the reduction of the extensive time it takes under the current structure to move to the top of the bands which is the level that actually reflects the full salary in each band. In addition, those at the top of their band by April 2019 would receive an additional 1.1% cash lump sum on top of the annual rise. This is a considerably higher rise in everyone's salary in all three years than the previous and expected 1% from the pay review body and further changes in the pay bands will mean new starters enter the bands at a much higher salary than the current levels. The High Cost Area Supplements upper and lower levels will also increase to the same percentages. This has been agreed to be fully funded so employers will be under no pressure to reduce any costs attached to increases in pay.

The next, already most talked about part in our sector nationally, are the changes to unsocial hours arrangements laid out in the a4c handbook on how unsocial hours payments are calculated for ambulance staff and bring it inline with the rest of the NHS. It is most important to note that these changes are voluntary for existing staff.

The change itself is that new staff, or those current staff that voluntarily elect to, move from calculating their unsocial hours payments using annex 5 of the a4c handbook to the main pay arrangements in section 2 that the rest of the NHS already use. This is a change that was to be enforced in 2013 but was successfully defended by UNISON. Again, during the latest negotiations, it was proposed that this change was enforced however Sara was again able defend this and gained the concession that it is voluntary for existing staff. Most of our frontline and EOC rota's we expect to attract comparative if not some increased value of unsocial hours payments under section 2. However, under section 2 sick pay does not include unsocial hours payments (annual leave does attract unsocial hours in section 2, payments are based on earnings in the preceding 3 months). Again, this is a voluntary move and members should ask our employer for the value of this change should they consider it. Existing members would also move to section 2 if they were to change job role or gain promotion. We have asked our national officers to gain clarification on some specifics of what job role change is in relation to what is voluntary, for example we are looking to protect this choice for those employed currently moving through an education package that will take them in to another band such as our staff on a paramedic training program. We will report this once we have the answers but this will be managed through the NHS Staff Council led by, yes you guessed it, UNISON.

The final element worth noting in particular is the link to appraisals. This may appear to cause some anxiety in the employer's willingness to use this as a cost cutting method, however, there are clear measures to address this. Firstly, again, this is fully funded for the employer so they have no reason to prevent members progressing. The appraisal process is clear that all staff are expected to progress on time and to receive the support, training and line manager input they need to satisfy the requirements to do so. The basic requirements for progressing to the next pay point will be that staff:

- are up-to-date with any statutory or mandatory training (providing that this has been made available to them)
- do not have a live formal disciplinary sanction on their record at the time they are due to progress
- do not have a formal capability process underway at the time they are due to progress
- have completed appraisals in line with the organisation's appraisal cycle and standards
- for staff who are line managers – are up-to-date with all the appraisals they need to complete for staff they manage.

This is easily achievable and reflects the progression system that the journey through the band is to recognise the increase in skills and experience of a job over a now shorter period to reach the top of the band and the full salary. The full guidance on all this will be developed jointly by April 2019 and will be implemented locally through policies developed in partnership between the local staff side Trade Unions

(led by us in the LAS) and the employer. We have further raised the question, although it is not specified in the proposal, what effect the MAP policy application would have in the appraisal process and will again report back when this is clear however we expect this not to affect progression. Our link and our leadership through both the LAS and the national Staff Councils ensure we have the best opportunity to achieve positive outcomes on issues such as these.

Many other initial demands made by the employer's side are now off the table notably the loss of annual leave. This is a reflection of the hard work done by UNISON.

It is by no means the best pay rise imaginable. There is no reason to be happy about this proposal. It is not even up to where we began our Pay Up Now campaign. This is a below inflation pay rise and does contain changes to employment terms. We're not really selling it much at this point! However the changes will not force a loss on any member. This is a package for our entire NHS membership. The best and most considerable rises are for the lowest paid bands 1-3 and in fact culminating in the removal of band 1 entirely. All bands will receive considerably more under this proposal than the expected pay review body 1% and the current incremental rises if this proposal is rejected. This is the best that can be negotiated with this government however you would look to achieve it. Rejection and potential action would only at best force a government, ideologically opposed to the NHS as it is and as it should be, back to negotiate and we are clear that this package already represents all that could be achieved short of a change to a Labour government.

The choice now will be to accept or reject this proposal as a package, bearing in mind that the biggest gains are in the lowest paid bands where a pay rise is most needed in our Union, and where everyone will gain financially without having to risk an attempt to organise potentially very difficult industrial action. Action already made hugely difficult legally by the recent tory trade union bill and with what we believe to be a zero chance of achieving anything more. It is not weakness to recommend this proposal, it is realistically what is best for the LAS Branch and for UNISON members across the NHS. We cannot emphasise enough the work that has gone in to getting agreement from employers on the content of this proposal, and we don't believe it necessary that our members need undertake any more hard work themselves than we already do in just keeping the NHS going under this government.

If you have any questions please contact the Senior Sector rep for your area whose details are available on our website WWW.LASUNISON.COM and we will post further updates as they arise again on our website including a planned ambulance sector specific national FAQ's.

LAS UNISON Branch Committee

"We are stronger together"