



A proper pay rise The right banding Shorter working week

That's what UNISON members want and it's what NHS staff deserve. The next pay rise is due on 1 April and NHS staff want to see action from the government.

PUT 
NHS 
PAY
RIGHT


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the public service union

The NHS is in a staffing emergency with over 110,000 vacancies in England, spiralling workloads and a record patient backlog. Our members tell us that meagre pay awards and tinkering around the edges of the pay scale simply won't cut it.

That's why together we're calling on the government to put NHS pay right to keep dedicated staff in their jobs and ensure more patients can be treated more quickly. NHS staff have told UNISON that they need:



A proper pay rise

In our autumn survey, a majority of UNISON members – in every role, at every pay band – said that increasing core pay is the number one priority.

All staff working in the NHS need a proper pay rise to keep up with rising living costs and to provide a decent reward for the challenging work they do. Over a third of our members report that they cannot get through the working day without worrying about finances and this cannot go on.

We need to fix problems up and down the pay scale to kick poverty pay out of the NHS for good; to maintain fairness between staff; and to make sure that when staff progress or get promoted, they notice a real difference in their pay packet.

The right banding

All staff should be entitled to role and pay band reviews to make sure they are getting paid at the right rate for the job. That requires major national investment to ensure that employer job evaluation processes are fair, timely and effective.

Nursing, admin and catering staff along with many others – tell us that they are working above their pay band. Thousands of UNISON healthcare support workers have come together to fight for and win rebanding and back pay because the current creaking system leaves staff undervalued and underpaid.

A shorter working week

UNISON's ambition is for a reduced working week in the NHS with no loss of pay. Better work-life balance would improve wellbeing, reduce burnout and keep staff in their jobs, reducing reliance on overtime and agency staff. While a shorter working week won't be achieved overnight, many staff have already identified changes that could allow work to be completed in fewer hours.

Introduction

UNISON is the largest trade union in the United Kingdom and with around 300,000 members directly employed by the NHS in England we are the largest trade union in the NHS. Tens of thousands more of our members are indirectly affected by NHS pay outcomes.

Our members work in every occupation covered by the NHS pay, terms, and conditions of service handbook. Our largest membership groups include the nursing family, ambulance staff, medical secretaries, occupational therapists, and we have large membership across the diverse range of support and operational staff who make NHS patient services possible. And it is our members who set our policy and priorities on pay.

Over 40,000 NHS staff contributed to setting our priorities for this pay round.

At our annual Health Conference representatives from every NHS employer come together to debate issues, vote on policy, and take part in informal workshops to develop ideas. Our Health Service Group Executive, our lead committee for NHS pay, is made up of health workers directly elected by their colleagues from across the country. That committee works up detailed ideas and proposals for how we implement our policies.

And our individual members themselves take part in our policy consultation and priority-setting exercises. In autumn 2023 we asked members to reflect on the outcome of the 2023 NHS pay round, to share their aspirations for the 2024 pay round, and to prioritise their goals.

Over 40,000 NHS staff in England took part in that very detailed exercise. That's a threefold increase from previous years.

This is all against a backdrop of ever-increasing engagement in our processes. Over 53% of our NHS members voted in the consultation on the 2023 NHS pay offer.

We are seeing the highest ever levels of engagement from NHS staff on issues of pay and reward. Government and employers are missing an opportunity to use proper pay rises to support their wider objectives for recruiting, motivating and retaining the staff our NHS needs now and for the future.

We have been preparing for this pay round since summer 2023 and it is bitterly disappointing that the government has not done the same. Delaying the start of the annual pay review process until December 2023 has made it inevitable that NHS staff will – yet again – be kept waiting past their 1 April pay date with no assurances about when their much-needed pay award will actually get decided.

1 April 2024 – the due date of the next NHS pay rise.

In 2023 UNISON adopted formal policy to seek a move away from the NHS Pay Review Body to a modernised collective bargaining system. By that, we mean a process that integrates determination of annual pay uplifts with maintenance and development of the wider pay and earnings framework.

We are fully engaged with the Department of Health and Social Care review of the pay setting process that resulted from the 2022-24 NHS pay deal. However, NHS staff are disappointed and frustrated that the review has not had any bearing on this pay round which has once again commenced far too late to deliver pay awards when they're due on 1 April.

Staff have become disillusioned with the PRB system because they do not believe it is independent and they see the process as long-winded and unfit for purpose. Unions and employers are frustrated that the growing number of earnings-related and structural issues in Agenda for Change that need fixing through negotiations continue to go unaddressed.

Last year staff got their pay award in June salaries through a process of negotiations. This year they fear a repeat of previous PRB pay rounds where outcomes were not confirmed and implemented until September, subjecting staff to months of uncertainty and worry in the face of rising living costs.

The outcome of negotiations are rarely perfect, but modernised collective bargaining creates significant opportunities for problem solving, expert input, and most importantly genuine involvement and engagement with NHS staff on the day-to-day problems they face.

UNISON believes the government must urgently enable pay rises for 2024/25 to be settled through a negotiated package that combines pay uplifts, structural improvements to the pay framework and delivery of tangible benefits from the non-pay commitments the government made in its deal with unions last year.

Cost of living and the risk to the NHS

The staffing crisis in the NHS will get worse without decisive action to deliver proper pay rises and address the earnings-related issues that are hampering recruitment and retention. NHS vacancies are still running at over 110,000 and there is intolerable pressure on both patients and staff as workforce shortages and the treatment backlog mount.

Since 2010 government policy has suppressed NHS pay resulting in over a decade of real-terms pay cuts. Only the negotiated agreements of 2018 and 2023 come close to meeting in-year inflation.

Even the 2023 pay award, while a significant improvement on the original pay imposition of 2022, was only just enough to settle the largest NHS industrial dispute in a generation.

NHS staff are only too aware that the real value of the 5% offer UNISON members voted to accept is lower than expected because the rate of inflation did not fall as far or as fast as was predicted at the time. Our research reveals less than 10% of NHS staff now say the deal has held up well.

As it stands, the lowest rate of pay is £11.45 an hour, only a penny higher than the statutory minimum wage from April 2024. The lowest paid NHS staff are excluded from salary sacrifice schemes such as buying and selling annual leave, childcare, cycle-to-work schemes, and spreading the cost of on-site car parking. The systemically low rates of pay means only some staff can access those schemes. This is deeply inequitable and restricts the extent to which NHS employers can use total reward to stand out in local labour markets.

Lower paid staff have also faced disproportionate increases to NHS pension contributions, and unless pay is adjusted to account for this it risks the lowest paid staff withdrawing from the scheme.

The non-consolidated element of the 2023 agreement was not perceived as, or used, as a bonus. Almost two-thirds of staff spent the non-consolidated payment on routine household expenses such as housing costs, energy costs, food, and transport. A non-recurrent payment is no longer any help with rising recurrent and essential costs.

And while much of the pain of mortgage and rent increases has been felt already, it is clear that NHS staff are having to plan for more to come, with almost 9 in 10 staff expecting their housing costs to rise again over the coming year.

Almost a third of all respondents say this is causing them to look for a better paying job outside the NHS, while 35% say they will have to take on extra shifts to deal with this.

Almost 9 in 10 expect their housing costs to rise this coming year.

Most worryingly, around 40% of our respondents reported that they could not concentrate through the working day without worrying about finances. This is having a disproportionate impact on both younger NHS staff and lower paid staff, with both of those groups reporting the highest levels of financial stress. As a result, 80% of staff under 30, and over 60% of staff in bands 1-4 report having to take on extra shifts or look for work outside the NHS.

We know many local employers have noticed these issues, and there is well meaning work at employer level to address cost of living pressures. But it is clear that, while potentially helpful to some individuals, that work is not relieving financial strain or improving industrial relations.

While around a quarter (28%) of NHS staff agree it is important employers offer access to salary-secured loans and credit, they feel strongly that they want to see their employers address the underlying issues with pay before resorting to mitigating measures. Almost three-quarters (72%) of NHS staff say it is insulting for their employer to offer these kind of services without publicly backing an NHS pay rise.

It is therefore no surprise that initial soundings from UNISON members show industrial tension remains at a historic high. Almost two-thirds of NHS staff now report being dissatisfied with the pay outcome from 2023; they feel the current level of pay is unsustainable and report being prepared to take industrial action or leave the NHS if pay does not rise.

So while the government has asked the chair of the NHS pay review body to “take into account the historic nature of the 2023/24 pay awards” it must be remembered that the government’s failure to address a cost-of-living crisis of historic proportions triggered the largest NHS industrial dispute in a generation.

Anything less than a proper pay rise which makes a significant and real improvement to the pay of all NHS staff is likely to re-ignite industrial unrest and worsen an already critical staffing situation.

UNISON pay priorities for 2024/25

i A proper pay rise package which:

- Makes a significant and real improvement to the pay of all NHS staff

Increasing core NHS pay was the number one priority for all staff groups and bands.

- Ensures that lower paid staff are not excluded from the wider NHS reward package, such as the pension scheme and employer salary sacrifice rewards, by paying more than the real living wage
- Maintains fairness and equity within the structure
- Addresses compression issues, particularly in Bands 2-4. For example, the promotion incentive from Band 2 to Band 3 is currently only 1.9%, which needs to be more than doubled in order to remove disincentives. And the temporary move to a spot rate in Band 2 in 2023 needs to be revisited in order to restore pay progression
- Ensures experience and promotion are well rewarded looking at particular pressure points – for example progression within Band 5 and Band 6, and promotion incentives including Band 7 to 8a

Registered nurses and midwives were particularly likely to prioritise making promotion mean a real pay rise.

- Ensures all salaries within the NHS are competitive among comparable public sector jobs. For example, the starting salary for qualified teachers is now £30,000 while the graduate starting salary in the NHS is £28,407

ii Right banding through commitments to:

- Entitle all staff to an annual role and pay band review

Making sure staff were in the right pay band was by far the most common priority after increasing total pay. It was a number 1 priority for almost 20% of staff and a top 2 priority for 40%. Nursing and healthcare assistants were most likely to assert this as a top priority, with over half prioritising fair banding – no doubt partly a result of UNISON's fair banding campaigns for HCAs.

- Earmark national investment to modernise job evaluation infrastructure and increase JE capacity in every NHS trust
- Restore full partnership approach to JE through formal employer and staff side partnership working, recognising the shared commitment to ensuring equal pay
- Resource the outcomes of the NHS Staff Council nursing and midwifery job profile review and the 2022-24 pay deal commitment to improve nursing career progression
- Ensure there is an effective system to run and resource profile reviews for all groups when needed to reflect increases in skills, knowledge, and role complexity requirements

iii Commitment to talks on shorter working week based on no loss of pay with the aim of:

- Reducing harm to staff and waste to the NHS caused by high levels of stress and burnout through improving well-being and retention

Reducing the working week was the third highest reported priority after increasing total pay and ensuring staff were on the right band. It was a top three priority for almost 40% of staff.

Almost half of all NHS staff report they feel worn out at the end of their working day/shift, and 45% of NHS staff felt unwell because of work-related stress over the last 12 months. That figure is particularly high among groups of staff disproportionately likely to work shifts, with 64% of paramedics and 63% of midwives reporting work-related stress.

- Working with different occupations and settings, including clinicians and shift workers, to review existing evidence and develop systems that can be sustained over time rather than simply relying on increased overtime and agency work
- Returning the benefits from improvements to productivity and efficiency directly to workers

Over 35% of staff say that they know of straightforward clinical or administrative efficiencies that could help enable a reduced working week.

- Marking out the NHS as a long-term employer of choice

iv Wider pay issues – UNISON policy for improvements in other areas

UNISON also seeks improvements to:

- The length of time served before progression in some pay bands, particularly in Bands 8 and 9. The design of these bands was based on a maximum of four years of service but the reforms started in 2018 have never been completed

Reducing the length of time to get to the top of the band was the second highest priority after increasing total pay for respondents in bands 8-9.

- The structure and functioning of the High Cost Area Supplement, including effective routes for employers and trade unions to access funding for the application of HCAS in their area

- The application of the overtime payment provisions in the NHS terms and conditions of service, to reduce misuse of bank and other temporary staffing contracts

65% of staff work overtime, with half of this unpaid, due to deadlines and urgent patient care. Only 20% of staff reported working at NHS overtime rates instead of doing extra work unpaid or through bank contracts.

- The value and use of Recruitment and Retention Premia to address short-term staffing shortages, in particular to support staffing levels while longer-term role and reward development takes place

Ambulance staff were most likely to prioritise increasing the value and use of HCAS and RRP.

- The application of NHS pay rates to all apprenticeships

Healthcare assistants and clinical support workers were most likely to prioritise improving apprenticeship pay.

- Financial support with the costs of working from home
- Mechanisms to deliver pay and conditions parity for the indirect workforce who are vital to NHS service delivery

Why improving NHS pay needs an integrated approach

The changes UNISON negotiated in 2018 raised starting salaries in every pay band, improved the value of reward for in-band progression, and significantly reduced the length of time it took to reach the top of the band.

Prior to that, new staff in a higher band could spend a few years earning less than staff in the band below, before progressing up the band. And the rewards for progression within a pay band were very small, as little as £555 in Band 5, and less than £300 for staff in Band 2.

But that reform deal did not fix everything, and almost six years have passed with very little progress on the issues flagged as outstanding at the conclusion of the 2018 negotiations.

In-band rewards for progression could be better aligned with career milestones that are major risk points for staff retention, such as the completion of the second year of service in Band 5.

The rate for Band 3 is just £433 a year more than Band 2. Combined with a reduction in unsocial hours payments, this is a massive disincentive for staff looking to take on more responsibility.

Promotion at all levels should be equitably incentivised with clear and meaningful reward. At 8a, staff often lose all eligibility for unsocial hours payments and overtime. But promotion to 8a roles is worth just £896 a year.

And the length of service needed for staff to reach the top of the band should be no longer than the time needed to be competent, confident and trusted in the role.

These problems are not just technical quirks, they cause real barriers to recruitment, retention, and improvements to patient services. In UNISON, we call these the “unfinished business” from the last major pay negotiations.

They have been left unaddressed to the frustration of staff, unions and employers because pay has been reviewed in subsequent years through the Pay Review Body which doesn't have the right processes or expertise to thrash out solutions to structural problems.

Enabling pay to be looked at in the round through regular NHS Staff Council negotiations – underpinned by a long-term approach to pay as a strategic lever in workforce planning – is crucial to improving working life for staff in the NHS. Better outcomes for patients and the health of our economy depend on it.

NHS basic pay rates effective April 2023 – England

	Entry	→	Full rate
Band 2	£22,383	2 years	£22,383
Band 3	£22,816	2 years	£24,336

Band 2 Entry The lowest rate of pay is £11.45 an hour, only a penny higher than the statutory minimum wage from April 2024. NHS staff are excluded from salary sacrifice schemes, and often cannot afford pension contributions.

Band 2 Full There is currently no reward for progression at all in Band 2

Band 3 Entry The rate for Band 3 is just £433 a year more than Band 2. Combined with a reduction in unsocial hours payments, this is a massive disincentive for staff looking to take on more responsibility.

	Entry	→	Full rate
Band 4	£25,147	3 years	£27,596

	Entry	→	Intermediate	→	Full rate
Band 5	£28,407	2 years	£30,639	2 years	£34,581

Band 5 intermediate We are at greatest risk of losing new clinical staff in the first two years in their role. The progression from entry in intermediate in Band 5 is just £1.14 an hour. The in-band progression for early-career staff should come with meaningful reward.

	Entry	→	Intermediate	→	Full rate
Band 6	£35,392	2 years	£37,350	3 years	£42,618
Band 7	£43,742	2 years	£45,996	3 years	£50,056

Band 6 Entry Promotion to Band 6 is worth just £0.57 an hour for experienced staff.

	Entry	→	Full rate
Band 8a	£50,952	5 years	£57,349
Band 8b	£58,972	5 years	£68,525
Band 8c	£70,417	5 years	£81,138
Band 8d	£83,571	5 years	£96,376
Band 9	£99,891	5 years	£114,949

Band 8a Entry At 8a, staff often lose all eligibility for unsocial hours payments and overtime. But promotion to 8a roles is worth just £896 a year.

Bands 8a – 9 It should only take 4 years to reach the top of the Band for staff in Bands 8 and 9.

Years of percentage increases have stretched the pay spine. The gap between Band 5 and Band 9 has increased by almost £10,000 since the 2018 pay agreement.

