NHS staff say:

UNISON evidence
NHS Pay Review Body 2018/19
December 2017
“...I can’t manage on my salary. I struggle every month. Every one of my bills has increased but the pay has not.”
Ancillary and maintenance, Band 1, West Midlands

“People who work in the NHS don’t do it for the pay, but because patient care matters. But...”
Admin and clerical, Band 4, Greater London

“Our hospital could not run without our tireless work...”
Ancillary and maintenance, Band 1, North West England

“I love being a nurse but I feel undervalued and quite frankly exhausted.”
Nursing and midwifery, Band 5, Northern Ireland
NHS staff say pay up now!

For the 2018 pay round UNISON calls for a pay settlement which will:

1. enable NHS staff to keep up with costs by matching RPI inflation
2. start to restore pay lost during the years of austerity, giving a consolidated sum of £800 to all
3. invest in improving the NHS pay structure in order to end low pay, improve starting salaries, and make it quicker for staff to get to the top of bands
4. ensure, through a combination of the above, that all NHS staff receive a pay increase of at least £1 an hour, moving toward a pay structure with £10 an hour as the lowest wage in the NHS.

“...but I have seen so many staff leave for other jobs outside of the NHS it is scary.”
Manager, Band 7, Greater London

“A pay rise might actually mean living, rather than existing.”
Allied health support, Band 3, South West England

“So please – listen before it’s too late.”
Ambulance staff, Band 6, North West England
This document has been prepared as part of UNISON’s evidence to the NHS PRB 2018 pay round. We welcome the opportunity to give evidence on behalf of over 500,000 UNISON and BAOT members in the health service across the UK.

UNISON contributed a great deal to the development of the claim submitted by the joint NHS trade unions to this Pay Review Body round. We fully support that evidence and support the joint staff-side proposals as the first steps towards meeting UNISON’s aspirations for fair pay in the NHS.

This submission supplements that evidence, highlighting UNISON member views on many of the themes highlighted in the joint staff-side evidence. This document also outlines specific UNISON policy on pay and reward.

This document is intended to be UK-wide however at time of writing a remit letter had only been published for NHS staff in England.

December 2017

It’s time to Pay Up Now!

A fair pay award is desperately overdue in the NHS and 2018 is the year to make amends.

For the first time in several years the NHS Pay Review Body has not been hamstrung in advance by the government’s policy of public sector pay restraint. That provides an opportunity to examine the pay structure and fix some of the structural problems that have been caused by pay restraint.

“The 1% pay cap was a temporary measure not a forever solution. All NHS wages are now eroded and the NHS is no longer an employer of choice. The level of candidates is much lower than before, therefore nothing ever improves.”

Admin and clerical, Band 2, East Midlands

But NHS staff will judge the Pay Review Body process on whether their pay increases in line with their cost of living. Because kind words and pats on the back do not put food on the table, pay the bills, or buy your kids new shoes.

The NHS workforce is highly skilled and dedicated to patient care. It is therefore heart breaking to relay the kinds of hardship and difficulty that staff find themselves in.

The combination of frozen pay and rising living costs have eaten away at any kind of financial safety net many staff once had.

So, it is no surprise that when we surveyed NHS staff for our annual pay survey 98% of respondents supported UNISON’s pay claim outlined in this paper.

From the stories NHS staff tell us, whether through our pay survey or our other union structures, it is clear that a tipping point has been reached.

The NHS urgently needs a proper pay increase.
“I do not want to spend in excess, or eat out. I just want to provide for my family. I am finding at the moment that it is cheaper to buy cheap processed food, because fresh fruit and veg takes up too much of my weekly budget.

My 8 year old has never been on holiday due to my financial constraints. I would really like for that to be a possibility in the future but I just have no spare cash to even consider it.

Being Band 1, I feel we are overlooked at every opportunity despite the fact our hospital could not run without our tireless work.”

Ancillary and maintenance, Band 1, North West England

UNISON recommendations on pay

“A proper pay rise would mean not living hand to mouth so much every month. I could afford to buy my son shoes, which he so desperately needs, and clothes, which he is growing out of rapidly. I have no social life as I simply cannot afford to socialise, so I feel isolated which has led to some mild depression. I haven’t had a holiday, either in the UK or abroad, in 12 years so I could possibly take my son on holiday which would be a dream come true for him. I wouldn’t have to restrict my food shopping to £100 a month which, for 2 adults a child and a dog, is a meagre amount to try and live on (especially as food prices are continually rising).”

A pay rise might actually mean living, rather than existing.”

Allied health support, Band 3, South West England

UNISON supports the joint trade union call for a fully funded UK-wide pay settlement which will:

1. enable NHS staff to keep up with costs by matching RPI inflation
2. start to restore pay lost during the years of austerity, giving a consolidated sum of £800 to all
3. invest in improving the NHS pay structure, making it better able to support workforce productivity improvements.

The joint NHS trade unions wrote to the Chancellor of the Exchequer in September 2017 to outline this position.

UNISON strongly believes that where the combination of realignment and annual pay award falls short of a £1 an hour increase that the shortfall should be made up. In addition, UNISON wants to see a clear commitment for the value of NHS pay to be increased so a minimum pay rate of £10 an hour can be reached.

UNISON believes a fully funded restructure of the lowest bands in the pay framework represents the best way of delivering those aims in a way that protects the integrity of the pay structure and avoids compression issues. UNISON has very clear priorities for reforming the pay structure including ending low pay and making sure that there is a genuine Living Wage at the bottom of a reformed pay structure. We also want to
improve starting salaries, remove overlaps between pay bands and make it quicker for staff to get to the top of bands.

In previous rounds UNISON has made clear our opposition to targeted pay awards. The need for serious investment and maintenance to the pay framework necessitates a more nuanced position. Through a combination of pay award and investment for restructure, it is both possible and desirable that different pay points could change by different percentage amounts, in order to reach a pay framework that can be maintained through the usual NHS PRB process in the future.

However, as a union that represents staff in every role and occupation within the remit of the NHS PRB, UNISON is very clear that occupation specific targeting of pay awards is not wise or palatable. Geographic targeting of awards, beyond existing mechanisms in NHS terms and conditions of service, would also be unacceptable. Recommending awards targeted on either occupation or geographic basis would be deeply damaging to morale and industrial relations in the service.

“I miss valuable family time with my 2 year old son because I have to work all the hours offered in order to run our home and provide for him. Once my bills and childcare are paid for I am left with £90 per week for food and petrol (and trips out or luxuries). I live 26 miles from my local hospital so £30/40 of that weekly budget goes on petrol.

I live to work. Whatever happened to working to live? I don’t have a life besides work. I can’t afford to. I’m still repaying debts that I borrowed to fund my student years as my bursary didn’t cover the essentials.

I became a nurse because I care. I continue to do what I do because I care. But who’s looking after us?”

Nursing and midwifery, Band 5, Yorkshire and Humberside
UNISON NHS Pay Survey 2017

UNISON conducted a survey of members working in health in September 2017. Over 17,000 members responded. The only results used in this report are from respondents who positively identified as working for an NHS employer on NHS terms and conditions (commonly known as the Agenda for Change contract).

Pay restraint is hitting NHS staff hard
We asked NHS staff a number of questions about pay and the impact on their home lives. 79% of respondents say they feel worse off than 12 months ago, an increase from 63% of staff reporting that last year.

“I can’t manage on my salary. I struggle every month, every one of my bills has increased but the pay has not! It’s a nightmare most months.”
Ancillary and maintenance, Band 1, West Midlands

Almost all NHS staff report rising cost of utilities, transport and food as driving up living costs. A sizeable minority report increases in housing and childcare costs, although for many staff the costs of those have stabilised and for a very small number the relative cost has reduced.
“As a part-time working mum [the NHS PRB] just have no idea. It’s not holidays or meals out I seek for my family, but just enough to pay car insurance/tax/run a car to go to work - to have enough money for school uniforms - and have enough money so you can make a dinner each day and school lunch. I have to budget for jam sandwiches because I can’t afford ham and I have to rely on a food bank to make dinners.”

Admin and clerical, Band 4, Northern Ireland

In response to those increased costs of living NHS staff are having to make changes to their lifestyle. Two-thirds of staff have cut back on family holidays and three-quarters have cut back on visits to restaurants and meals out. Perhaps most alarming, nearly 80% of NHS staff say they have cut back on saving in the last year.

“We’ve not had a family holiday for nearly eight years. However, the most important issue for us would be to meet our monthly bills and to perhaps put money away for a rainy day or our retirement.”

Ancillary and maintenance, Band 4, South West England

Some NHS staff are also taking more dramatic steps to address shortfalls in their household income.

- 37% have had to ask family or friends for financial support
- 10% have used a debt advice service
- 10% have pawned passions
- 7% have used a payday loan company
- 1% have used a food bank

“I live on a shoestring from month to month. I use credit cards for diesel at the end of the month so I can get to work. I am a specialist nurse and work for a regional centre. I take part in some really exciting national health care innovations. I do not want to leave my job I enjoy it and feel I contribute a great deal to my patient population. A pay increase would mean I could save some money, or pay all bills with no worry. I think I am worth a cost of living pay increase.”

Nursing and midwifery, Band 7, West Midlands

About half of all staff reported they had not had to take any such actions. However, a majority of staff continue to report that they rely on the non-basic pay elements of NHS terms and conditions, with 58% of staff reporting they rely on unsocial hours payments to sustain their standard of living.
Do you rely on any of the following to sustain your standard of living?

- Unsocial hours/On-call
- Special duty/shift premia
- Overtime

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“Due to staff shortages I have been working extremely hard for the last 8 weeks to the point I had to cut down on overtime as I was physically unable to do anymore. I work through my 30 minute lunch break every day to enable me to finish my visits. I never have any money, I’m struggling to pay private rent and cover the bills on my own. I have full competencies for band 3 and so my duties carry a great deal of responsibility to patients, but I get paid less than my son who works in a call centre. I do wonder what the point is, and then I think of my patients who are the reason I do the job I do.”

Nursing and midwifery, Band 3, Eastern England
Many NHS staff are having to take on extra work to make ends meet

We also asked NHS staff about the relationship between pay and the work that they do.

Our survey found that 21% of staff do additional paid work on top of their day job. Of those, 56% of those do bank work but a staggering 36% have a second job outside the NHS.

73% of those doing extra work say they do so because their basic salary does not cover basic living costs.

“A pay rise will have a great impact in my working limit. As of now I had to push myself to do extra shift just to sustain my living cost. Everything has gone up especially the food cost and most of the time I tend to buy cheap unhealthy ones because I can’t afford to buy healthy choices. Having said that, my health suffers too. Too much workload at work means potentially harming myself but I need to work extra because if not I will not be able to pay my dues.”

Nursing and midwifery, Band 5, Greater London
Morale, retention and recruitment

“Most people who work in the NHS don’t do it necessarily for the pay, but because patient care matters. But when staff financial needs are not met realistically, this affects morale and this then gets spilled into quality of patient care.”

Admin and clerical, Band 4, Greater London

As the rising cost of living cuts into the relative value of NHS pay, morale and motivation is falling across the NHS.

Nearly six in 10 staff say morale is low or very low, with 70% of staff saying morale has fallen over the last year. Unsurprisingly, nearly nine out of 10 of staff say morale is having an impact on their productivity in their workplace.

This is having a serious effect on retention.

Have you considered leaving your current position in the NHS in the last year?

88% of staff say they have considered leaving the NHS in the last year and the vast majority point to pay as a key issue.

“If you want the NHS to continue you need to pay staff a realistic wage. Vacancies aren’t being filled - people don’t apply for the jobs because the money is so poor.”

Nursing and midwifery, band 6, South East England
When asked what factors made them consider leaving, staff cited:

- feeling undervalued due to low levels of pay (78%)
- stress at work (72%)
- increased workload (72%).

“"We should receive a fair day’s pay for the effort and commitment we show. Constantly being told to ‘do more with less’ is not sustainable. I have seen so many committed staff leave for other jobs outside of the NHS it is scary. We are left with no staff or those that have insufficient skills to do the job.”

Manager, Band 7, Greater London

Although individual workplace environments have an effect on morale and retention, it is clear that national pay is a critical factor. Under half of staff considering leaving say they want to take up a post outside the NHS, with just 28% considering employment in another NHS organisation.

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<td>Take up a post in another organisation within the NHS</td>
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“I have the responsibility for children’s lives. I take care of and provide opportunities for these children and support their families often at times of crisis. I have to work to a high set of standards that are closely monitored. If I mess up then people’s lives will be affected and I will face the guilt of that alongside any disciplinary action and yet I am paid less than [what I could earn elsewhere]. I think I chose the wrong profession. I am sad that caring for people and making a difference to their lives is valued so little.”

AHP, Band 5, East Midlands

It’s time to fund a proper NHS pay rise

“Demands in my role have gradually increased, while my pay in real terms has decreased year on year. I now struggle to manage household bills and as a consequence my family are starting to suffer. Whilst a pay rise is important it should not be at the cost of patients and services. Additional money must be found to support a reasonable pay award. We deserve a fair pay deal.”

Nursing and midwifery, Band 5, West Midlands

Nearly all (98%) of staff surveyed support UNISON’s pay claim for a pay rise in line with inflation, as well as a sum of money to start to make up earnings lost due to pay restraint.

When asked what a proper pay rise would mean to them, staff say:

- it would boost my morale (78%)
- it would ease my financial worries (71%)
- I could save some money for a rainy day (69%)
- I could afford to stay in my current job (62%).

It is clear that a tipping point has been reached.

This is no longer just a story of staff earning less and less every year. This is now a story of staff struggling to afford the basics, with staff across a wide variety of roles seriously considering whether they can afford a future in the NHS.

“A fair pay rise would mean so much to me & my family. I worked hard at university to become a nurse, I thought I was ‘bettering’ myself. However, I have friends that work in Tesco that earn more than me in a month. I love being a nurse, but we do not get recognised for the level of responsibility and extremely hard work we do. I feel undervalued and quite frankly exhausted due to all the extra hours.”

Nursing and midwifery, Band 5, Northern Ireland
What a pay rise would mean for NHS staff

UNISON received thousands of open-text responses from NHS staff when we asked them what a fair pay rise would mean for them and their families. Here, just a few are captured but there are countless more examples.

“Taking home a pay rise that reflects inflation would transform my life, both at work and out of work. I've only just, after 12 years, succeeded in moving up a pay band and so was stuck at the top of my pay band for years - with a four year pay freeze, then a non-consolidated pay rise, then a 1% rise (below inflation). It has impacted my sense of dignity and thus significantly reduced my morale and in turn resulted in distrust of the government to do the right thing by their workforce and the public.

I've become poorer than when I first qualified - with the significant fuel costs rising and other living costs increasing. It's embarrassing that my husband, who never even did A-levels and had no university debt, now has more income than me. My job is pressed, scrutinised, I have to demonstrate continued professional development, we're year-on-year being asked to do more with less and it's getting to the point of insult, abuse of workforce and morale is so low.

A proper pay rise would mean being able to afford to move to a proper family home (not a box) and be able to save for the future. I've had to borrow money every time we needed urgent house repairs or car replacing. We're one pay cheque away from losing our house. A pay rise would mean affording a holiday and saving for my children's future.

Without a pay rise, it is getting to the point where I'm considering going private.”

AHP, Band 6, South West England

“I have to ask my parents for hand-outs consistently, because my pay nowhere near stretches far enough. I have already got myself in financial difficulties with pay day loan companies and by using credit cards to try and just manage through the month.

A proper pay rise would mean I wouldn't have to do overtime as much and would be able to take my son to school more and also have time off with him. At the minute I feel like I don't see him much and I miss out on things with school because I have to work so much being a single mum”

Ancillary and maintenance, Band 1, Northern England
“At the moment the majority of people in the NHS are there because they are passionate about the work they do, not because of the money. But those passionate, highly skilled people are being forced out by financial pressures, which in turn increases the pressure on the staff left behind. This leads to rapidly increasing pressure on staff, so even more skilled staff leave the NHS. Which eventually leads to mistakes being made and patient care being compromised. By investing a bit back into the NHS we would save money on bank and agency staff as fewer skilled staff would leave or be off sick. And targets would finally be achievable.”

Nursing and midwifery, Band 6, West Midlands

“A proper pay rise] would mean not ever having to choose between feeding my son or me. It would mean treating my son to the occasional cinema or meal. It would mean not having to feel embarrassed about lying to others about having already had lunch at work because you can’t afford it. It would mean having a social life where you can at least once a month go out for a meal with your family and friends. It would mean not having to spend at least a third of a month on cupboard food as you’ve already used your quota for fresh and healthier food. It would very simply mean, having a little more than just the basics.”

Nursing and midwifery, Band 6, Greater London

“A pay rise] would mean that I could afford school trips for my daughter and other extra curriculum and sports activities. Hopefully the constant anxiety around trying to budget/pay bills would become less.”

Nursing and midwifery, Band 6, Cymru/Wales

“If the PRB award a proper pay rise] I would not have to rely on family and friends to help out. I would not have to send my daughter to my mother’s/mother-in-law’s at the weekends to make sure she has a proper hot meal and a bath or shower. Without them I think we would really be at a sticky end. I have gone without to feed and clothe my daughter. We have not been on a holiday for years and my daughter is having to forfeit a school residential week in March as I do not have £250 spare to fund her to go. So really it is not just myself that is affected [the NHS PRB is] affecting future generations who are being brought up in poverty. You work for all year to try to provide for your family and really we would be better off on benefits.”

Admin and clerical, Band 4, Scotland
“I am a nurse in the community. The financial reward for the level of responsibility and care we provide has always been poor. Lack of pay in line with inflation has led to a situation where 40,000 nursing staff jobs are unfilled leading to further pressure and unrelenting stress on existing staff. When an independent pay review body is not respected this leads to a feeling of exasperation and demoralisation as there is clear inequity and powerlessness. A proper pay rise would start to address this.”

Nursing and midwifery, Band 5, North West England

We work extremely hard to meet the public’s expectations. We don’t really make a fuss about our pay but the time has come that we have no choice.

Band 2, Ancillary and maintenance, South East England