

Initial response to the separate nursing pay spine proposal for England

The divisive prospect of an exclusive, separate pay spine for NHS nursing staff in England is on the horizon. Secretary of State for Health, Conservative MP Steve Barclay, has indicated that Government will consider this controversial proposal in response to requests made by the Royal College of Nursing during recent pay talks in England.

It is not yet clear how Government will consider the pay spine proposal but there is a commitment that trade unions and employers will be asked for input. We can anticipate a formal consultation to be released by the Department of Health and Social Care over the coming months.

Once the Government has set out the scope for consideration of the pay spine, we will engage nurse and other members to shape our detailed response. However, we're already concerned at the divisions this will stoke, the implications of the proposal, and the distraction of efforts away from more practical solutions to getting nurses paid properly for the work they do.

Issues arising from the proposal

Put simply, there are two broad problems of principle with the nurse-only pay spine proposal. The first is that it may do nothing to improve the overall proportion of spending on nurse pay - or indeed the outcome for individual nurses - and the second is that removing one, large, occupational group would effectively collapse the wider system for all.

Agenda for Change is the NHS partnership framework which determines staff gradings, pay, and terms and conditions for all in the health service. This framework was established with the support of UK health trade unions to ensure consistency and equal pay across the health service. Following its introduction, all non-medical staff are on one harmonised pay spine which covers a salary span of just over twenty thousand at the bottom to over a hundred and ten thousand at the top.

By taking nurses out of the harmonised spine, the proposal could return us to the antiquated system known as 'Whitley' councils when occupations had separate pay arrangements and employers and trade unions were caught in lengthy equal pay cases when pay rates differed for jobs with similar features.

If the Government were to move nurses out of the harmonised spine, how could it then resist calls from other occupational groups to do likewise? And what would be the implications for UK wide structures? There is no suggestion of separate spines in

Scotland, Wales or Northern Ireland, so this could leave nurses in England in a vulnerable position.

Additionally, we anticipate the move would present significant complications in determining the pay and conditions for NHS jobs which are open to applicants from nurses, but also from other professional disciplines.

Actively tackling recognition and reward for nurses

There is no doubting the current problems with nurse pay and banding. The whole system has been underfunded and we are now witnessing the lasting impact of 'down-banding' that started after 2010. While these issues are not exclusive to nursing, the size and strategic importance of nurse roles in the NHS makes this a priority.

As part of this work, UNISON is feeding in to the national review of nursing and midwifery job profiles so these better reflect current working practices and roles. Survey work of thousands of UNISON nurses and midwives has demonstrated that their work has grown more complex; and that they now take a much greater role in supervising and supporting others.

Job descriptions across the NHS have not kept pace with these changes. We need urgent investment of effort, capacity and resource to support nurses to get paid properly for the work they do (<https://www.unison.org.uk/news/press-release/2023/04/347927/>).

UNISON has already successfully supported tens of thousands of NHS staff around the UK to have their job descriptions updated and to be re-banded; ensuring their full job roles are properly recognised and rewarded. This has meant hundreds of millions of pounds of back pay being paid out to deserving NHS staff. The union is now planning a significant expansion of this campaign to ensure all NHS professional groups are appropriately rewarded for their practice.

Similarly, there is more to be done to make sure that additional hours are paid and paid properly; increase the value and application of the various pay premia that have fallen out of use, and support promotion and career development.

Voices across the health service are calling for a renewed focus on improving NHS pay, conditions and job evaluation.

UNISON is clear that the divisive possibility of separating NHS nurses from their colleagues and teams is not the way to tackle the challenge.

UNISON National Health Team. 28th April 2023.

Voices opposing the proposal

- *'The introduction of a separate pay spine would cause many serious problems for the NHS from an equal pay perspective. The damage it would do to morale and the ability of the NHS team to deliver the best patient care would be devastating.'* **Wilma Brown. RN. NHS Fife Employee Director. Chair; UNISON Health Service Group Executive.**
- *'The founding aspirations of Agenda for Change mustn't get lost in any new proposals. Health care is delivered by teams... A policy of divide and rule would be disastrous for the NHS.'* **Health workforce policy experts Anita Charlesworth and Jim Buchan (Health Foundation – NHS Pay – New Seeds of Division – March 2023 - <https://www.health.org.uk/news-and-comment/blogs/nhs-pay-new-seeds-of-division>)**
- *'Separating nurses from the rest of the NHS team presents a serious risk to aspirations for fair and competitive pay. This proposal could set the nursing profession in the UK back by a generation. Instead, we should be showing leadership and strength through collective action and partnership working to support nurses, strengthen agenda for change and get our colleagues paid appropriately for their experience and work.'* **Stuart Tuckwood RN, MsC. PDTN. UNISON National Officer for Nursing.**
- *'The real problem for nurses is more than a decade of pay cuts, job descriptions not being updated, and not enough investment in local job evaluation and banding processes.'* **Gamu Nyasoro. RN. Clinical Skills and Simulation Lead.**
- *'None of the problems facing nursing will be solved by undermining collective bargaining and turning the NHS workforce against itself'.* **Trudie Martin. Assistant Practitioner. UNISON nursing and midwifery occupational group committee.**