

18<sup>th</sup> July 2018

Rt Hon Matt Hancock MP Secretary of State for Health and Social Care Department of Health and Social Care Richmond House 79 Whitehall London SW1A 2NS

Dear Secretary of State

## GMB REJECTS NHS PAY DEAL

Firstly, welcome to your new role.

As you will be aware, the Pay Deal for NHS England and Ambulance Service workers was accepted recently by all trade unions, except the GMB. We are writing to you to explain why GMB members voted to reject the *Framework Agreement on the reform of the Agenda for Change* and why we are now conducting a consultative ballot of our members as to what our next steps in this campaign for fair pay and secure terms will be.

GMB held a pay conference on 20<sup>th</sup> March 2018 and after a full and frank discussion, the Conference agreed to recommend to GMB Union members that they vote to reject the 2018 Agreement. The Conference consisted of GMB representatives from every part of England, and included Nurses and Senior Nurses, Health Care Assistants, Administrators, Laboratory staff, Catering, Domestic and Porter staff, as well as Ambulance Technicians and Paramedics.

87% of GMB members voted overwhelmingly to reject the pay offer and made it very clear why they are opposed to the deal. A summary of the main reasons can be found below:

1. The pay increase for those on the top points of their pay bands is only 6.5% over three years, while inflation is forecast to be 9.3% or higher. The pay increase is even lower for those on the top pay points in higher grades. All staff in lower pay bands are set to see pay increases in years two and three lower than forecast inflation. Those in lower pay bands who claim state benefits will also see no benefit as for every pound gained from the award a similar amount will be lost from their benefits.



After years of pay restraint in the NHS, staff will still see another fall in their standard of living. The staff affected are the experienced staff who held the NHS together during the last winter crisis and they account for over 50% of NHS staff. Our members feel it is unfair that the pay of experienced staff is effectively being held back to allow NHS Trusts to recruit new staff. The danger for the NHS is that experienced staff will feel undermined and undervalued and the approach to pay for these staff will do little to retain them in post.

- 2. NHS staff are funding their own pay award through cuts to unsocial hours' payments and sick pay. Plans to end the payment of unsocial hours during a period of sick leave is nothing more than a fine for being off sick.
- 3. Ambulance service staff are impacted even more greatly by the cuts to unsocial hours' payments. All new starters will only be able to access the new lesser entitlements, as well as existing loyal staff who change job roles.
- 4. The ending of automatic pay progression increments enables managers to dictate whether or not a member of staff should be moved to the next pay point. Performance related pay has been shown to be demotivating and can lead to discrimination against staff with protected characteristics. NHS Trusts have significant deficits and the proposed increases in NHS funding are unlikely to reduce these deficits, which may lead to the withholding of pay progression as a way of reducing expenditure.
- 5. Improvements to the Agenda for Change terms and conditions of employment will not apply to NHS contractors. There are already 41 wholly owned subsidiaries, with more NHS Trusts considering them. These employ staff on inferior terms of employment and deny access to the NHS Pensions Scheme, resulting in a further divide of the NHS workforce.

Yours sincerely,

Rachel Harrison

GMB National Officer (NHS)

R. Han

Rachel.harrison@gmb.org.uk

Kevin Brandstatter

GMB National Officer (Ambulance)

kevin.brandstatter@gmb.org.uk