

- If you are on pay point 1 of Band 5 in 2013/14, you would (subject to satisfactory performance) have moved up to pay point 2 (from £21,388 to £22,016) on your anniversary date during 2014/15 and then up to pay point 3 (£22,903) during 2015-16. Your pay would have risen by £1,515 due to the increment you receive for your skills and competence. The government's decision not to award a 1% consolidated pay rise during the next two years, means your earnings will be £460 lower than they would have been.
- If the trade unions agreed to a freeze on increments in return for a 1% increase your earnings would be £1055 lower than they would have been.
- The non-consolidation of the 1% will mean that for some their final salary for pensions purposes will be lower than it otherwise would have been.
- There is also a long-term impact on pensions if the trend of increases below inflation or non-consolidated increases continues. We estimate that someone aged 55 will see a pension that could be between 20% and 30% lower if the trend continues until they retire.
- The impact for members therefore is not just an immediate decrease in living standards, but also detrimental to pensions in the long-term.

#### WHAT IS THE SOR GOING TO DO ABOUT IT?

Two emergency motions were passed at the Annual Delegates' Conference (ADC) which called on Council to:

- Work with health trade unions and the TUC to lobby and campaign for this decision to be reversed and the PRB's recommendations to be fully implemented.
- Campaign for the Pay Review Body's recommendation for 2014 to be implemented fully.
- Resist the imposition of a two or three year settlement.
- Publicise the damage this has on the provision of safe, caring, patient centered and cost-effective healthcare.
- Consult members on the government statement and formulate a response which could include a programme of industrial action.
- Demand that future pay increases at least match the rate of inflation.
- To lobby and campaign for a legislative change so that in future the government of the day is bound by PRB recommendations.

UK Council next meets on Wednesday 14 May 2014 and will consider the survey results.

NHS Trades Unions meet on 15 May to review any developments to-date and to hear reports from the individual unions. A formal communication to members will be made following that meeting.

Members are urged to complete the survey at [www.surveymonkey.com/s/HKJGPXZ](http://www.surveymonkey.com/s/HKJGPXZ)

The survey closes at 17:00 on Monday 12 May.

**April 2014**



The Society & College of  
Radiographers

# NHS PAY AWARD FOR 2014-2015 and 2015-2016

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#### INTRODUCTION AND BACKGROUND

The NHS Pay Review Body (NHSPRB) is independent. Its role is to make recommendations to the Prime Minister and to the appropriate Ministers in Scotland, Wales and Northern Ireland on the remuneration of all staff paid under Agenda for Change and employed in the National Health Service (NHS).

In its 28th Report, the NHSPRB made the following two recommendations on pay:

1. A 1% increase to all Agenda for Change pay points from 1 April 2014.
2. A 1% increase to the high Cost Area Supplement minima and maxima from 1 April 2014.

They commented: "Our conclusion was that government statements have led staff to expect a pay settlement this year of around 1%. If these expectations were to be dashed, patients would be impacted through declining staff morale and engagement."

#### THE GOVERNMENT'S RESPONSE

On 13 March 2014, the Secretary of State for Health (Mr Jeremy Hunt) made the following statement to Parliament:

"I am responding on behalf of my Rt Hon Friend the Prime Minister to the 28th Report of the NHS Pay Review Body (NHSPRB) and to the 42nd Report of the Review Body on Doctors' and Dentists' Remuneration (DDRB).

#### NHS PAY REVIEW BODY

We thank the NHS Pay Review Body for its 28th report and note its recommendations and observations. We are clear that in the wake of the public inquiry into Mid Staffordshire NHS Foundation Trust, our first priority must be to ensure that the NHS can afford to employ the

right number of frontline staff needed to ensure the safe, effective and compassionate care that patients have a right to expect.

“The NHSPRB’s recommendations for a 1% consolidated rise for all staff, on top of automatic increments, are unaffordable and would risk the quality of patient care. Without a pay rise, incremental pay increases already commit nearly £1 billion every year for all NHS employees and add 2% each year to the NHS pay bill for Agenda for Change staff. The PRB proposals suggest a pay rise that would risk reductions in frontline staff that could lead to unsafe patient care. It is not possible to maintain appropriate numbers of frontline staff, give a general pay rise of 1% and pay for incremental progression.

“The Government is therefore adopting an approach by which all staff will receive at least an additional 1% of their basic pay next year. All staff who are not eligible to receive incremental pay will be given a 1% non-consolidated payment in 2014-15. Other staff will receive an increase of at least 1% through incremental progression.

“It is our intention that in 2015-2016 the same approach will apply and staff who are not eligible to receive incremental pay will receive a non-consolidated payment of 2% of pay, whilst other staff receive incremental progression. As this will be a two year pay award, the NHSPRB will not be asked to make recommendations on a pay award for Agenda for Change staff in the 2015 pay round.”

### WHAT THE PAY AWARD MEANS FOR MEMBERS

1. Staff who, on 31 March 2014, are on a top pay point in their pay band, will receive a non-consolidated increase of 1%, payable in monthly instalments, with effect from 1 April 2014 and ending on 31 March 2015.
2. A small adjustment has been made to the value of pay spine point 16, to ensure that all staff on pay spine point 15 will have the opportunity to receive an incremental pay increase of 1% during 2014/15.
3. The values of all other pay points remain unchanged from the previous year.
4. These non-consolidated payments are payable from 1 April 2014 until they cease on 31 March 2015. They will not count for pensionable pay, nor any of the other allowances and additions to pay in the NHS Terms and Conditions of Service handbook. They will not, for example, count in the calculation of high cost area supplements, unsocial hours or overtime payments.
5. The provisions for incremental pay progression in Section 1(a) (England) and Annex W (England) will continue to apply.

### NON-CONSOLIDATED PAYMENTS FROM 1 APRIL 2014

Staff who, on 31 March 2014, are on the top pay point in their pay band, will receive a non-consolidated lump sum, payable in monthly instalments, with effect from 1 April 2014 and ending on 31 March 2015.

The pay points affected and the values of the lump sums are set out in the table opposite.



The Society & College of Radiographers

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### TWO YEAR PAY AWARD

Pay Band	Pay spine point (top pay point in each pay band)	Non-consolidated sum effective from 1 April 2014
1	3	£151
2	8	£175
3	12	£193
4	17	£221
5	23	£280
6	29	£346
7	34	£406
8A	38	£471
8B	42	£566
8C	46	£679
8D	50	£817
9	54	£985

Is this a two year award? The government has said the intention is that in the year 2015-16 the same approach will apply, and staff who are at the top of their pay bands, and who are not eligible for incremental pay, will receive a non-consolidated payment of 2% of pay, whilst other staff receive incremental progression. The exception is those who reach the top of their pay band in the year 2014-15. These staff will receive a non-consolidated payment of 1% in the year 2015-16. As this will be a two year pay award, the pay review bodies will not be asked to make recommendations on a pay award for NHS staff in the 2015 pay round.

### HOW WILL THE TWO YEAR AWARD WORK?

A 1% non-consolidated payment will apply to basic pay for staff at the top of their pay bands. For example, a full-time employee currently at the top of AfC pay band five will continue to receive annual basic pay of £27,901 in both the year 2014-15 and the year 2015-16. In addition they will receive non-consolidated payments worth £279 in the year 2014-15 and £558 in the year 2015-16. Their total earnings will depend on their individual non-basic pay.

### SCOTLAND, WALES AND NORTHERN IRELAND

The Scottish Government has decided to implement the Review Body recommendations in full and in Scotland there will be a 1% rise for all pay points, plus changes to bring the lowest points above the living wage.

Wales will mirror the overall cost, but have said they are prepared to talk to the trade unions about how it will be applied.

At the time of going to press, a formal announcement is still pending in Northern Ireland.

### SOR COMMENT

By 2017, NHS staff on Agenda for Change contracts will have had six years worth of what effectively amount to pay cuts – pay increases below the rate of inflation – while senior staff have received average increases in pay of just over 15% and the NHS has thrown money at redundancy pay for managers. This is double standards.

What this decision means for staff in England:

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