

Agenda for change

Questions & Answers

1. What are the most important parts of the Agenda for Change proposals?

There are four:

- a new grading system based on an equality-proofed job evaluation system which will replace all existing grades within the NHS and also effectively end the distinction between Pay Review Body staff and other staff
- harmonisation of terms and conditions such as hours, annual leave, shift payments, overtime and weekend rates and sick pay..
- new pay rates, increments, and pay spines
- arrangements to protect any staff from being worse off at the start of the new system

2. Why have unions and management been discussing Agenda for Change at all?

Since its inception UNISON (through the mechanism of the Joint Trade Unions) has been demanding a new pay system for NHS Staff. One that is fairer and meets equal pay rules. A pay system that doesn't discriminate against staff who are not covered by the Pay Review Body. One that draws all health workers into national bargaining and out of the current system which is unfair, unworkable and does not deliver equal pay for work of equal value.

3. Why is an entirely new grading system being proposed? What's wrong with the current ones?

The current grading systems don't work, aren't fair, and especially hit staff outside the Pay Review Body. If they are not changed soon, they are in real danger of falling into disrepute and being replaced entirely by local Trust bargaining. The only way of replacing the existing system with a fairer one was is to use a system called job evaluation to measure the relative value of different jobs. It's not perfect but is by far the best way of meeting UNISON's demand for equal pay. An equality proofed job evaluation system uses a similar approach to an equal pay claim to determine the relative value of different jobs.

4. Does the new system discriminate against women and black staff?

The existing grading structure and terms and conditions, certainly discriminate.

A disproportionate number of women and black staff are at the lowest end of the present structure. The new system would be much fairer as the grading of jobs would be less subjective through the use of the job evaluation scheme.

5. Why are terms and conditions for many staff being changed?

At present there are literally thousands of different terms and conditions within the NHS. There are obvious problems. Some groups of staff currently get little or no

extra pay for working shifts, nights, on call or overtime. Staff work different hours, get different amounts of annual leave and some have different rules for sick pay. Agenda for Change has one set of rules for hours worked, for annual leave entitlement, and for sick pay. Although some staff would have a slightly longer working week, many staff would have a shorter working week and improved annual leave.

6. Would anyone lose out under the new system?

It is a fact that in any major restructuring exercise there will be some staff requiring protection. UNISON has kept this to a minimum so that at the introduction of Agenda for Change, we would expect no more than a small percentage of staff to require protection. We would monitor this through Early Implementers and if it is a higher percentage than estimated (8%), then we have agreement that this would be an issue to be addressed jointly. The three-year pay increase of 10% linked to the proposals would reduce further the number of staff needing protection in the longer term.

The large majority of staff will have higher basic pay. A significant number of staff maintain their current position. In total 92% of staff will see increased basic pay or no difference and then get annual pay rises in addition. We expect 8% (1 in 12) will need protection to prevent their pay slipping in the first year, although some of those staff will benefit from reduced hours, increased holidays and better sick pay.

We are concerned that Agenda for Change will affect staff working particular shift patterns, most notably for those staff

who work permanent nights or weekends. In addition we have some major concerns about the unsocial hours element of the package which we will seek to address during early implementation.

These are precisely the sorts of issues UNISON is insisting are looked at again in the Early Implementer Trusts. This would allow us to assess the impact of Agenda for Change and where necessary, negotiate further improvements before members are asked to decide whether it is good enough to be rolled out to the rest of the NHS.

7. The proposals talk about “Gateways” staff will need to pass through to get their increments. Isn’t this a problem?

Most increments will not have “Gateways”. Moreover, UNISON have made it clear that anything that remotely looked like performance related pay would be unacceptable. In fact, it is expected that the vast majority of staff will pass through the “Gateways” without any problem at all. The proposals set out in great detail how difficult it is would be for any manager to prevent someone from passing through. Moreover, the proposals, for the first time in the history of the NHS, give all staff a right to staff development and training – a major breakthrough.

8. What is the purpose of the Early Implementers?

UNISON believes that Agenda for Change represents a real step forward from the chaotic system currently operating in the NHS. But we have reservations about a number of aspects

of the package. That is why UNISON is recommending a two-stage approach to deciding whether the system is right for NHS staff. We want to see the new system tried out in the 12 Early Implementer sites as this would allow us to review the impact of the proposals and seek to negotiate further on any aspects found to be unworkable. Only after such a review would members be asked to decide whether Agenda for Change is right for them.

9. If we take part in Early Implementers, are we giving the green light to Foundation Trusts to pay whatever they want?

Quite the opposite. Agenda for Change forces Foundation Trusts to use the same grading system and terms and conditions as the rest of the NHS. Their only scope for changing pay rates is to pay additional "recruitment and retention" premia. Without Agenda for Change they will be able to do what they want – including paying some staff less.

10. How many staff will be worse off in the first year?

No one will be worse off in the first year. 8% of staff are expected to have lower pay – some by a little, some by more. 92% of staff will be better off or be no worse off. That is before annual pay rise and is an agreed figure between unions and management and one of the jobs of the Early Implementers is to ensure that 92% of staff are better off or no worse off. Moreover any staff whose pay is drops will have protection – full protection for the first year and further protection for another five years.

11. Why is UNISON balloting after every other union?

UNISON was not prepared to ballot members until we had the maximum amount of information. We are still awaiting job profiles for many jobs, which will enable us to tell members what the deal means for them. We didn't think it was right to ask members to give a blank cheque when lots of details were unclear. We've left it as late as we possibly could so members can make an informed decision.

12. Why is UNISON having two ballots?

We think that there are too many problems remaining to simply sign up to Agenda for Change. We do strongly believe in a national pay system, with all staff on the same grading system, terms and conditions. That is clearly in the interest of NHS staff and UNISON members.

Unfortunately at the moment there are still issues we are unhappy about. For example, too many staff still have no idea what their grade will be because not enough job profiles have been issued and agreed. Some profiles remain outstanding because UNISON is not satisfied that these are ready to be signed off. There are other concerns. For example, we are also unhappy about night shift and weekend working rates and want our concerns address during the Early Implementer stage.

We can use the Early Implementers as test sites for Agenda for Change – to show where changes will have to be made to the current proposals.

We have now received a letter (dated 7 March 2003), from the Chair of the

Management side, agreed by Ministers, that we can indeed further discuss these issues in the review of the Early Implementer sites. This is a major step forward.

13. Why can't we just throw out Agenda for Change and insist on the usual pay round and keep the current pay structures?

The current pay structures and grades are going to disappear whatever happens to Agenda for Change. That is very clear. If Agenda for Change is rejected without even using the Early Implementers to test it and improve it, then the Government will introduce local pay. Foundation Trusts will lead the way, without the tight controls placed on them by Agenda for Change. UNISON could find itself outside pay bargaining machinery and unable to bring the employers to the national negotiating table.

UNISON has already talked to other unions and flagged up to management that have it has prepared normal pay claims for 2003-4. It is clear that we would be alone in this process as other unions are balloting on Agenda for Change. Moreover, the likelihood is that Ministers would dig in very hard to resist

any pay claim beyond the 3.225% offer, especially if we were pushing for such claims in isolation from other unions.

14. What happens to pay claims if the Early Implementers don't resolve our concerns?

If we can't make real progress on our concerns, then that will influence members' attitudes to the second ballot to be held in the second half of 2004. Clearly if members rejected further involvement in Agenda for Change, we would have to submit pay claims and would not consider ourselves bound by the remainder of the three-year pay deal.

UNISON's position is clear. The UNISON Health Service Group Executive wants to put Agenda for Change to the test and voted 2-1 to support the idea of trying out the new system in the Early Implementer sites. This would allow us to review the impact of the proposals and seek to negotiate further on any aspects found to be unworkable. Only after such a review would UNISON members be asked to decide whether Agenda for Change is right for them and right for the NHS. Those who are opposed to Agenda for Change at all costs have not come up with a viable alternative.

If you want to know more about Agenda for Change, speak to your steward, attend the hundreds of meetings being called by UNISON, visit our website www.unison.org.uk/healthcare/a4c or phone UNISONdirect on 0845 355 0845