

## NHS Pay: Response to UNISON Head of Health Sara Gorton

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As a Unison retired member, previously employed as an NHS admin worker, I cannot vote on the pay offer but I can comment on Unison's arguments promoting it.

The Unison website has two front-page articles, neither of which answer healthworkers' growing scepticism and anger at the deal.

Let's look in detail at what the union does and does not say.

The main article is headlined "[UNISON to recommend acceptance of NHS pay offer](#)" with a subtitle "The offer boosts pay significantly this year and next and is a victory for members who have taken industrial action".

The headline is true, sadly. The subtitle is false. **The offer does not boost pay significantly this year. It does not keep pace with the official inflation forecast for next year. The industrial action did force the government to talk, a victory which proves industrial action can win, but the offer itself is not a victory.**

According to the Office for Budget Responsibility ([March 2023 forecast](#), Appendix A Table A.1), average inflation in the Consumer Price Index (CPI) for 2022-23 was 9.1%, and for the Retail Price Index (RPI) 11.6%. In fact as Unison has previously argued in submissions to the Pay Review Body, real inflation is even higher for low paid workers, who spend more on basic necessities like food, transport, rent, and utilities whose prices are rising faster than luxury goods. The PRB offer already implemented by the Government was an uplift of 4%. So by Unison's own arguments, at least a further 7.3% (compounded with the 4%) would be needed to stand still.

Normal pay increases are "consolidated", which means they carry forward into succeeding years and apply to the pensions paid out at retirement. By contrast, "bonus payments" do not carry forward and do not contribute to pensions. **This means that from next month onwards, whatever bonus is handed out for 2022-23 has no consequence – it's gone forever.**

The new offer for 2022-23 has **no new consolidated pay**, and one-off **non-consolidated** payments ranging from 7.2% for Band 4.1 to 6.8% B4.2, 7% B5.1, 6.6% B5.2, 6.1% B5.3 and decreasing in higher bands. Bands 1 - 3 do slightly better, but not much.

Even if Unison has chosen to ignore the difference between a bonus and a consolidated pay award, the 2022-23 bonus is not enough to stand still with RPI, let alone the higher rates of inflation which apply to lower paid workers in reality.

For 2023-24 the offer is 5%, consolidated. But the official OBR inflation forecast for 2023-24 is 6.1% (CPI) and 8.9% (RPI).

**The offer is a cut in both years. It can't be called a victory. Putting sticking plasters on the current situation allows the future to deteriorate. Failure to resolve the pay crisis will do nothing to retain staff or end the staff shortages which affect both staff and patients.**

After the subtitle, how about the article itself?

Unison Head of Health Sara Gorton rightly says that healthworkers had to take many days of strike action to get the government to even talk about pay. She then claims “the offer would boost pay significantly this year and mean a wage increase next year that’s more than the government had budgeted for.” The significant pay boost this year is actually a cut, and the rest of the sentence just means the government originally wanted even more cuts than the offer imposes for 2023-24.

Sara Gorton then says “This is better than having to wait many more months for the NHS pay review body to make its recommendation.”

But no-one is proposing waiting for the PRB to make a recommendation. In fact, health unions pulled out of the Pay Review process, regarding it as rigged by the government.

The rest of the article gives the figures for the one-off lump sum payments in 2022-23 without showing them as a percentage of earnings, without mentioning “non-consolidated” or the implications of a one-off payment.

The website front page also carries Sara Gorton’s blog: [Why this pay offer should be accepted](#)

She points to the threat of escalating action by Unison members as forcing the government’s hand, which is true though in fact it was not just Unison. She then claims the talks “secure[d] our NHS members a pay offer that properly protects, recognises and rewards the whole workforce.” But it doesn’t. It’s a cut in 2022-23 and 2023-24.

She writes “The NHS is one team, and every role in it is essential in providing excellent patient care.” Absolutely right, but how does that fit with the statement in the offer that “the government has agreed with the RCN its commitment to address the specific challenges faced by nursing staff in terms of recruitment, retention and professional development. This will mean working with NHS Employers and all agenda for change trade unions over the next year to consider whether a separate pay spine for nursing might be established.” Was Unison silent on that proposal, or did it recognise that a separate pay spine would inevitably threaten pay, terms and conditions for other NHS staff?

Sara Gorton repeats details of the offer as in the main article.

Then comes the killer paragraph. It begins: “The health service group executive, our lead NHS committee, have carefully reviewed this offer and their recommendation is to accept.” I wondered whether the HS Exec considered the implications of a non-consolidated bonus payment, or the real terms cuts in both years. More to the point, did the Exec consult with NHS branch officers across the country before reaching their decision?

The para concludes: “We are in no doubt that if it is not accepted, the government will take this offer off the table and the pay award NHS staff receive will be much worse.”

**If Unison healthworkers reject the offer, it means they want to fight for a better offer.** Their action forced the government to the table. Why dismiss the possibility that further action could achieve more? Sara Gorton is not even considering it, let alone offering any thoughts on what would be needed to actually win the dispute.

**That is the real conversation, and I hope healthworkers entitled to a vote are having it now.**