Ominous silence on pay

The health secretary didn't get the expected standing ovation at the Unison health sector conference last week. The reason - no promise to take action to end low pay

By Graham Scott

EIGHT WEEKS into his new job and health secretary Frank Dobson must by now have realised the honeymoon period is over.

When he sat down after addressing Unison health sector's annual conference last week, most observers expected him to receive an enthusiastic standing ovation. Instead, the response of the audience - people who almost without exception have been fighting for a new Labour government since 1979 - was muted to say the least.

Later in the day, many of the Unison members who had given Mr Dobson such a cool response explained why. And they all gave the same reason: his failure to promise to take action against low pay in the NHS.

Mr Dobson had avoided the issue of pay altogether, except for reiterating that the government is carrying out a review of how the pay of nurses and all other NHS staff should be determined. He also promised to listen to the views of everyone, from individual staff through to trade union bosses, in pursuit of the best possible system.

But he made no reference to the minimum wage, or indeed to levels of pay at all.

Pay was the issue which dominated the first day of the conference, with many delegates angry that the promised land of a Labour government was not providing what they were expecting.

The conference overwhelmingly approved a motion from the union’s service group executive (SGE) setting out what Unison wants to see in the new system which is expected to fix the pay of all NHS staff by 1999.

The motion called for a national structure, harmonised conditions of service for all staff, the end of low pay, equal pay for work of equal value and equity of treatment for all staff. But most delegates wanted to go further, and later passed a motion which effectively ditched the Framework Agreement, the deal which Unison and other unions brokered with the NHS Executive in 1995.

Part of the agreement in effect guarantees NHS staff not covered by a review body (RB), such as ambulance workers, porters and domestics, an annual pay increase in line with that awarded to nurses. The rationale of the Unison leadership was that since the nurses’ RB was set up in 1983, registered nurses had always fared better in pay terms than ancillary and domestic staff.

By tying the pay of their poorest paid members to that of nurses, Unison leaders thought they were doing their members a favour. But the union’s Scottish regional health committee did not see it that way, and proposed a motion which said: ‘Any agreements reached through the pay review body for nursing or any other group must not be imposed on the non pay review groups within the NHS.’

Only a handful of delegates opposed it. Proposing the motion, Pat McGaghey even accused members of the SGE of ‘not giving a toss’ about low pay. On behalf of the SGE, Dave Goodson pointed out that Unison had made large pay claims in the past, but workers not covered by an RB still received lower rises than nurses.

Unison’s deputy head of health, Malcolm Wing, said the strength of feeling against linking the pay of support workers to that of nurses was partly historical.

Through the years, Unison members, when they belonged to the National Union of Public Employees (NUPE) and the Confederation of Health Service Employees (COHSE), had the chance to vote on whether a pay offer should be accepted. Under the Framework Agreement, Mr Wing said many Unison activists felt they had lost the chance to voice their anger at low pay awards, and vote against them.

The motion passed last week also called on Unison leaders to ensure that all future pay claims are sufficiently large to bring all staff into line with the union’s minimum wage target of £4.42 an hour. Given that the lowest paid ancillary workers to have their pay set nationally earn only £3.46 an hour, Unison will have to put in a claim for a 28 per cent rise this autumn, when the NHS pay round begins.

But bringing all staff up to the £4.42 threshold will inevitably lead to calls for similarly high rises from staff paid just above the minimum wage figure to maintain existing differentials. The knock on effect would certainly be felt by nurses at the bottom of the clinical grading ladder, and probably by those higher up, too.

Mr Wing said this was an issue which all the nursing unions had to be prepared to face. ‘We can’t tackle the problem of low pay without tackling the problem of differentials,’ he said. ‘We will be seeking a flat rate increase, which obviously means the lowest paid benefit most, underpinned by a percentage rise, which benefits everybody.’

The problem Unison will have is persuading the other nursing unions that it is in all their interests for such a claim to go forward.