Written Ministerial Statement

The content of this written ministerial statement is as received at the time from the Minister. It has not been subject to the official reporting (Hansard) process.

Department of Health

PAY SETTLEMENT FOR HSC STAFF

Published at 1.00 pm on Thursday 29 February 2024.

Mr Swann (The Minister of Health): I wish to update MLAs on the current situation regarding pay settlements for staff in the health and social care system.

I know members across all parties will have shared my distress at seeing health workers back on the picket lines in recent months, demanding once again the restoration of pay parity. I believe the Assembly is united in seeing our Health and Social Care workforce as the foundation of that great institution and it is vital we act to provide fair pay settlements.

I am pleased that a proposed pay settlement has now been tabled by my Department, involving the restoration of pay parity with England for HSC staff covered by Agenda for Change terms and conditions.

Under this offer, HSC Agenda for Change staff will receive a consolidated pay uplift of 5% and a nonconsolidated (pro-rata) payment of £1505. In addition, any remaining staff in Band 1, and staff on the lower point of Band 2, will have their pay increased to match the higher pay point of Band 2.

I should clarify that the arrangements for non consolidated payments for staff are somewhat different in that there has been divergence between the four nations in recent years in this regard and, for example, during my last term as Minister, I was able to issue two one-off staff payments that were not mirrored in England.

Trade unions representing Agenda for Change staff have agreed to ballot their members on the proposed settlement. I welcome this decision and commend the constructive negotiations that have taken place. I want the unions now to be given the time and space to hold the ballots.

The pay offer has been made possible through additional monies made available by HM Government. I know Members will share my concern at the one-off nature of this funding and my hope that additional support will be made available in future years, given the recurrent nature of pay settlements.

Notwithstanding the current and projected pressures on all Departmental budgets, I am sure Members will join me in welcoming the prospective pay settlement that has been reached.

I regret to inform the Assembly that progress has still not been achieved in relation to planned industrial action by junior doctors. As the Assembly will know, doctors and dentists come under a different negotiating framework to Agenda for Change.

The BMA Junior Doctors Committee has repeatedly made clear that it wants my Department to go beyond the pay offer made in England, as recommended by the DDRB, a national pay review body.

For junior doctors, the DDRB recommendations offer an average pay increase of 9.1% in 2023/24 with those in their first year receiving a 10.7% uplift. This award will be back dated and payable to all staff from April 2023. This offer should be viewed in the context of pay settlements across the wider Northern Ireland public sector.

This pay uplift will bring junior doctor basic pay here above the level in Wales, and closer to the level in England. It should also be noted that like for like comparisons between junior doctor pay in NI and England are not straightforward, due to the fact that different contractual arrangements are in place in

the two jurisdictions. Locally, our current contract offers a lower basic salary with higher variable supplements for working out of hours or at weekends. In contrast, the English contract introduced a higher basic pay and lower variable rates. Under their current contract, junior doctors in Northern Ireland receive allowances ranging from an additional 20%-100% of basic pay depending on their rota. I have indicated a willingness to discuss contract reform with Junior Doctors as part of any future discussion on pay.

I have made clear that there are limits beyond which I cannot go in relation to pay offers this year.

Implementing the recommendations of independent pay review bodies or mirroring pay settlements in England is the maximum that can be afforded at this juncture. This reflects the current and looming severe budgetary pressures on my Department and across all Departments.

I have appealed to the BMA Junior Doctors' Committee to re-consider the planned industrial action and I do so again.

I entirely appreciate the frustrations of their members - not just on pay but on other pressing issues including health service pressures and working conditions.

While there are limits in relation to the 2023/24 pay offer, I believe there are grounds for productive negotiations on a number of fronts. These include: 2024/25 pay; potentially reforming the current junior contract in Northern Ireland; and addressing areas of concern on working conditions and other non-pay issues.

It is also the case that 2023/24 junior doctor pay is not resolved in England. My Department has committed to further negotiations when we have greater clarity on any final settlement in the ongoing junior doctors dispute in England.

The demand that below inflation pay increases over the past decade be remedied is beyond the reach of the NI Executive and Assembly.

This is a national issue, reflecting national government policy, and has impacted on public sector workforces across the UK. If there is a solution, it will be a national one.

I would therefore question what industrial action in a NI context can hope to achieve.

As Health Minister, I also have to place on record my deep concern over the implications for patient care.

HSC Trust will of course do all they can to mitigate impacts. At this point, it is anticipated that disruption will be significant with thousands of patients missing out on appointments and procedures.

This deeply regrettable.

I hope Members across the House will echo my wish to see the situation de-escalated as soon as possible through a constructive negotiation process.