

NHS Pay Review Body 30th Report 2017 Key Findings



"The NHS Pay Review Body makes recommendations to UK Governments and NHS bodies for all staff paid under Agenda for Change. We listen to and evaluate contributions from stakeholders and experts, and conduct our own analysis to reach independent, evidence-based advice. Our work helps the NHS to attract, retain and motivate the people with the skills required to deliver affordable, quality healthcare."



All four nations saw an increase in the size of their full-time equivalent workforce in 2015/16

England, Scotland and Wales saw an increase in their pay bill in cash terms in 2015/16



2.1% in England
0.8% in Scotland
2.1% in Wales
0.9% in Northern Ireland



2.3% in England
3.5% in Scotland
1.8% in Wales

No paybill data was supplied for Northern Ireland



The full-time equivalent workforce in 2015/16 reached:

909,720 in England
124,916 in Scotland
67,838 in Wales
50,353 in Northern Ireland

The pay bill in 2015/16 reached:

£35.7bn in England
£4.0bn in Scotland
£2.1bn in Wales



Source: OME analysis of data from NHS Digital and England, Wales, Scotland and Northern Ireland Health Departments.

In 2017, our main recommendations were fully accepted in England, Wales and Scotland. The Northern Ireland Executive has not yet responded to our recommendations.

Responses correct as of 19/04/2017

Motivation

Ambulance staff were the most dissatisfied NHS staff group according to staff surveys in England, Scotland and Northern Ireland



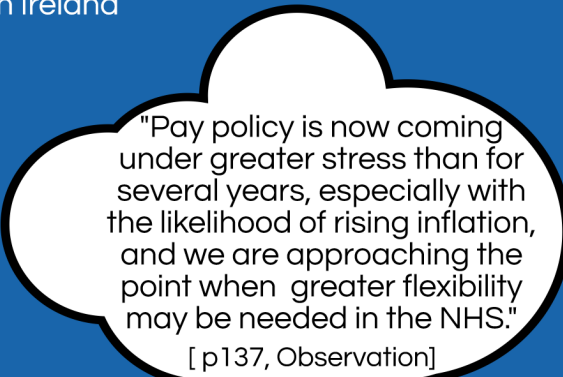
Turnover

Joining rates are higher than leaving rates across the UK, meaning that the number of NHS staff is increasing



Economy

At least **2** out of every **5** staff survey responses reported difficulties managing workload or not having adequate resources



Affordability

In its November report, the Office of Budget Responsibility forecast CPI inflation to increase to around **2.5%** in the fourth quarter of 2017



The NHS England Five Year Forward View aims to achieve

£22 billion

of efficiency savings between 2015/16 and 2020/21 to fill the gap between resources and patient needs.



This is equivalent to savings every year of **2-3%**

Source: Data from OBR, NHS Digital, NHS England, Stats Wales, Information Data Services Scotland, Northern Ireland Executive and NHS Staff Surveys.

Graduate Entry

UCAS figures for the January 2017 deadline saw a fall in applicants to nursing degree courses in England, as compared to the previous year



In simplified terms, for every **100** adult nursing degree places commissioned, the NHS gains **58** full-time equivalent nurses

"Greater consideration needs to be given to the long-run supply position of the NHS in thinking about pay. People's behaviour will be more responsive to pay in the medium-to-long-term than in the short-term."

[para 7.89]

5% of the non-medical workforce in 2015 were from the European Union and **6%** were from outside of the UK and EU



The Nursing staff group had the highest proportion of overseas workers at **16%**



Apprenticeships

From April 2017, all employers with a pay bill in excess of £3m will have to pay the Apprenticeship Levy. According to NHS Employers, this will cost the NHS in England approximately **£200m** in 2017/18



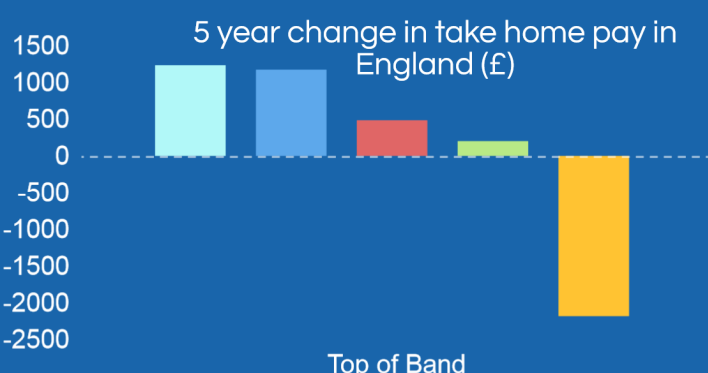
Agency spend increased across the four countries of the UK in 2015/16

Agency

Source: Data from UCAS, NHS Digital, Health Education England, NHS Employers, NHS Improvement, Northern Ireland Executive and Scottish and Welsh Governments

Between 2011/12 and 2015/16 in England, staff at the top of Agenda for Change pay bands saw a change in their take home pay (when excluding inflation)

of
Top of Band 1 **+10.4%**
Top of Band 5 **+2.6%**
Top of Band 9 **-4.2%**



In 2015/16, compared to a year earlier...

Affordability challenge
"...the combination of slowly increasing real terms NHS budgets with significant increases in patient demand driven by demographic pressure, increasing patient expectations and pressures on the social care system."
[para 3.69]

Median gross weekly pay for full-time employees in the human health and social work activities sector (both private and public) increased by

2.6%

which was a faster rate of increase than the average for the public sector, though slower than the increase in the private sector average wage



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