Annual pay review
– SAS doctors

Background

Each year the BMA submits evidence to the DDRB (Review Body on Doctors’ and Dentists’ Remuneration), on matters relating to doctors’ pay, morale, recruitment and retention. The DDRB is an independent public body which advises Government on rates of pay for doctors and dentists. In recent years, the BMA has been very concerned with the ability of the DDRB to serve its original purpose as Government interference in the process through remit letters and the cap in public sector pay, have affected DDRB’s ability to act independently.

The DDRB was originally created following a recommendation of the Royal Commission on Doctors’ and Dentists’ Remuneration in 1960.a The Royal Commission was set up after a decade of government resistance to honour or explore pay increases for doctors.

The Royal Commission recommended that a Review Body was necessary in order to give the medical profession ‘some assurance that their standards of living will not be depressed by arbitrary government action’, as well as achieving the settlement of remuneration without public dispute. The view expressed by the Royal Commission was that this procedure will ‘give the profession a valuable safeguard. Their remuneration will be determined, in practice, by a group of independent persons of standing and authority not committed to the government’s point of view.’

Between 1963 and 1970 the Review Body produced 12 reports, of which the recommendations of the first 11 reports were accepted in full by the government. When in 1970 the government declined to implement DDRB’s recommendations in full, halving the award recommended for career grade doctors, all members of the Review Body resigned, as the failure of the government to implement the recommendation of the DDRB was perceived to fundamentally undermine the operation of the Review Body process.

When the DDRB was reconstituted in November 1970, the then government gave an undertaking that it ‘would be an independent body whose recommendations would not be subject to reference to any other body and would not be rejected or modified by the government unless there were obviously compelling reasons for doing so’. Alongside this, new PRBs (pay review bodies) were also created for the armed forces, senior civil servants and judiciary. PRBs now cover approximately half of the workers in the public sector. With the extension of PRBs’ remit, there has also been an increase in government control over the recommendations of review bodies, as well as their implementation.

a Royal Commission on Doctors’ and Dentists’ Remuneration Report (1957-1960)
2018/19 pay round

The 2018/19 DDRB pay round was once again very poorly coordinated. Government submitted evidence outside the agreed deadlines and as a result there was a significant delay in announcing the uplifts.

The BMA stressed in its written and oral evidence submissions that years of below inflation increases have equated to significant real terms cuts in doctors’ pay. Out of the 10 pay review body occupations, doctors have seen the biggest fall (-22.5%) in median real gross hourly earnings.

As a result, many of our SAS members describe their current level of morale as being low or very low. What is worse, research has shown that the bullying and harassment which spans the NHS, disproportionally affects SAS doctors.

We believe that doctors should be treated at least in line with the wider economy and therefore asked DDRB for a recommendation of:
— RPI, plus £800 or 2 per cent (whichever is greater); and
— a mechanism to address the real terms cuts in doctors pay.

Annual pay review from DDRB

DDRB acknowledged the concerns we raised about the SAS workforce and recognised that SAS doctors are not being treated with the ‘appropriate level of priority’. DDRB indicated that a review covering the roles, career and salary structure, and developmental support available to SAS doctors appears to be urgently needed.

In the meantime, DDRB recommended for SAS doctors in its 46th report:
— a 3.5% increase to the national salary scales for SAS doctors in the UK (i.e. a 2% recommended increase to the salary scales of all doctors plus an extra 1.5% increase in pay for SAS doctors).

Government announcement for England

On 24 July the UK Government announced its pay deal for doctors and, in doing so, ignored the recommendations from the DDRB. For SAS doctors the Government announced:
— a 3% increase to basic pay for SAS doctors from October 2018.

What this means for SAS doctors in England

Even though long overdue recognition of SAS doctors by the DDRB is positive, UK Government’s decision to decline the Review Body’s recommendations and not backdate pay means that SAS doctors will only see their pay uplifted by 1.5% for this year, which translates to an average weekly uplift of £11.42 after tax. This is a sub-inflation award which will act as a further blow to SAS doctors’ morale, who have been experiencing a steady decline in real income over the last years. The situation for SAS doctors is worsened by the lack of professional development opportunity and reduced access to progression pay.
What the BMA is doing

Following the announcement, the BMA immediately issued a statement and Chaand Nagpaul, BMA Chair of Council, wrote to the Secretary of State for Health and Social Care to convey the anger of the profession with the UK Government’s decision to ignore DDRB’s recommendation and then halve the value of the announced pay award by not backdating it. We also wrote to the DDRB to explain how the UK Government’s actions further diminish the confidence of the profession in the process and asked the Review Body to reinstate its independence and challenge the UK Government for the fact that the award unfairly will not be backdated to April 2018 for most doctors.

We are now in the process of reviewing our relationship with the UK Government and the DDRB regarding pay. To help us inform our strategy we surveyed our members in England about the fairness of the pay uplift and the recommendations of the DDRB. The results of the survey show that:

- The majority of SAS doctors surveyed reported that the pay announcement by the Government was highly or somewhat unacceptable (83%).
- Almost two fifths of the SAS doctors reported that the pay recommendation from the DDRB was highly or somewhat unacceptable (37%).
- As a result of the offer, the vast majority of respondents stated that the value they feel working as a doctor in the NHS was reduced (78.1%).
- Similarly, as a result of the offer, the majority of respondents stated that their level of morale has worsened (76.3%).

The BMA wrote to the DDRB and the UK Government, and issued a position statement with the BDA (British Dental Association) asking for fundamental reform of the pay review process for doctors, on the basis of the following principles:

1. Restitution of the DDRB’s independence and return to its original purpose.
2. Revision of its terms of reference to narrow the DDRB’s focus purely on pay uplifts rather than making recommendations on wider contractual matters.
3. Clear timetables for submission of evidence and publications of the report, and an undertaking that government(s) must not fetter the parameters of the DDRB’s recommendations.
4. Re-establishment of the undertaking that government(s) will respect and implement the DDRB’s recommendations.

Finally, the BMA has been meeting with the Secretary of State and his team to lobby for better pay and condition
What applies to other doctors in England

The DDRB makes recommendations for all doctors. This year’s recommendations and Government decision for the other Branches of Practice are outlined below.

<table>
<thead>
<tr>
<th></th>
<th>DDRB recommendation</th>
<th>UK Government decision</th>
<th>Average weekly uplift after tax</th>
<th>b</th>
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<tbody>
<tr>
<td>Consultants</td>
<td>2% pay uplift</td>
<td>1.5% pay uplift from October 2018</td>
<td>£6.10</td>
<td></td>
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<tr>
<td>Junior doctors</td>
<td>2% pay uplift</td>
<td>2% pay uplift from October 2018</td>
<td>£5.62</td>
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<tr>
<td>GPs</td>
<td>4% pay uplift</td>
<td>A further 1% to the value of the GP remuneration and practice staff expenses through the GP contract, supplementing the 1% already paid from April 2018 and making a 2% uplift in all; this will be backdated to 1 April 2018.</td>
<td>Not applicable</td>
<td></td>
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Government announcement for Scotland

The Scottish Government announced its pay award for doctors in Scotland, which will be backdated to 1 April 2018, at the following rates:

– 3% increase to the national salary scales for all doctors who earn below £80,000 (full-time equivalent)
– 3% increase to medical practice staff pay and an uplift of 3% for non-staff expenses
– £1,600 for medical staff earning above £80,000 (full-time equivalent)
– 3% for all junior doctors
– 3% for all Specialty Doctors and Associate Specialists who earn below £80,000 (full-time equivalent)
– 3% for all salaried General Medical Practitioners who earn below £80,000 (full-time equivalent)
– Distinction Awards and Discretionary Points remain frozen

Read our statement.

Government announcement for Wales

The Welsh Government announced its pay award for doctors in Wales, which will be backdated to 1 April 2018 and is in line with the DDRB recommendations, at the following rates:

– A two per cent base increase for salaried doctors (including Clinical Excellence Awards) and dentists, salaried General Medical Practitioners (GMPs) and independent contractor GMPs (net of expenses)
– An increase in the GMPs trainers’ grant and rate for GMP appraisers of two per cent
– An additional two per cent for independent contractor GMPs (net of expenses), salaried GMPs and to the GMP trainers’ grant and the GMP appraisers’ rate
– An additional 1.5% for SAS doctors

Read our statement.

b These are what the uplift look like over 12 months, rather than what individual pay checks will increase on average for the second half of the financial year, based on latest pay figures from 2016/17.