In this issue: PAY - CSP recommends rejection of pay offer; Speak up for Public Services rally and lobby of Parliament (p. 4); graduate unemployment (p. 5); ill-health retirement & sickness absence (p. 6); Welsh election success (p. 7); top activist retires – farewell to Pauline Betteridge (p. 7); stewards training (p. 9); PAY CONSULTATION FLYER (Back page)

NHS PAY: VOTE TO HAVE YOUR SAY

• CSP PAY REFERENCE GROUP RECOMMENDS ‘NO’ TO 3-YEAR DEAL
• MEMBER CONSULTATION FROM 23 APRIL-13 MAY

The CSP is consulting NHS members on a proposed 3-year pay agreement. Here we outline details of the pay offer, the arrangements for consulting with members working in the NHS and the CSP’s position on the offer.

Consultation Dates and Recommendation
The consultation will run from 23 April through to noon on 13 May. The CSP is recommending that members vote to reject the current offer.

The Pay Offer
The pay proposal relates to NHS staff covered by Agenda for Change. To see a copy of the full written proposal and its impact on your salary, please visit the news item headed ‘NHS Pay: CSP members urged to reject 3-year deal’ in the Workplace Issues section of the CSP website at: http://www.csp.org.uk/director/newsandevents/physioalerts.cfm?item_id=528FB901AEFD66287E964A40ABE9ACE4

In summary, the pay offer for 2008/9 is for a 2.75% increase from 1 April, in line with the recommendation from this year’s Pay Review Body (PRB). This will be followed in year 2 with an increase for most members of 2.4% and in year 3, an increase of 2.25%. There will be some restructuring of pay bands. The pay offer thus looks like this:

2008/09
• 2.75% increase

2009/10
• 2.4% increase
• Removal of the bottom point of Band 1 (point 1) from the pay scales
• Incremental date of all those on point 1 to move to 1 April from year 2
• Top of Band 5 (point 25) to increase by 0.33%
2010/2011

- 2.25% increase
- Length of Band 5 to be reduced from nine points to eight with remaining points to be re-spread across the band
- Incremental date of staff on the removed point to be reset to 1 April to prevent leapfrogging
- Top point of Band 5 (point 25) to be increased by 0.33%
- A flat rate pay increase of £420 for points 1-13 (equivalent to 2.25% at point 14)

**Future talks**
The pay offer also includes:

- an agreement to hold further talks within the three year period on proposals to reduce the number of incremental pay points (starting with Bands 6 and 7) that are affordable within the context of future pay awards;
- a promise to consider the trade unions' claim for a reduction in the hours of the working week, in conjunction with further discussions on productivity improvements within the NHS;
- a commitment to working in partnership to continue to increase the number of apprenticeships in the NHS, in line with Government policy;
- a revised facilities agreement for NHS staff;
- work-life balance and well-being statement.

There is provision for the Pay Review Body to review pay rates in years 2 and 3 should there be “a significant and material change in recruitment and retention and wider economic and labour market conditions”. The decision on whether to do this will be down to the Pay Review Body. In the event of the PRB making a recommendation for a further pay increase, it will then be up to Government to decide whether to accept the recommendation or not.

The offer has been tabled as a package offer and the government has made it clear that it reserves the right to reconsider its response to the Pay Review Body’s recommendation of 2.75% for 2008/9 if the package is not accepted.

**CSP Position**
Immediately after the pay proposal was tabled, the CSP issued an interim joint statement with six other health unions representing professional staff in the NHS: Unite, the Royal College of Midwives, the Society of Radiographers, the Society of Chiropodists & Podiatrists, the British Orthoptic Society and the Federation of Clinical Scientists. The statement read:

"We would accept the NHS Pay Review Body’s recommendation of 2.75% on NHS staff pay for 2008/09 because of our commitment to the independent pay review body process. However, the proposed offer of 2.4% and 2.25% for years 2 and 3 after the PRB recommendation gives us great cause for concern as the current uncertain economic situation leads us to believe that it would not meet our members’ expectations and would represent a real terms pay cut for our members."

On 15 April, the Pay Reference Group (PRG) of the Society’s Industrial Relations Committee met to formally consider the offer. The view of the PRG was that the proposed 2.75% increase for 2008/9, while low, was reasonable given that this was what the Pay Review Body had recommended and was higher than the ceiling of 2% being urged on the Pay Review Body by both the Department of Health and NHS Employers.

However, the PRG considered the remainder of the package to be **unacceptable** because it:
• Fails to protect members’ pay against inflation;
• Locks us into a three year agreement at a time of great economic uncertainty and with no guarantee of being able to re-open pay talks before 2011;
• Discriminates against more specialist clinicians by focusing pay band improvements on bands 1-3 and 5;
• Pushes the costs of restructuring Band 5 into year 4, potentially cutting the monies available for future across-the-board pay rises in 2011/12;
• Compromises the independent Pay Review Body process for a second year running because of the threat by Government to interfere with this year’s PRB recommendation if the 3 year package deal is not accepted.

In view of the serious failings of the package as a whole, and the Government’s insistence that it be taken as a package, the unanimous decision of the Society’s Pay Reference Group was to consult all members working in the NHS on the offer, with the recommendation that it be rejected.

Alex MacKenzie, Chair of the CSP Industrial Relations Committee, says:

“As the CSP supports the Pay Review Body process we can accept the review body’s recommendation of a one year pay increase of 2.75%. What we cannot accept, however, is being pushed into - at a time of great economic uncertainty - a 3-year deal of decreasing value. A pay award worth less and less over time is not in our members’ best interests and will do nothing to improve morale, which is already pretty poor. I urge CSP members to use their vote in our consultation starting on the 23 April. We have an opportunity to send a strong message back to Government about how valued we feel. Let’s not waste this chance to make our voice heard.”

Implications of Rejecting the Pay Offer
If CSP members agree with the Society’s recommendation and vote to reject the offer, the CSP will take this outcome to a joint meeting of all of the health unions. CSP negotiators will seek to agree a common negotiating position with the other health unions that the multi-year pay package should be put aside and the 2008/9 Pay Review Body recommendation paid in full.

The threat by Government to review its response to this year’s PRB recommendation if the package as a whole is not accepted is clearly not to be dismissed lightly. But neither is it automatic, for the following reasons:

• there would be huge political fall-out for the Government from a failure to honour the independent pay review body process in the NHS for a second year running;
• the Government has already announced that it has accepted the doctors and dentists’ pay review body recommendations in full this year, without insisting on it being part of a multi-year package;
• the Pay Review Body itself was very clear in its report that it regarded its recommendation of 2.75% for 2008/9 as both balanced and affordable.

For these reasons, the CSP believes that it is worth standing up to the Government’s threat as part of a strong, joint health union position.

At this stage, it is impossible to predict what the outcome of the consultation exercises being organised by the other health unions will be. If the majority union view is to reject the package, the first priority will be to try to negotiate an acceptable alternative with Government. If this fails, the CSP will consult further with members to assess support for direct membership action as part of a joint union campaign.
At this stage, therefore, we are consulting CSP members on whether to accept or reject the 3-year offer as it currently stands.

How to Vote
All CSP members working in the NHS are eligible to vote by using the CSP’s web-based survey tool. The survey can be found on the CSP website at http://www.csp.org.uk/director/workplaceissues/pay08.cfm from Wednesday 23 April. The survey is open to all CSP members working in the NHS. Members will need to have their membership number to hand when visiting the website to access the survey. The consultation will run from Wednesday 23rd April through to noon on Tuesday 13th May.

ACTION POINTS
• Stewards are asked to promote the consultation and the CSP’s recommendation to reject to members – please do all that you can to encourage members to vote. A flyer advertising the consultation process is attached with this issue of SN (see back page);
• Prepare to answer members’ questions on the pay offer, the CSP’s position and the consultation. If you are unable to answer members’ queries, liaise with your SNO. Members can also contact the CSP direct through pay08@csp.org.uk should they have any queries about the pay offer or the consultation. We will be compiling a list of frequently asked questions (FAQs) and posting these on the website;
• If you have not already done so, please update your member profile at www.csp.org.uk/profile/. Publicise this to your members and get them to update their profile information too. If this wasn’t important, we wouldn’t ask you to do it – one example of the benefit to those NHS members who have already posted a profile is that we will be emailing them direct to alert them to the consultation exercise.

March & April’s workplace meetings
Our thanks to stewards who organised workplace meetings in March and April, prior to the announcement of the Governments’ pay offer. These proved to be a worthwhile exercise and we believe that the 400 members who attended the workplace meetings across the UK appreciated the opportunity to discuss their concerns about pay and to quiz their regional steward and Senior Negotiating Officer about a range of related issues, from the PRB process itself to industrial action. In addition to the meetings, we received 75 emails to the pay08@csp.org.uk email address from members, a figure since swelled by a flurry of emails following the pay announcement.

SPEAK UP FOR PUBLIC SERVICES
RALLY & LOBBY OF PARLIAMENT: MONDAY 9 JUNE

A public sector pay rally and lobby of Parliament will take place in Westminster on Monday 9 June. The rally and lobby are part of the Speak up for Public Services campaign, the theme of which is fair pay for public servants.

Arrangements for the rally and lobby are:
• 1pm-3.30pm: rally in Westminster Central Hall – with CSP speaker
• 2.30pm: lobbying of MPs begins

In addition, the CSP has booked a Committee Room in the House of Commons so that we lobby MPs directly on current and future physiotherapy workforce issues, specifically pay and graduate unemployment.
CSP members are urged to attend the rally and lobby. Alternatively, if you are unable to be in London to attend the rally, please consider writing to your MP. If you are able to attend or are interested in lobbying your MP, please contact Warren Glover in the CSP’s Employment Relations & Union Services (ERUS) function on 020 7306 6675; email gloverw@csp.org.uk.

GRADUATE UNEMPLOYMENT

The CSP is continuing to monitor levels of employment among physiotherapy graduates. As we have been experiencing difficulties in obtaining good response rates to our surveys sent out to graduates by email, we undertook a phone survey in March and April of all those graduates from 2007 and 2006 who had not previously told us that they had either found a permanent junior physio job or who had decided not to pursue a career in physiotherapy. So far we have contacted and analysed the results for all graduates from English universities from 2007. We are now working through the 2007 cohorts from Scotland, Wales and Northern Ireland and the 2006 cohorts from all four countries.

The phone survey results show a recent improvement in the employment position of newly qualified physiotherapists in England compared to 4 months ago. This is a reflection of the hard work that the CSP and physiotherapy service managers have put into this issue, working in partnership with NHS Employers, Department of Health and Strategic Health Authorities.

51% of 2007 graduates from English higher education institutes (HEIs) now have permanent work compared to just 25% in December 2007. A further 22% are working on short term or bank contracts (compared to 26% in December).

The situation appears to be changing rapidly with many posts becoming permanent in the last 3 or 4 months, but it is too soon to know whether this is a confirmed trend. It is not clear how many of the current short term and bank contracts may translate into permanent posts. The results mean that we still have 41% of the 2007 graduates who have not yet found their first permanent junior physio post and 8% are either not currently looking for work as physiotherapists or have given up looking altogether.

A further 2,250 physiotherapists are due to graduate in England alone this year, with a total of over 2,500 expected to graduate across the UK in 2008. We also know that some of the 2006 graduates are still seeking a permanent junior physio post so graduate employment must remain a high priority for SHAs and the Government and will remain so for CSP.

As part of the survey we also asked graduates whether they had registered with the SHA talent pools (only available in England). We were aware that the numbers registered were not representing the extent of the numbers still looking for jobs. The most common reason why graduates were not registering was because they are only able to register with the SHA that commissioned their training place and many graduates have moved back to their parents’ home, often in a different SHA area, for financial reasons. This meant that they were not able to access any of the opportunities being sent to them by their commissioning SHA because they were too far from where they are currently living. The CSP has raised this concern with NHS Employers and we are exploring ways to tackle this. We also asked why so few graduates were responding to the opportunities being offered by their talent pool – for example opportunities for bank work or short-term work. We found that as many registrants already had short term jobs they did not want to apply for another short term or bank post in the hope that their current job might become permanent and they would stand a better chance of permanent employment by staying where they were.

The phone survey has provided us with some excellent up-to-date information about the current employment situation, which is helping us with our campaign.
**ACTION POINT**

- Stewards are asked to continue to encourage any graduates you come into contact with to make sure they are registered with their talent pool to help them find suitable job opportunities, particularly as there have been several initiatives around the country to support new graduates which are being primarily publicised via the pools. It is also vital that graduates keep in touch with the CSP so that we can continue to monitor the situation and keep them informed.

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**ILL-HEALTH RETIREMENT & SICKNESS ABSENCE IN THE NHS: NEW ARRANGEMENTS**

NHS Employers and NHS trade unions have agreed a set of new arrangements to help manage sickness absence and ill-health retirement in the NHS. Full information, including the final agreement, can be found on the [NHS Employers website](http://www.nhs-employers.org).

The views of both NHS staff and employers have helped shape the final agreement, which is the result of two years of partnership working. The new arrangements, which form part of the overall main pensions agreement and will be covered by the Scheme's governance arrangements, came into effect on 1 April 2008 alongside changes to the [NHS Pension Scheme](http://www.nhs-employers.org) and aim to encourage a proactive approach to managing long term sickness absence and keeping staff in work wherever possible. Elaine Sparkes, CSP Senior Negotiating Officer and the Society's representative on the review, says:

“There is more that employers could be doing to support staff to return to work after a period of sickness. Improved Occupational Health services, including early access to physiotherapy and other appropriate interventions, is a key element, as is the need for employers to explore with staff all alternative options such as flexible working, reduced hours or redeployment. Many staff would prefer to keep working if possible as this option provides long-term health benefits as well as financial benefits. These new arrangements will hopefully support staff to continue working wherever possible, but also ensure that staff can easily access appropriate benefits should they need to retire on health grounds.”

CSP stewards and safety representatives will be assisted in their attempts to ensure members affected by sickness absence are appropriately supported through a new enabling agreement.

**Sickness absence - New Enabling Agreement**

As part of the review of ill-health retirement and sickness absence, NHS Employers and NHS trade unions also agreed an enabling agreement which identifies minimum standards for managing sickness absence and sits within the NHS Agenda for Change [Terms & Conditions Handbook](http://www.nhs-employers.org) (update of Section 14 and a new Annex Z). The enabling agreement will support CSP representatives in reviewing local sickness absence policies and, if changes are needed, ensure that minimum standards are set.

The enabling agreement also specifically refers to the need for staff to have access to rehabilitation, such as physiotherapy, and for this to be provided through dedicated resources. This recognises, in particular, the levels of sickness absence caused by musculoskeletal injuries within the NHS and the crucial role physiotherapy has to play in the effective treatment of such injuries.

**ACTION POINT**

- CSP stewards, safety representatives and managers are encouraged to work together to highlight the need for a properly resourced physiotherapy service for staff.
The new ill-health retirement arrangements in brief

- the introduction of a two-tier payment system for ill-health retirement benefit with those unlikely to ever work again due to ill-health receiving greater benefits than those who have a reasonable prospect of finding alternative work;
- new minimum standards for employers around managing sickness absence ensuring employers support staff who are off sick, offering them options including phased return, redeployment to another job and access to services such as physiotherapy and cognitive behavioural therapy;
- ensuring there are clearly defined roles for line managers making them responsible for recognising health problems at an early stage and ensuring appropriate steps are taken to minimise their impact, working closely with the staff member, HR, occupational health departments and senior managers.

Under the old system, staff received the same benefit regardless of whether or not they were likely to find alternative work. If they retired on grounds of ill-health, they were entitled to additional years of service (eg, their years of service were doubled if they worked in the NHS for between five and 10 years, and increased to 20 years if they worked for more than 10 years or increased by 6.66 years, whichever was greater).

Under the new arrangements, staff retiring under Tier 1 (those permanently unable to do their own job) will receive a pension based on the number of years they have actually contributed to the scheme (but it will not be reduced for taking their pension earlier than the normal pension age). Those retiring under Tier 2 (staff permanently unable to do any job) will receive a pension based upon the number of years they have contributed to the scheme, plus a two-thirds prospective service enhancement of those years until normal retirement age.

EXAMPLE: if someone with a normal pension age of 60 retires on ill-health grounds at the age of 45 after contributing to the NHS Pension Scheme for 10 years, their benefit will be based on 10 years' service for Tier 1 and 20 years for Tier 2 (10 plus two thirds of 15 - the number of years left until normal pensionable age). The number of years is then used to calculate the pension, eg 10/80ths of the final salary plus a one-off lump sum of three times the annual pension (Tier 1) or 20/80ths of the final salary plus a one-off lump sum of three times the annual pension (Tier 2).

For more information on the new arrangements, including the final agreement, see the NHS Employers website.

WELSH ELECTION SUCCESS!

Although a bit early to report on the Council elections and London mayoral election, we can report on an election success in Wales! Peter Finch, assistant director of CSP Employment Relations & Union Services, has been re-elected as Staff Side Chair of the Welsh Partnership Form, which has undergone a review of its workings and structures over the past few months. Pete’s presence as Staff Side Chair of the forum means a larger voice for the smaller unions, and greater opportunities for the smaller unions to get more involved in the issues.

TOP ACTIVIST RETIRES

Pauline Betteridge, regional steward for Yorkshire, retired at the end of March, but not before Stewards News persuaded her to take a trip down Memory Lane and share some of her experiences as a CSP steward with colleagues.

SN: Pauline, how long have you been a physio and how long have you been a CSP steward?
PB: I qualified in November 1966 and became a steward when the CSP introduced an industrial relations function (as it was known before the name change to Employment Relations and Union Services). This was in 1979 or 1980 when Phil Gray, the CSP’s Chief Executive, was then the director of industrial relations.

SN: What inspired you to be a physio and how did you get to be involved with the CSP as a steward?

PB: I always wanted to be a physio and did my own research on how to train and spent time in a hospital physio dept as my careers teacher knew little about it. I became a steward as I had been brought up to think unions were important and I wanted to see that justice was done and people were not disadvantaged.

SN: What has been the most pleasing aspect of your life as a CSP steward?

PB: Having the knowledge and skills to help others and also to see that my employers did not ‘get away’ with treating people badly; seeing AfC was implemented properly and that my colleagues were banded as we expected - basically we did quite well and without too much problem!

SN: What has been the most frustrating aspect of your life as a CSP steward?

PB: Managers who say one thing, do another and then deny that they did something different.

SN: What prompted you to become a regional steward, and did you enjoy it?

PB: There was no one else who would do it! At first it was difficult as the group was very ‘cliquey’, but I have thoroughly enjoyed it and hope I made it easier for other people to join in an established group.

SN: Have you ever had to deal with a strange query or situation as a CSP steward?

PB: Yes! “Can I give advice on how to defend a member who parked on yellow lines on the street because there was no space on-site and ‘I pay for a space’”? I said pay up!

SN: What do you think the most pressing challenge facing physiotherapy/the CSP is at the moment?

PB: The constant pressures to help meet targets while you know that you are not providing the best treatment for the patient.

SN: What's the hardest task you've ever faced as a CSP steward?

PB: Defending someone at a hearing who had breached the Business Conduct Policy and who was about to be sacked.

SN: What's been the highlight of your professional life as a physiotherapist and as a CSP steward/regional steward?

PB: To be respected for what I do in whatever role and know that people will come to me for help if they need it. It was not until this last few weeks that I fully appreciated what colleagues or stewards really thought of me and basically I have been stunned, then flattered.

SN: Reflecting on your long and rich experience as a steward, can you offer a final piece of advice to your CSP steward colleagues?
**PB:** Never forget, if you put forward a good reason for your request or for your opinion you will be respected for it. Do your research before meeting with managers and you usually win. Be firm but fair.

**SN:** What’s going to replace IR Committee papers on your reading list? And how are you intending to spend your time now you’re not treating patients and representing CSP members?

**PB:** In the short term, papers to prepare for the Paralympics in Beijing: I intend to continue my international involvement with archery for the disabled, which involves training physios and doctors how to select the correct disability category for archery and also to maintain a worldwide database of disabled archers and classifiers to facilitate fair competition at Paralympics, World & Regional Championships. Also, I’ll be helping to support a frail elderly mother stay in her own home when she is more than 200 miles away.

**SN:** In the film version of your life, who gets to play you?

**PB:** ???!!! No comment!

### STEWARD’S TRAINING

#### 2008 Stewards’ Induction Course Programme

Places exist on the following residential stewards’ induction courses. You can obtain an application form from Sam Kyriacou on 020 7306 6679 or email kyriacous@csp.org.uk; or you can download a form from iCSP.

- 12-15 May – Hillscourt, Birmingham (R3)
- 24-27 June – Hillscourt, Birmingham (R4)
- 8-11 July – Quorn Grange, Leicestershire (R5)
- 12-15 August – Hillscourt, Birmingham (R6)
- 30 September-3 October – Quorn Grange, Leicestershire (R7)
- 25-28 November – Hillscourt, Birmingham (R8)

#### Forthcoming Regional Training Days

(for up-to-date information on venues and training topics, please contact your SNO)

- **Cheshire & Mersey**
  - 3 July
  - 2 October

- **East of England**
  - 3 July
  - 6 November

- **East Midlands**
  - 24 June
  - (Pleasley Landmark)

- **London**
  - 23 June
  - 29 September

- **North East**
  - 26 September
  - 1 December

- **North West**
  - 9 July
  - 3 October

- **South East Coast**
  - 26 June
  - 8 October

- **South West (north)**
  - 3 June
  - 7 October

- **South West (south)**
  - 25 June
  - 16 October

- **Scotland**
  - 15 & 16 May
  - (2-day, provisional)

- **Wales**
  - 25 June
  - 15 October
NHS PAY OFFER
CSP CONSULTATION ON THE 3-YEAR DEAL

The Government has offered a 3-year pay deal:

- 2.75% in 2008-09
- 2.4% in 2009-10
- 2.25% in 2010-11

The CSP’s consultation on the pay offer runs from Wednesday 23 April-Tuesday 13 May.

The CSP’s Pay Reference Group has unanimously agreed to recommend members **reject** the 3-year pay offer.

CSP members can vote on the pay offer by using the online survey on the CSP website. To register your vote, you will need your CSP membership number. Please vote by visiting:

[http://www.csp.org.uk/director/workplaceissues/pay08.cfm](http://www.csp.org.uk/director/workplaceissues/pay08.cfm)

(the consultation will open on **Wednesday 23 April**, and will run to **Tuesday 13 May**).