

NHS Providers briefing on NHS pay

NHS Providers is the membership organisation for the NHS hospital, mental health, community and ambulance services that treat patients and service users in the NHS. We help those NHS foundation trusts and trusts to deliver high-quality, patient-focused care by enabling them to learn from each other, acting as their public voice and helping shape the system in which they operate. NHS Providers has all trusts in England in voluntary membership, collectively accounting for £124bn of annual expenditure and employing 1.5 million people.

This briefing outlines the importance of prioritising the announcement of the 2024/25 pay award for NHS staff and explains the pay review process in England, with an overview of the:

- NHS Pay Review Body (NHSPRB), covering most NHS staff
- Doctors' and Dentists' Remuneration Body (DDRB)
- Senior Salaries Review Body (SSRB), covering very senior public sector managers, including in the NHS.

If you have any queries about the content of this briefing, or require further information, please contact: publicaffairs@nhsproviders.org.

It is essential to prioritise the announcement of NHS staff pay awards for 2024/25

- The government must prioritise the announcement of fully funded public sector pay awards before the summer recess to avoid staff and their employers waiting until September, five months into the financial year, to receive their pay rise.
- An announcement on public sector pay is normally made by government, based on the recommendations made by the independent pay review bodies, ahead of the summer recess in July. However, the announcement is meant to be made earlier than this, in line with the new financial year.
- The 2024/25 pay round follows widespread industrial action in the NHS. It is crucial that industrial relationships are re-built and maintained to avoid the risk of further action in the near future. Delays are demoralising to staff, result in complex administration of backdated pay and pension contributions, and hinder trusts' ability to undertake effective financial planning.

How the NHS pay review bodies work

Process and timelines

The health and social care secretary sets out the remit for the NHS pay review bodies in that year's pay round, after which they gather evidence to inform their recommendations. They are independent bodies and can make additional observations in their report at their discretion. The 2024/25 remit letters for each review body are available via the following links: [NHSPRB](#), [DDR](#)B and [SSRB](#). Members of the review bodies are selected by ministers and there are no trade union representatives who sit on the bodies' panels.

The Department of Health and Social Care (DHSC), HM Treasury and NHS England each submit evidence for consideration by the review bodies alongside stakeholders. This is usually in the January before a new financial year begins. Oral evidence is then heard, usually between February and March, with the report then submitted to the Prime Minister and relevant ministers.

The pay review bodies' reports, including their recommendations, are published after the government announces its final decision on NHS pay awards. In 2023, the announcements related to the DDRB and SSRB were made on 13 July, meaning the awards were announced well into the new financial year. In 2022, the announcement was made [on 19 July](#). Pay awards that are not fully funded by new government funding place considerable additional financial pressure on already stretched NHS budgets at both a national and local level. In the past, to avoid a direct impact to patient services, the NHS has had to limit longer-term transformational funding to finance this recurrent cost. This, however, will still have an impact on patient services and outcomes in the long term.

There are three pay review bodies relevant to the NHS. How each works is set out below.

NHS Pay Review Body (NHSPRB)

The NHSPRB's remit covers the staff on the Agenda for Change (AfC) pay scale, who make up the majority of NHS staff. This includes nurses and midwives, porters, cleaners, staff who work in IT and administration, most managers, paramedics, occupational therapists, physiotherapists and consultant nurses and midwives. The AfC pay scale is split into bands 1 to 9, with band 8 further subdivided into bands A to D. The NHSPRB's remit extends to England, Scotland, Wales and Northern Ireland.

Band 1 has been closed to new entrants since December 2018, which marked the start of a [three year pay deal](#) which was agreed with unions and uplifted starting salaries across all bands. AfC staff are not currently on a multi-year pay agreement, which means an annual uplift recommendation is requested by the government from the review body.

The NHSPRB's 2023/24 report did not contain recommendations, as the revised pay offer made by government in March 2023 was accepted by the NHS Staff Council in May 2023, ending the industrial action by AfC staff that started in December 2022. As part of this deal, the government committed to a number of non-pay elements, including a review of the NHSPRB and its processes, and exploring the feasibility of a separate pay spine for nursing. NHS Providers is concerned that progress has been slow on the majority of these non-pay commitments. We also submitted a [response](#) to DHSC's call for evidence on a separate pay spine for nursing, which closed in May 2024. The government had not yet responded to this call for evidence when parliament was dissolved ahead of the General Election. We do not support the proposal of a separate pay spine for nursing, but recognise there are wider concerns to address that affect all staff under AfC terms and conditions.

The trade unions representing AfC staff do not have confidence in the NHSPRB's ability to address longstanding structural issues within AfC and, therefore, [published](#) a joint position statement for the 2024/25 pay round, instead of formally submitting evidence to the NHSPRB.

You can find out more about the NHSPRB [here](#), and our 2024/25 submission to the body is [here](#).

Doctors' and Dentists' Remuneration Body (DDRB)

The DDRB's remit includes consultants, junior doctors, specialty and associate specialist (SAS) doctors, salaried general medical practitioners and the pay element of dentists providing NHS services. The DDRB's remit extends to England, Scotland, Wales and Northern Ireland.

The BMA's junior doctor committee announced it would not submit evidence to the DDRB in 2024/25, due to low confidence in the DDRB's independence. The BMA's GP, SAS doctor and consultant committees did submit evidence to the DDRB in 2024/25.

SAS doctors represented by the BMA accepted a revised pay deal from government in June 2024. This included a pay uplift for the 2021 open contracts and the 2008 closed contract¹ alongside measures to improve career progression and improve working conditions for locally employed doctors (LEDs), who are employed by NHS trusts instead of being on national contracts. This revised pay deal is in addition to any recommended uplift from the DDRB for 2024/25.

¹ The 2021 SAS contracts are active and open to all new and existing SAS doctors. The 2008 SAS contract is closed and only remains in place for SAS doctors who have not transferred to the new 2021 contracts.

The revised deal accepted by the BMA's consultants committee in April 2024 included non-pay elements that outlined reforms to the DDRB. These will also affect other doctors under the remit of the DDRB and we would welcome swift progress on implementing these changes ahead of the 2025/26 pay round. It will be important to assess how these changes align with those agreed for the NHSPRB as part of the AfC deal in early 2023.

You can find out more about the DDRB [here](#), our 2024/25 submission is available [here](#).

Senior Salaries Review Body (SSRB)

The SSRB's remit covers senior healthcare as well as other public sector staff, including holders of judicial office, senior civil servants, senior officers in the armed forces, police and crime commissioners and chief police officers. The SSRB's remit extends to England, Scotland, Wales and Northern Ireland, as well as the Mayor of London and the Chair of the Greater London Assembly.

NHS Providers submits evidence to the SSRB on behalf of our members, who as very senior managers (VSMs) in the NHS fall under the SSRB's remit. The SSRB makes recommendations for executive directors who are members of foundation trust and trust boards, including chief executives. Unlike uplifts recommended by the NHSPRB and DDRB, any recommended uplift for senior NHS leaders is locally funded.

The SSRB does not make recommendations for non-executive directors (NEDs), including foundation trust and trust chairs. Guidance on NED remuneration was last [published](#) by NHS England in November 2019. However, we would like to see [this guidance reviewed](#) to reflect changes to the role of NEDs and the economy in the last five years.

You can find out more about the SSRB [here](#), and our 2024/25 submission is available [here](#).