

REMUNERATION AND SALARY SCALES

The two key elements of the negotiated offer are a significant revision of the remuneration scale and an average increase of approximately 18% (compounded) across two years.



This is in two steps and individual increases vary by category and annual step.

This SECA is the result of five months of bargaining and represents an investment of around \$36m* into STONZ members' income.

The key elements of the remuneration changes are:

- The removal of the lowest step on the scale
- The alignment/re-basing of hourly rates across the scale
- The removal of the non-service increment step.

The key elements of the pay offer are:

- Two steps, the first averaging 14% across steps and categories on 26 February (backdated) the second averaging 3% across steps and categories on 24 February 2025.

Based on STONZ membership survey data this means approximately 97% of members will receive a pay rise and 90% will receive a pay rise of 14% or higher.

As an averaged pay increase, and excluding pay equity and parity deals, it represents one of the largest pay increases to a single health workforce in the last decade. However, to do this, it requires a rebalancing of the remuneration scale we inherited. Historically it has evolved in ways that have created significant disparities within our workforce.

Fixing these disparities has meant an application of pay increases that vary for individual members by category, steps, and demographic change. And for some members it does represent a zero pay increase and where this has occurred we have negotiated a grandfathering/income protection clause.

INCREASE OF RURAL SALARIES BY 5% AND UPDATE OF RURAL HOSPITAL LIST

Members have told us that the current urban and non-urban scales are not reflective of the change in where people live and how RMOs serve our communities across Aotearoa.

The aim is to increase base salaries for all RMOs regardless of where we work, and then create an allowance for rural hospitals.

As part of these negotiations, we have removed the Urban/Non-Urban pay differential but have added a 5% allowance for RMOs working in Hospitals that are classified as Rural. For someone working in a C category, step 3 an additional 5% roughly equates to \$7,266 and is more than the previous loading which was 4%.



TE ORA MEMBERSHIP FEES

Currently, the Te ORA membership is capped, Te Whatu Ora has agreed to review this should there be any fee increases, to ensure members are not disadvantaged.



LATE PUBLICATION OF ROSTERS

80% of RMOs do not receive any payment when rosters are published late.

STONZ has negotiated that all RMOs whose roster is published without 28 days' notice will receive \$75 per day that the roster is late. This includes all RMOs on the roster not just those who have long days within the notice period.

**Does not include rosters which are solely written/managed by RMOs or cover notice periods for relief rosters.*

NEW COLLEGE OR COUNCIL RELATED LEAVE

With the growing number of RMOs being asked to attend or sit on College or MCNZ meetings we have added that RMOs attending these shall be entitled to paid special leave, which is separate from Medical Education or Annual Leave.



MOVING DISTRICTS



Where RMOs are transferring within Te Whatu Ora districts there is a need for notice to be given. STONZ has agreed 3 months is not unreasonable given this was the previous practice. There will still be an ability to negotiate this and an **expectation that a transfer can occur in lesser time**. There is also an exception for college appointed positions.

RUN DESCRIPTIONS

There are 3 main changes to the run description clause.

- ▶ It has been STONZ experience that there are still runs without run descriptions, or that haven't been reviewed any time recently. We have added a clause to acknowledge this that outlines a commitment to work with Te Whatu Ora to help address this. With a goal to have this all in place by the end of this collective agreement.
- ▶ It has also been added that RMOs allocated to a CBA shall have 3 months' notice of the location of this, if it is not a reasonable commute.
- ▶ Agreement that run descriptions should include the roster or the details of the roster pattern.

IT'S NOT ALWAYS PRACTICAL TO DRIVE

Adding to the transfer clause that where it is reasonable to do so Te Whatu Ora will cover the cost of moving a car (currently not an option).

INTERPRETATIONS Update to simplify the definition of House Officer to align with the MCNZ definition where a House Officer can step up to a SHO position after one year. And don't have to wait for 2 years to step up to a Registrar if you're ready.

NEW CROSS COVER APPENDIX

With this new schedule the parties are acknowledging some of the issues outside of remuneration and outlines some proactive practical steps districts and departments need to make where there are high levels of vacancies.

HIGHLIGHTING MAXIMUMS ARE MAXIMUMS, NOT A GOAL

Often Districts state that STONZ members must work to the maximum in the collective – this paragraph clarifies our position, which is that these are a maximum and rather, rosters should be developed as a **best fit for RMOs and the service**, not default to the maximums allowed in the Collective.

ADDITIONAL EXAM ATTEMPTS

Sometimes there are extenuating circumstances that mean another exam attempt should be covered. We have added new wording to acknowledge that in some circumstances, additional attempts at sitting a vocational exam may be required.

HAVE TO STEP DOWN TO A HOUSE OFFICER POSITION?



This acknowledges where RMOs as part of training have to step back down to House Officer or SHO roles.

We have negotiated that where this occurs, Registrars will continue to be paid on the Registrar scale for that period.

BULLYING & HARASSMENT

Update to the Bullying and Harassment clause to clarify Te Whatu Ora's statutory requirements and responsibilities. It also clarifies expectations around the principle that bullying, and harassment is not condoned by anyone.

PROJECTS

- ICU Roster Project
- Impact of SHO Roles
- More Work to do on RMO Remuneration
- Impact of Loss of Accreditation
- Meals Pilot Update
- Completion of Training and SMO Positions



**This document is a highlights summary only, please see our website to view the new SECA in full.*