A task force of stakeholders in the Health Sector met to study the Job Evaluation Report, the Circular Standing Instruction No. 2 of 2003 and to make proposals to Government. It was mutually agreed that the implementation of the Circular for health workers is temporarily suspended pending a clear articulation of the concerns of the U.M.W.U, after wide consultation with all stakeholders in the Health Sector.

Concerns raised included lowering of entry salary points and scales for various cadres, merging of grades and fears that Lunch Allowance had been abolished. Negotiations between the representatives of U.M.W.U and the Ministry of Health Workers' Response to the Circular Standing Instruction No. 2 of 2003.

At the risk of failing to achieve equity, which had been the key objective of the Job Evaluation, the Ministry of Public Service chose to focus on the minor administrative issues and therefore, recommended to Cabinet, the Single Spine assimilating pay levels across occupational categories and computerisation of the payroll.

The advantage of the Multi-Spine Salary Structure is that it is a flexible framework for addressing pay-related career issues as they affect the various occupational categories. Another advantage is that selective awarding in the Multi-Spine Salary Schedule will not cause distortions. This means that the Multi-Spine Salary Structure is the most ideal for ensuring equity. It is also advantageous for the Health Service where selective awards are inevitable.

The salary compression ratio is the relationship between the highest and the lowest paid points in the Public Service. Until then the Head of State had been used as the highest paid point yet that salary and that of Public Service Employees are not determined using the same mechanism. The objective was to refer to using the Head of the Public Service as the highest paid point.

The conditions of the Job Evaluation exercise, which did not become apparent until later to overcome administrative difficulties being experienced in the Ministry of Public Service, related to the existing Multi-Spine Salary Structure. The Multi-Spine Salary Structure is where each Sector in the Public Service such as Health and Teaching, has its own schedule. Whereas in the Single Spine Salary Structure, all sectors are lumped together using one schedule.

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Response of health workers to the Job Evaluation Report 2000

One of the Terms of Reference for the Ministry of Public Service team that carried out the Job Evaluation 2000 was consultation and participation of stakeholders. Unfortunately, all efforts by various stakeholders in the Health Sector to point out right from the outset when the instrument was being developed, the above irregularities, their concerns were totally ignored. Among these stakeholders were key ones such as the Health Service Commission, the Mulago Hospital administration, the Uganda Medical Association and the Uganda Medical Workers Union.

Through, on the whole, health workers scored highest, some cadres such as the nurses, scored unreasonably low. The Uganda National Association of Nurses and Midwives are of the view that there was inadequate sensitisation of nurses regarding the objectives of the Job Evaluation especially as it coincided with a retirement exercise carried out by the same Ministry of Public Service.

A key objective of the Job Evaluation had been to eliminate salary structure distortions which had been created by a number of factors including selective awards given to the Medical and Allied Health Workers and the Teachers. Another contributory factor was the introduction of monetisation of benefits and another was the need to maintain a reasonable salary compression ratio.

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Health Workers' Response to the Circular Standing Instruction No. 2 of 2003.

On 7th July 2003 the Circular Standing Instruction No. 2 signed by the Permanent Secretary of the Ministry of Public Service was released and disseminated countrywide. In the Circular, were new salary scales and salaries based on a Single Spine Salary Structure. An outcry was immediately made by health workers all over the country and the Uganda Medical Workers Union (U.M.W.U.) threatened to initiate a strike if the concerns were not addressed.

Concerns raised included lowering of entry salary points and scales for various cadres, merging of grades and fears that Lunch Allowance had been abolished. Negotiations between the representatives of U.M.W.U and the Ministry of Public Service began shortly after. The employee side have since been joined by the Uganda Medical Association, while the Government side now includes representatives of the Office of the Solicitor General, the Ministries of Labour, Finance and Health and the Health Service Commission.

It was mutually agreed that the implementation of the Circular for health workers is temporarily suspended pending a clear articulation of the concerns of the U.M.W.U, after wide consultation with all stakeholders in the Health Sector. A task force of stakeholders in the Health Sector met to study the Job Evaluation Report, the Circular Standing Instruction No. 2 of 2003 and to make proposals to Government.

Finally, the U.M.W.U presented the Report to Government as the position of the Health Workers.

Recommendations of the Health Workers as presented to Government

1. There is need to review the Job Evaluation Exercise to cater for peculiarities of Health Workers.
2. Salary entry points for the various cadres in the Health Service should be raised as recommended in the Job Evaluation Report 2000 and not lowered as had been done in some cases, by the Circular Standing Instruction No. 2 of 2003.
3. Health Workers should be given duty facilitating allowances such as Responsibility for Life, Risk Allowance and Overtime/On-call Allowance.
4. Basic salaries should be raised to more acceptable levels.
5. The Negotiating Machinery that had been recommended by the Job Evaluation Report 2000, should be established to facilitate on a more permanent basis, negotiations between Health Workers and Government.
6. The Health Service Commission should be represented on the Job Evaluation Implementation Team and theJob Evaluation Appeals Committee again, as had been recommended in the Job Evaluation Report 2000.
7. The Multi-Spine Salary Structure is the most ideal for Health Workers. However, if the Single Spine Structure is to be adopted, Health Workers should be placed among the Special Category as to allow for selective awards with out creating unwarranted distortions in the salary structure.

Conclusion
As negotiations between health workers and Government continue, it is important for all concerned to remember that in addition to good health policies, a quality national Health Service requires a well motivated Human Resource.