

## Guidance on applying the Welsh GMS contract 2024/25 staff pay uplift

### Outcome of negotiations: investment and requirements

1. The tripartite 2024/25 GMS contract agreement between GPC Wales, Welsh Government and NHS Wales represented a total financial uplift to the GMS contract of £52.1m, backdated to April 2024. This funding should be paid to practices in the February 2025 pay run.
2. This included funding to reflect the DDRB recommendation of a 6% pay uplift to contractor and salaried GP pay, and to extend this pay uplift to all practice staff for 2024/25.
3. The additional investment of the non-recurrent £23m 'practice stabilisation payment' recognises the additional costs of statutory wage increases which practices would already have been paying from 1 April 2024. Therefore, in our view, the uplift requirement is now funded for the vast majority of practices.

### Requirements

4. As required by the Statement of Financial Entitlements <sup>1</sup> (SFE), a 6% increase “*must be applied to relevant staff’s pay after the statutory increase for the national minimum and living wages has been applied*”. We have always supported fair pay for all employees, particularly those on lower incomes.
5. Practices that have already given staff an in-year pay increase must uplift that increase to 6%, if it was previously a lower figure, and applied to the relevant payable rate on 1 April 2024. This would include staff who were in post on that date but have since left; practices should make reasonable efforts to contact individuals in those circumstances.
6. New staff who started after 1 April 2024 are not covered by the SFE but may be subject to specific clauses in individual contracts, and practices will need to take these into account and exercise judgement.
7. Practices will be required to complete a self-declaration to their Health Board, as in previous years, to confirm that they have paid all eligible staff a 6% pay rise.

### How to apply

8. While the quantum of funding that each practice will receive will vary, it may be useful to illustrate some case studies of how the uplift should be applied:

#### Case study A

*Admin Assistant A on a pay scale equating to National Minimum Wage received a 9.8% uplift on 1 April 2024. This reflected the statutory increase required to comply with the national minimum wage.*

*The practice will now need to add an additional uplift of 6% to their salary, backdated to 1 April 2024. The 6% must be calculated from the new hourly rate after the statutory wage increase.*



**Case Study B**

*Receptionist B was working at the practice on 1 April 2024 and received a 9.8% uplift from that date considering the statutory National Living Wage increase. No further interim uplifts were applied by the practice over and above statutory NLW requirements.*

*Receptionist C left the practice in September 2024 for a new role. This means that they are due an additional 6% salary for the period of employment between 1 April 2024 and the date of cessation of employment. The practice will now need to contact them in an effort to pass on the remaining quantum of differential pay that they would have received during their period of employment.*

**Case Study C**

*Office manager C received a pay uplift of 5% in April 2024 to adjust the pay band differential with other members of the admin team who had received National Living Wage increases.*

*The practice will now need to calculate and pay the costs of the additional 1% adjustment to Office Manager C's pay, based upon the original hourly rate, and backdated to 1 April 2024.*

9. Having uplifted all staff by at least 6 % (and some by more due to NLW legislative duty being applied prior to the mandated 6%), practices will then need to determine whether further adjustments and uplifts need to be made to avoid the 'concertina effect' of band inflation.
10. Any additional uplifts made, in order to maintain differentials of pay scale between staff groups are discretionary to the practice and not mandated via the SFE. It will be for individual practices to determine these uplifts. However, we would advise that each practice has a clear, transparent and non-discriminatory mechanism to determine how this is done.

*Please note that this document is for guidance purposes only and does not constitute financial advice. Practices may wish to obtain this from their accountancy provider relating to their own individual circumstances.*

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<sup>1</sup> Directions to Local Health Boards as to the Statement of Financial Entitlements (Amendment) Directions 2025 [www.gov.wales/sites/default/files/publications/2025-02/directions-local-health-boards-statement-financial-entitlements-amendment-directions-2025.pdf](https://www.gov.wales/sites/default/files/publications/2025-02/directions-local-health-boards-statement-financial-entitlements-amendment-directions-2025.pdf)