

pay parity The same pay for the same job across different employers/workplaces

pay relativity the relationship between pay rates for various roles/work

Gap between the average earnings of women compared with men
gender pay gap

Same pay for the same job (no differential based on gender) **equal pay**

pay equity The same pay for work of equal value

The same rights and opportunities **gender equality**

Pay and employment equity Pay, conditions, experiences in the workplace and access to jobs at all levels are not affected by gender



November 2020

MERAS to file in the Authority under the Equal Pay Act Amendment Act

MERAS is filing in the Employment Relations Authority under the Equal Pay Amendment Act, which came into effect on 6 November.

We don't have to file in the Authority under transitional provisions of the Act. However, MERAS has raised concerns about processes occurring outside of the Terms of Reference between the unions and the DHBs, including the process to agree on proposed comparators.

Further, the transitional provisions require the employer to notify all "affected" employees within 20 days of the Act coming into force giving them the opportunity to opt out of the claim.

The DHBs will be sending letters to all their employed midwives. **Note: Union members do not need to respond to the DHB as you are covered by the existing Midwifery claim.**

Further stage of work assessment agreed

Meanwhile, the unions have agreed to a further stage of work assessment to validate the original assessment process.

The original process was undertaken in August by two separate assessment committees of union and DHB panellists who were allocated a number of different roles to assess across both the Nurses claim and the Midwives claim. Elizabeth Winterbee, Karen Gray, Jill Ovens and Caroline Conroy participated on the panels from MERAS.

Because of Covid, the assessment process was undertaken by Zoom, so there was no travel involved and participants could score the profile data the day before. However, training had to be delivered remotely via a webinar and written material. This meant there was limited ability for participants to discuss, clarify, and agree on how the assessment criteria would be used.

The time commitment was substantial as four profiles were assessed each day over more than a week. The pre-reading and individual assessments took around 1.5 hours for each profile.

The assessment tool used has a 1-5 scale on 12 factors covering skills, responsibilities and work demands. This meant it was often difficult to distinguish between scores for different roles, including both the claimant and comparator roles.

We have agreed to redo a sample of the midwifery roles and comparator roles using a tool called EJE (Equitable Job Evaluation) that has the same factors, but weights the knowledge and problem-solving skills with a broader scale allowing finer differentiation.

It has also been agreed that the Nurses and the Midwives claims will be dealt with separately from now. Having said this, we are meeting on 24/25 November to establish "rules" or "guides" to be applied consistently across both claims, such as working conditions for lone workers and exposure to bodily fluids.

There has been a suggestion that some of the participants' in-depth knowledge of the claimant roles is jeopardising the process. However, all participants in the work assessment process have greater or lesser knowledge of the roles, including the male comparator roles, and everyone brings their own biases to the process.

We have agreed on a robust review process to ensure that assessments levels and rationales between the teams are consistent and the rules or guidelines established are consistently applied. Leila Sparrow will represent the unions on the review team for the Midwifery claim.

Jill Ovens, Co-leader (Industrial)

Caroline Conroy Co-leader (Midwifery)