



# CEC NHS Statement 2017



# GMB CONGRESS 2017

## CEC STATEMENT: UPDATE ON THE FUTURE OF THE NHS



### SUMMARY

GMB continues to have *no confidence* in the Tory Government management of the National Health Service in England, or in its commitment to preserve the NHS as a nationwide service free at the point of delivery.

It is very much the case that a considerable number of the electorate in June 2016 voted to save the NHS at the expense of the UK's membership in the European Union. We were told that there is an enormous amount of money that the UK sends to Brussels which is urgently needed at home. It is not only GMB members who care about the state of the NHS, but also many on all sides of the political spectrum who do so too. The big red bus used in the Brexit campaign told us that this money must be spent on funding the NHS, and this is a promise that the Leave camp *must* deliver on.

GMB continues to call for the repeal of the Health and Social Care Act 2012 which dismantles and makes possible the privatisation the NHS. Billions of pounds of NHS Services have already been outsourced to private companies throughout the largely unaccountable system of NHS Trusts. GMB does not believe that this is the best use of taxpayers money, and that the profit motive has no part in healthcare.

Services are deteriorating under Tory policies – treatments are being rationed, waiting times are up, A&E is in crisis and NHS staff morale is at an all-time low. This has not changed since the Coalition government of 2010-2015, and has intensified under the majority Conservative administration.

NHS staff are bearing the brunt of austerity measures within the sector while private providers prosper. The recent recommendation on pay from the pay review body has been denounced by GMB as miserly and derisory. We are once more in a position to have to mount a campaign for “fair pay” for NHS workers.

GMB's strength in our GMB NHS workplaces is in our numbers and density, and we continue to generate activities to support GMB NHS Workplace Reps who are working continuously to organise, represent and consolidate GMB membership across the country.

Our NHS is being attacked and it's in the interests of our members and their families that the GMB continues to build and strengthen the NHS campaign

- against the Government's privatisation and cuts agenda
- to champion a publicly-run NHS, and to effectively recruit, organise and represent NHS workers in the GMB.
- to retain a NHS for future generations that is free at the point of use and there for us: cradle to grave
- continue to generate activity and mobilise support from the public for the NHS and for NHS workers.

### THE NHS UNDER THE TORIES

In 2011, the CEC warned that the Coalition government reforms“ threatened to dismantle the NHS on a scale never seen before. The 2014 CEC statement on the NHS was targeted at gearing up for a general election, in which we were calling for a Labour Government to return and reverse the damage that the Coalition had inflicted on the service.

Since then, a majority Conservative government was elected and is now in power. This Tory government has deepened the crisis, and reneged on promises made in the general election of 2015.

NHS England Structures have been introducing proposals on Sustainability and Transformation Plans (STPs) and have been creating vast new layers of bureaucracy; pressing ahead with an internal market for healthcare; paving the way for wholesale privatisation; and watering down local democratic decision making. All their policies are designed to break up and privatise the health service, and once again NHS staff have been made to bear the brunt of a vast top-down reorganisation, and attacks on their hard fought terms and working conditions. STPs are and will be the footprint for further privatisation of the NHS.

## **UNDERFUNDING THE NHS**

The claim that NHS funding would be protected has also been exposed as a lie. Everyone who works in the NHS knows there is a funding crisis. Staff numbers, including nurses, continue to be axed, hospitals are operating at dangerous capacity, and NHS Trusts up and down the country are facing financial turmoil- putting patients, services and staff at risk. The narrative increasingly becoming the norm is the underfunding of the NHS. Hospital financial targets not being met due to unrealistic efficiency targets. Hospitals being put into special measures, hospital services being downgraded or closed down. It bears to be repeated that this is a toxic mix to pave the way for the market to come in and take its lion share.

PFI debt is crippling NHS services and the ability for some trusts to remain solvent is becoming impossible. We need a concerted effort to either renegotiate PFI debt or for government to step in and support trusts facing difficulty in balancing their books. The consequences otherwise are patients will suffer. PFI may have led to one of the largest hospital building programmes, shiny new hospitals are little use when PFI debt is crippling NHS finances. If PFI debt is not reviewed and bold alternatives not found PFI legacy will lead to biggest NHS hospital and bed closure programme in the next decade and the closure of beds has already started.

The Spring Budget pledge of 2017 promised to immediately inject much needed funding into social care. This is welcomed, but we must hold the government to the proper allocation of the funding. This funding should serve the purpose of also relieving strain on the NHS with patients being discharged properly into the right care facilities, instead of having to wait in hospitals.

## **PAY**

GMB members know this; austerity is an ideological cloak which hides privatisation.

If having to endure a pay cap of 1%, and working within an under-staffed health service meant that it could keep all aspects of the NHS public, then this could be an easier pill to swallow. What we do know is that those doing the caring are seeing their wages being out stripped by the new layers of management and outsourced consortia; by those who have nothing to do with the saving of lives or the quality of medicinal care.

The NHS Pay Review body has made a recommendation of 1% for pay 2017/2018 - within the "cruel" pay restraints imposed by the government. The Health Secretary's derisory decision was made just days after inflation jumped to 2.3% in March, further squeezing NHS workers' living standards. Imposing a 1 per cent settlement is an insult to our selfless NHS staff and other public sector workers – who keep us safe day in, day out.

Research conducted by GMB has found that public sector workers have lost out significantly since the 1% pay constraint when compared to inflation rises, bills, and private sector counterparts. GMB analysis has revealed that without a change in policy, workers can expect average real terms pay cuts, some running into tens of thousands of pounds:

- Hospital porter: lost £7,285 since 2010 and set to lose a further £2,394 by 2020 (total loss 2010-20: £9,679)
- 999 call handler: lost £8,646 since 2010 and set to lose a further £2,617 by 2020 (total loss 2010-20: £11,263)
- Qualified residential care worker: lost £8,624 since 2010 and is set to lose a further £3,085 by 2020 (total loss 2010-20: £11,709)

- Staff nurse: lost £14,572 since 2010 and is set to lose a further £3,788 by 2020 (total loss 2010-20: £18,360)
- Midwife: lost £18,011 since 2010 and is set to lose a further £4,691 by 2020 (total loss 2010-20: £22,702)

This government has also failed on an important election promise in its Five Year Forward View publication from 2014 that NHS staff pay will have to stay in line with private sector pay as the economy recovers, in order to recruit and retain staff.

For this reason, GMB has launched the Public Sector Pay Pinch Campaign to bust the pay cap in the NHS and across the public sector.

## **PENSIONS**

The government has further reduced the potential value of pensions for NHS workers with the introduction of a cap on exit payments over £95,000. On the outset this seemed like a common sense approach to curtailing massive redundancy packages for the top earners in the public sector. This policy however, will affect the pensions of a whole strata of workers in the NHS, as their pensions will be included in the exit package. For most long standing workers in the NHS who have built up a pension, this policy will most certainly strip out their pot. This a backdoor way of ransacking the public sector pension fund, our members deferred earnings, which the Coalition government were unable to do in 2011.

## **BREXIT AND THE NHS**

Many of the voters who chose for the UK to leave the EU did so under the belief that money 'sent to Brussels' would be put back into the NHS. Immediately the Leave campaign backtracked and even scoffed at this idea, despite the sticker on their bus saying so. It goes to show however that citizens of the UK care about the NHS immensely and want that money promised to go into funding it. The likes of Johnson and Farage should be held accountable for this promise to the UK electorate; if the money does not go into the NHS funding then GMB and the electorate at large should insist that they are unfit for any governing office, present or in the future.

The uncertainty surrounding the Brexit negotiations and the status of EU nationals in the UK is a cause for concern for the running of the NHS. OBR reports from early 2017 shows that overall, 5% of the workforce in the NHS are EU (non UK) nationals. This percentage is higher in London where it reaches closer to 10%. Not only should we be concerned for the status of our EU national colleagues working within the NHS, but for the numbers of workers who are already leaving the NHS.

Figures have shown this year and since June 2016, a significant drop in EU national nurses joining the NHS and a significant increase in EU national nurses leaving work in the NHS. Nurses joining the NHS from the EU have also fallen, with 96 joining in December 2016, compared to 1,304 in July. If numbers of trained workers in the NHS fall, then we will have a significant issue on our hands. According to a UCAS report, the most notable decrease in applicants is nursing, falling by 23%, with English applicants (over the age of 19) decreasing by between 16-19%. This clearly shows that more has to be done by government to attract more applicants into training for key roles in the NHS. Scrapping nurses bursaries does not encourage school leavers into working for the NHS, and making it their career without burdening them with debt they may have to pay off for years.

Other elements of concern in the previous CEC statement on the NHS, was the prospect of the TTIP deal coming to fruition between the EU and the US. There was fear that this trade deal would open the door to significant privatisation in the NHS. With Great Britain exiting the European Union, and the change in government in the United States, this particular deal appears dead in the water. Whatever is left for the UK to barter with through these negotiations, and beyond, will be left to this government, and they should be held accountable. However we must be vigilant to oppose any trade deals which may negatively impact our NHS in such a way.

## **EMERGENCY SERVICES IN CRISIS**

The Tories have continued the appalling legacy of the Coalition government, with A&E targets failing miserably. In December 2016, waiting times rose again breaking records for waiting times of 12 hours. This is 3 times the target time of being seen, treated, and discharged in A&E departments. Our elderly are waiting in corridors to be admitted on wards because community services are still in meltdown. Dozens of A&E departments across the country face closure or downgrading.

Our Ambulance service members are being pushed to the brink, regularly working beyond their shift ends and having to respond to calls within unrealistic times. This is only being exacerbated by the outcomes of STPs which have affected routes and resources, causing chaos particularly in the Midlands. Whilst it is still only regarded as an 'essential' service by the government, GMB firmly believes that our Ambulance service should be regarded as an emergency service just like the Police, and Fire service.

## **GMB'S POSITION**

GMB believes that we would only ever support reform that retains the founding principles of the NHS: free at the point of use, from the cradle to the grave, provided by the State.

At an international level, GMB will take a leading role in opposing any future trade deal which may negatively impact the service of the NHS, in the same vein as we did against TTIP – CETA possibly being the new incarnation of TTIP.

GMB continues to engage in visible activism, such as the March for NHS in 2017, and working together with the TUC and sister unions. Much more needs to be done and the need to continue to build links with local communities who are standing up and fighting to retain their local NHS services is essential if we are all going to retain a NHS for future generations.

GMB will continue to campaign for the removal of reserved public contracts for mutuals – effectively privatisation by the back door in the health and other public services, and we are sceptical of the use of STPs as ways to cost cut. PFIs have been a disaster for the health service and are not a credible form of financing the public sector.

GMB will be fighting the Government's insulting pay cap and the blatant undermining of the current collective bargaining arrangements which needs to be the key campaign in every workplace across the NHS.

Organising and developing campaigns on the NHS is not just a reactive campaign by the GMB, it is through identifying the NHS as a national project that we continue to grow our membership and our industrial strength. But our efforts in organising and consolidating membership **are** just scratching the surface. We welcome the month on month sustained growth in the NHS. This is primarily down to the frontline NHS Workplace Reps who work tirelessly day in day out.

Sustained membership growth over the next year will be crucial in supporting efforts to retain hard fought terms and conditions. Similar to the decades of local government privatisation, the next phase of organising in the NHS is crucial if we are to effectively respond to the threats of the big NHS sell off. Retaining members will increasingly become a challenge if we are to grow the sector.

The GMB central campaign platform in the NHS is the effective and robust representation of terms and conditions of NHS workers. Without good conditions for workers, we will not have good services.

This is a matter of life and death for people in this country, and if the NHS goes, we will never get it back.

