

Unison Health Conference Manchester April 2008

Monday 14th April

Branch support for motions of interest;

8 – Privatisation of Patient Transport Services. Submitted by National Ambulance Sector. This motion informed conference of the threat to PTS with the outsourcing of PTS contracts to private contactors. It called on conference to campaign on this issue and provide guidance and support to branches. This motion was carried.

9 – NHS Staff Working for Private Healthcare Providers. Submitted by East of England Ambulance Branch. This motion, and in particular the amendment, dealt more with senior ambulance staff who are complicit in leaving Trusts to set up private services that compete for local contracts. This motion does not go as far as criticising staff for working for these contactors to help meet the cost of increasing living expenses. This motion was carried.

Ambulance Sector Fringe Meeting.

Foundation Trusts were discussed at this meeting. Out of approx 400 Trusts, nearly 100 have applied for or achieved FT status. A warning was given by Dave Godson about the implications of ambulance trusts going for and achieving FT status. Foundation status gives the Trust more financial freedom and autonomy which enables them to borrow money from the private sector and award contracts, essentially privatising public services by the back door. It also gives them more freedom to move away from agenda for change and choose their own pay scales. Unison is preparing a network for branches to share experiences and pitfalls in this process.

Some branches of acute Trusts that have achieved FT status have used this process to secure better facility and recognition agreements but Unison remains opposed as the process could allow Trusts to move away from working with the unions and instead consulting with staff groups.

More information about Foundation Trusts can be found on Unison's website at:

http://www.unison.org.uk/foundation/pages_view.asp?did=511

Tuesday 15th April

Branch support for motions of interest;

30 – Ill Health Retirement Review. Submitted by Yorkshire Ambulance Branch. This motion asked conference to recognise the concerns for the review carried out through the staff council with reference to the fact that ambulance and A&E hospital staff are badly affected by the consequences of this review. Karen Jennings spoke in opposition to this motion and explained that the complex negotiations over the last 5 years could not be picked apart at will by individuals and branches. The motion was opposed by the Service Group Executive (SGE) and not carried.

37 – **Health Pay Ballot 2007.** Submitted by Yorkshire Ambulance Branch. This motion stated opposition to what it claimed were unfair guidelines from Unison following the pay ballot in 2007. Although no clear recommendation was received from the service group on the pay deal, branches were criticised for campaigning and recommending their own democratically decided policies on the pay deal to members. This motion was carried despite the SGE opposing.

Afternoon discussion on the pay deal

Emergency Motion 1 – Proposal for all Member Ballot. Submitted by the Health Service Group Executive. This motion was based on the principal that members should be given the chance to decide, democratically, whether to accept or reject the proposed pay offer. It also made reference to a number of negotiated objectives in line with Unison conference policy. For example, increase in the NHS minimum wage, steps towards the merger of bands 1 and 2, new trade union facilities agreement, additional money for those at the top of band 5 and bottom of band 6 and a commitment to further negotiations on reducing the working week.

Emergency Composite Motion 2 – No to Three Years of Pay Cuts. Submitted by Manchester Community & Mental Health, Tower Hamlets Health Care, Homerton, Leicestershire Health and North West Anglia Health. This motion reported on the current economic climate with inflation rising and the cost of living rising at well above the pay offer. It made special relation to the lowest paid workers being the worst affected by inflation. This motion called on conference to reject the pay offer, campaign for better health pay and join with other public sector unions to demand a better pay offer from government. The motion also called on conference to ballot members on industrial action if no substantial increase in the pay offer is received by end of April 2008. This motion was an effective strike ballot.

Emergency Motion 3 – Pay 2008-9. Submitted by Scottish Health and Lothian Health. This motion reported on the NHS Pay Review Body's (NHSPRB) report that stated the award should be for one year only based on the evidence they received. This motion called on the SGE to ballot members on the PRB recommendation and the proposed multi year deal and to separate the two issues. Reluctantly accept the PRB recommendation for the first year and to recommend rejection of multi year pay cuts.

On the first day of conference Mike Jackson, Unison Head Negotiator, spoke to conference outlining the proposed pay deal. In his speech he informed conference that this proposed offer was the best that could be achieved through negotiation and that if rejected it may cause the government to stage the pay deal. He also reported that this offer does deliver on some key Unison objectives as mentioned above.

The above emergency motions cause a very lively debate and many took to the rostrum to voice their support of the motions. The South Western Ambulance delegates listened to all sides of the argument and then consulted with the branch secretary as well as other ambulance branches and the ambulance sector. Based on this it was decided to vote for emergency motion 1.

The motion was carried after a card vote with a majority of approx 12,000 votes. This meant that the other emergency motions fell.

Branch support for other motions of interest:

38 – Pay Campaign – Learn Lessons of 2007. Submitted by Eastern Regional Health Committee. This motion was about the way in which National Health Officers intervened with local branch campaigns on the pay offer despite no clear recommendations from the SGE. It asked conference to allow health branches to campaign directly against SGE recommendations and to keep the democratic right of branches to make those recommendation provided they inform members of the national policy. This motion was carried despite the SGE moving to oppose it.

Fringe Meeting - Violence and Aggression in the NHS: The Prosecution Framework.

This meeting was presented by Robert Baughan, Unison National H&S officer with guest speaker Richard Hampton, Head of Security Management, CFSMS (Counter Fraud Security Management Services). There was a brief introduction to the legal framework and the CFSMS system and how this relates to the LSMS (Local Security Management Service) within Trusts. The main point of this was that staff should be reporting all incidents of violence and aggression (V&A) to their employers and the LSMS should be encouraging prosecution. There has been an investment of £97 million to tackle V&A however this money has not been ring fenced and concern remains that some Trusts have used this money to plug financial gaps in budgets. There were many differing health occupations present and some in the areas of mental health and challenging behaviour who reported V&A on a daily basis. Richard Hampton reported that members do not report V&A enough and encouraged branches to work in partnership to increase the reporting.

The branch reported concerns relating to increased numbers of single responders and call connect and the subsequent increased risk to staff in being assaulted. There were reports from other branches and the ambulance sector about attempts to work with local police forces to highlight potentially violent members of the public before crews are sent. The delegates recommend to the branch that this is looked at with the National Ambulance Sector and our local police forces.

Fringe Meeting – Extending Professional Registration: Good for Health?

This meeting dealt with the current Department of Health (DoH) consultation about statutory registration of healthcare providers. Dr Nick Clarke, Head of Health & Social Care Regulation DoH, outlined that professional registration is about protecting patients which is done by setting standards, registering practitioners and investigation of poor practice. This all follows the Social Care Bill 2007 which is available on the DoH website and is in a period of consultation. This is all about maintaining a high level of professional care and not about regulating poor performance. Karen Jennings, Unison Secretary of Health, spoke about the evolution of registration and about how registration bodies have been elitist in the past and only been there to protect the higher paid professionals. They should be there to protect all staff delivering health care and to help deliver training to the lower paid bands. There was caution expressed that, like paramedics and the HPC, all staff who are required to be registered could face disciplinary action from both the employer and the registration body, Double Jeopardy. Delegates expressed concerns that this registration would affect the lower paid staff and this poses problems for registration

fees. The fees are to be set by the regulatory bodies and not by government, and as yet this has not been done. It was suggested that as it is in the best interests of the employer to register staff that they should be expected to pay or contribute to the costs. It should also be noted that in the pay deal 2007, the government paid money towards registrations fees of staff on band 5 and Unison should campaign for this to include the new professions to be registered.

Weds 17th April

Branch support for motions of interest:

Composite E (Motions 39,40,41) – **Violence & Assault against NHS Staff**. Submitted by National Ambulance Sector, Cymru/Wales Health Committee and West Midlands Regional Health Committee. This composite motion asked conference to note the NHS CFSMS statistics on V&A in the NHS. Although these showed an overall reduction in cases conference is concerned that in both Ambulance and Mental health this reduction has been less than in other areas and frontline staff continue to face unacceptable levels of violence. The motion called on the Health Service Group Executive to work in partnership to establish a consistent way of recording assaults against staff and pursuing perpetrators of assaults. To work with the police and CPS to ensure new legislation is fully enforced, conflict resolution training is given to all frontline staff, ring fence funds for H&S and to ensure that reinforcements to protect ambulance and other frontline staff are available when needed, including police and security agencies. This motion was carried.

Conference closed at 4pm with the president being thanked by conference for her hard work and dedication to trade union activities.

The delegates would like to thank the branch and executive group for sending us to this interesting and informative conference. Motions were discussed and voted upon and it is difficult to summarise them adequately for this document. The agenda guide and supporting documents will be available for all to read and we will endeavour to answer any questions that may arise.

Alan Lofthouse
Assistant Branch Secretary

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