

Junior doctors oppose latest government efforts to extend services

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The British Medical Association (BMA) began balloting 55,000 junior doctors November 5, as to whether they are prepared to take strike action or action short of a strike to oppose the imposition of a new contract by the Conservative government. The ballot is due to close on November 18.

The Conservative government says it wants National Health Service hospitals to provide a uniform service seven days a week. Currently hospitals offer a lower spectrum of care and services at weekends leading to a higher mortality rate.

Consultants are not normally available at weekends. Currently talks with the doctors' professional body, the British Medical Association (BMA), over changes to consultants' contracts are stalled.

The bulk of medical care in hospitals over weekends is provided by junior doctors, including trainee doctors. While the government says it is committed to improving and extending hospital services at a weekend, it wants to do so on a no cost basis with junior doctors paying the price.

Under their current contract, junior doctors are paid premium rates for working weekend and anti-social hours. Negotiations between the BMA junior doctor committee and the Department of Health broke down in October.

Health Secretary Jeremy Hunt then moved to impose the new contract. He wants the contract in place to apply to the August intake of new doctors into the service in 2016.

Under the new contract, the hours of so-called standard time when premium pay rates would not apply would be increased from 60 hours to a staggering 90 hours a week. The reclassifying of anti-social hours as standard working time would mean doctors not receiving as much in premium payments. Also the new

contract would get rid of automatic incremental pay increases based on time served.

The proposed new contract has sparked massive resistance among junior doctors. On October 17, more than 20,000 people marched on Westminster to show opposition to the government proposals. Many rightly see the new contract as a part of an ongoing attack on health provision, pointing out that the service is being set up to fail in order to be able to open it up to privatisation.

Many junior doctors work extraordinarily long hours and for many days without a break. They fear the extension of services at a weekend would only compound this situation and put yet more patients' care in jeopardy when faced with tired overwrought doctors diagnosing and treating them.

An *Evening Standard* report of the October 17 demonstration quoted Hardeep Junjan, a 31-year-old junior doctor working in London. She said, "The contract changes are completely unreasonable. Doctors are pushed and pushed... it's got to the point where it is not safe. We're working longer hours and it's not fair."

Alan Rochester, a junior doctor at Maidstone Hospital, said, "The new contracts aren't fair or safe, we already work more hours than in our contracts... we'll only have four or five hours sleep [and] that's not safe... Especially because we work 12 days in a row. I've worked 70 hours in five days this week..."

Well attended protests in support of junior doctors have taken place in towns and cities, including in Glasgow in Scotland and Belfast in Northern Ireland even though currently the new proposed contract will only apply to doctors in England.

In the run-up to the launching of the ballot an increasingly desperate Hunt put forward new proposals

in a bid to get junior doctors to vote no in the ballot. He offered an 11 percent basic pay increase, below the 14.9 percent increase advised by the Doctors and Dentists' Review Body. The rise would be on a no cost basis. He has also said that rather than all-day Saturday being classed as base pay hours, it would only apply to the hours between 7am and 10pm; hours outside this range would be paid at a premium rate.

The BMA estimates that this will lead to pay cuts of up to 30 percent and will remove "vital safeguards which discourage employers from making junior doctors work dangerously long hours, and in doing so protect both patient and doctor safety."

To put the 11 percent rise in basic pay in perspective, doctors must first get a medical degree that takes between 5 and 6 years. Trainee doctors then currently have a starting salary of £22,636, rising to £30,000 within four years. Specialist training doctors receive a salary of between £30,002 and £47,175.

Long working hours and bonus payments can raise salaries by up to a third, but this still leaves junior doctors among the worst paid graduates.

A *Guardian* article of November 3 quoted Milo Hollingsworth, a junior doctor working in Bristol, saying, "The sugar coating is Hunt will increase base pay by 11 percent but the bitter pill is the cut on out-of-hours pay. This will result in a net loss of 20-30 percent regardless of his token 11 percent increase in base pay. Furthermore, they will abolish incremental pay so we get paid lower rates for longer. He has conceded nothing."

The moves have already seen thousands of doctors seeking Certificates of Current Professional Status (CCPS) from the General Medical Council to enable them to work overseas—a massive increase on previous norms.

The attack on junior doctors has provoked a defiance and determination among them and has brought many into political action for the first time. They cannot look to the BMA to defend their conditions, or the NHS. They must take as a warning the way trade unions in the health service have demobilized workers who have fought to defend their jobs, conditions and NHS services over the last few years.

With the collaboration of the trade unions, the 2010-2015 Conservative-Liberal Democrat coalition government was able to attack the pension rights of

NHS workers among others. The age of entitlement to pensions was raised, while at the same time their contributions were increased and their benefits reduced.

The coalition went on to impose a four-year pay freeze on NHS workers, effectively reducing take home pay by more than 10 percent. At the beginning of this year, in anticipation of a Labour victory in the May general election, the unions wound up its nominal opposition to the pay freeze for 2104-15 and accepted a mere one percent rise for 2015-16.

In 2012 the coalition government attempted to impose changes on consultants and junior doctors, but withdrew in the face of determined opposition by rank-and-file medics. Buoyed by their ability to impose attacks on other health workers, the current Conservative government has returned to take on doctors.



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