

# UK: British Medical Association and Labour isolate junior doctors' strike

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In calling off the strike by junior doctors, the British Medical Association (BMA) is not pursuing a shrewd bargaining strategy, as it claims, but dissipating opposition to the new job contract and handing the initiative over to the Conservative government.

The earlier one-day strike by junior doctors in England on January 12 was the first in four decades, with thousands joining over 150 picket lines to demonstrate their opposition. The action enjoyed overwhelming public support.

After this, the BMA called off the second stage of the rolling strikes, which would have meant an escalation of the industrial action with a 48-hour strike between January 26 and 28. While the BMA has stated that a further one-day stoppage could go ahead on February 10, it is the second time it has vetoed the 98 percent mandate for strike action it received from the membership in a 70 percent ballot turnout.

BMA junior doctor committee chair Dr. Johann Malawana stated, "Following junior doctors' clear message to the government during last week's action, our focus is now on building on early progress made in the current set of talks."

In reality, the government they are negotiating with has revived its threat to impose the new contracts unilaterally. Health Secretary Jeremy Hunt spoke to the BBC of deploying the "nuclear option". Prime Minister David Cameron stated, "We can't rule [imposition] out because we can't simply go into a situation where the junior doctors have a complete veto, block over the progress in the NHS."

One day later the BMA announced its retreat. By continuing the talks under these terms, the BMA has guaranteed that only minor changes would be sought in exchange for accepting the bulk of the attacks.

According to a leaked document from the talks on the

issue of payment for unsocial hours, this would still mean that Saturday working would be reclassified as part of the normal working week up until 5 p.m. and out of hours work Monday to Friday would be moved back from 7 p.m. to 9 p.m.

Aside from this, there still remains the elimination of incremental pay progression based upon years of service and the lifting of safeguards against excessive hours. Any amendments to these attacks will be minimal in an attempt to quell opposition, while a new benchmark will still be set for the entire National Health Service workforce.

As the BBC noted, "Talks are already under way to reform the consultants contract, while many believe next on the hit list will be Agenda for Change, the contract which covers more than one million staff from caterers and admin staff to nurses and midwives. The NHS may be getting more money this Parliament—£8.4 billion above inflation by 2020—but that is dwarfed by the £22 billion it has been told to make in 'efficiency savings' in return. Staff costs make up about half the budget. It almost goes without saying, they're the obvious target."

The Tories' election pledge of seven-day services in hospitals by 2020 is not about improved treatment for patients in order to reduce preventable fatalities. Their position on this question can be best measured in the number of A&E, maternity and heart units they have shut or downgraded throughout the country.

Emergency care is already provided seven days a week around the clock by junior doctors and other medical staff in hospitals. A genuine improvement in seven-day hospital services would require more funding and extra NHS staff—the opposite of what is taking place. Far from being ring-fenced from austerity, the NHS budget has been cut in real terms, as spending has

flatlined while demand has increased. The previous round of £20 billion efficiency savings have already brought it to the brink.

The government's plan for seven-day services is to be implemented at the expense of the pay and conditions of those who dedicate their professional lives to providing health care to the public. The starting pay for junior doctors of £23,000 compares unfavourably with others such as a merchant banker at £35,000 to £40,000. This is why they are dependent on unsocial hours payments. Junior doctors are a mainstay of the NHS and account for a third of all medical staff. The consequences of the new contract will lead to a further haemorrhaging of staff and overstretching of capacity, in which patient care will suffer.

The extension to seven-day services is to be conducted on the basis of inferior pay rates and conditions and is also a Trojan horse for further outsourcing of care to the private sector. The fast-tracking of the NHS for privatisation embodied in the Health and Social Care Act 2012 has already led to 10 percent of the NHS budget being siphoned off by non-NHS providers.

The crisis in the NHS is further compounded by the major reduction in access to social care provision through cuts in local government spending, leading to an increase in the number of people, particularly the elderly, admitted to hospital for medical treatment, and delays in discharge or patients being discharged unsafely.

The strike by tens of thousands of junior doctors and the nurses and midwives demonstrations around the country against the elimination of NHS bursaries by 2017 is a sign of an emerging opposition to the decimation of the NHS—the product of the endless rounds of austerity measures dictated by the financial and corporate elite since the financial crisis in 2008.

The attempt by the Cameron government to discredit the junior doctors via a smear campaign in the right-wing media which branded them “Moet medics” leading pampered lifestyles, and their strike action as abetting ISIS in the event of a Paris-style terrorist attack, has failed.

What they are able to bank upon is the isolation of the junior doctors by the trade unions and the Labour Party. Any notion that the election of Jeremy Corbyn to the leadership of the Labour Party would lead to a return to

its role as an opposition in Parliament to the Tories or even challenge neo-liberal orthodoxy has again been disproved. Any truth in this claim would have found some expression in a defence of the NHS, the jewel in the crown of the welfare state, and in support of the junior doctors' strike.

Just as was the case with the vote for bombing Syria, the right of the Labour Party was allowed to carry the day. Labour shadow health secretary Heidi Alexander, presenting the official position of the party, refused to endorse the strike by junior doctors.

This went unchallenged. Instead, Corbyn posted a personal message of support on his Facebook page, while John McDonnell, the shadow chancellor, went to visit the picket line at St. Thomas's hospital in a personal capacity. While even this rankled with the right as a step too far, McDonnell's message was essentially no different from Alexander's. He stated, “All these junior doctors are asking for is Jeremy Hunt to get back to the table at (the negotiating service) ACAS and resolve this.”

The junior doctors' dispute has demonstrated once again that, at the level of the most elementary defence of workers' rights and opposition to the dismantling of the NHS, a fight back cannot be taken forward without throwing off the dead hand of the trade unions and the Labour Party.



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