

Unions delay strikes after massive vote against NHS pay offer

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National Health Service (NHS) workers have overwhelmingly rejected the Johnson government's insulting pay offer for 2021. The proposed three percent increase means a real-term pay cut.

Public sector pay has been frozen or awarded below inflation rates for more than a decade. Health workers have seen the value of their real wages fall by up to 20 percent due to austerity measures introduced under Labour and then Conservative administrations since the 2008/9 financial crash.

In ballots, over 90 percent of GMB and Unite union members have opposed the governments miserly offer. The ballot by Unison, representing nearly half a million NHS staff, saw a vote by 90 percent to reject the government offer. The vote by the 465,000 member-strong Royal College of Nursing (RCN) saw 91.7 percent of those voting in England rejecting the offer, and 93.9 percent in Wales.

Anger among doctors and consultants is running high. The British Medical Association (BMA), representing local and hospital doctors as well as consultants, have undertaken two non-binding "consultative exercises". Consultants voted by over 80 percent to reject the pay offer. Junior medics, who are excluded from the three percent pay offer, are being balloted on an even lower two percent deal. These results are not yet in, but it is likely they will reject by a considerable margin.

After hypocritically "clapping for carers" and declaring front-line NHS staff to be "heroes", the Conservative's pay offer shows their real attitude to a workforce that has battled to keep the health service afloat in face of "herd immunity" policies that have fuelled the pandemic. The government's original offer of one percent was only raised to three percent following a public outcry and higher recommendation by NHS independent pay review bodies.

Given a clear mandate by their members to mount action to secure a wage increase reversing years of pay cuts, what are the unions doing?

Rather than call for immediate walkouts across the NHS, the union bureaucracy is reaching for the first tool in its treacherous arsenal of measures to delay and sabotage a fight—the "indicative ballot." This is *not* a vote to strike but a vote to take a vote at some future point on industrial action, which would not necessarily include a strike. By dragging out the process, the unions gain time for themselves to grind down the opposition of their members.

The GMB has tabled an indicative ballot asking its members whether they would support "strike action" or "industrial action short of a strike." The vote closes on November 15. The RCN is holding an indicative ballot closing on November 30, and Unison, the largest health service union, is running a similar ballot that only closes on December 5. As of writing, Unite is not even running an indicative ballot.

Under anti-strike legislation, which all unions slavishly follow to the letter, a strike cannot be called until an officially prescribed ballot is held.

First, the union general secretary or another official empowered by its rules must authorise any industrial action. Then a ballot must be held that is supervised by a "qualified independent person" (usually the Electoral Reform Society) before the union asks members to take action.

A strike call is then only valid if at least 50 percent of those entitled to vote participate in the ballot and a majority are in favour of action. Those working in "important public services" (including more than one million NHS workers) face a further hurdle in that at least 40 percent of all those entitled to vote must vote to support strike action before it is considered legal. Then

a union must give the employer a week's notice that it intends to take action.

The ballot must be organised by a postal vote. Unlike in the past, when a strike vote was often held following a mass meeting where workers could openly debate the issues at stake, a postal vote has the effect of ensuring that each worker casts their ballot as isolated individuals, confronted by a barrage of hostile propaganda from the employer, government and the media.

The process is designed to make holding a strike as difficult as possible and provides the unions with multiple get-outs.

Should such strike ballots return the required majorities, no action is likely to be taken before the end of the year. The bureaucrats running each of the unions have made no call to coordinate any struggle across the NHS, which would present a powerful united front against the government and be assured of mass support. Instead, the unions will seek to ensure that a rotten settlement reached by one union can then be used as a battering ram against the remaining NHS workers.

Despite the large percentages voting against the offer in the consultative ballots, turnout was very low. For example, only 25 percent of eligible RCN members participated. Like the other health unions, the RCN has a rotten record of demobilising any struggle and workers know this very well.

This counts for nothing for the pseudo-left groups, whose members occupy numerous posts within the union bureaucracy, including on their leading bodies.

The Socialist Workers Party calls on union members to put pressure on the bureaucracy to ensure "the mood of anger in health services can be translated into a good strike vote," which would leave everything in the hands of the union leaders.

The Socialist Party is calling on workers to place their faith in the Trades Union Congress (TUC) to "come together to plan a campaign, including a national demonstration and coordinated ballots for national strike action."

The TUC has acted as a junior partner to Prime Minister Boris Johnson's hated government in ensuring workers are forced into unsafe factories, schools and workplaces to keep the profits flowing.

The NHS unions have dragged their heels since March 2021, when the one percent pay rise was

originally announced, ensuring that the government was able to reopen the economy on its July 19 "Freedom Day" in the middle of a pandemic.

The constant sabotage of any effective industrial action by the corporatist unions is in keeping with their long history of betrayals.

The 2016 junior doctors national strike against a government contract worsening their conditions was sold out. The BMA ended the action by calling off strikes that were scheduled in October, November and December that year. The fallout was the disastrous four-year deal signed in 2019. The imposition of the inferior contract became the spearhead of an offensive against the NHS.

The so-called "best pay deal in 8 years" (RCN) agreed in 2018, saw all of the major health unions agree a real-terms pay cut for NHS workers, and then dress this up as a huge success. Workers soon saw how rotten the deal was in their pay-packets, leading to the RCN leadership being ousted in a vote of no confidence.

NHS workers must take matters into their own hands. Opposition to the union leaders, and their pseudo-left apologists, must be organised based on a socialist strategy. This requires the building of rank-and-file committees, democratically elected and independent of the union apparatus, to unify public and private sector workers against the government's onslaught against their livelihoods and in defence of the right to free, universal health care.

We urge health workers to contact NHS FightBack, established by the Socialist Equality Party, to discuss these vital issues and take the struggle forward.



To contact the WSWS and the Socialist Equality Party visit:

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