Thousands of UK ambulance workers strike, Tory government deploys army as scabs

Tony Robson
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Thousands of ambulance workers including paramedics, technicians, emergency care assistants and call handlers struck today at 10 of the 11 regional ambulance services in England and Wales.

The strike by members of the GMB, Unison and Unite unions is against a 4 percent pay award imposed by the Conservative government. But it is bound up with a fight to end the crippling impact of underfunding and privatisation, leaving overworked staff unable to provide emergency care to patients.

Ambulance workers agreed to provide cover for all Category 1 calls posing a direct risk to life.

The Tory government has utilised the action to deploy 750 soldiers in a strikebreaking role for the first time since Thatcher brought in the army during the 1989-90 ambulance dispute. The BBC reported that 170 military personnel had received crash-course training at Wellington Barracks in Westminster on how to drive ambulances.

This has nothing to do with saving a single life but is aimed at justifying authoritarian measures to clamp down on the strike wave engulfing the Sunak government. Among them are plans to outlaw strikes in key sectors through Minimum Service Level legislation. A law allowing agency staff to cover for strikers was introduced in July.

The real threats posed to patient lives are the delays in ambulance response times produced by the Tory government’s cuts to the National Health Service (NHS), a crisis brought to breaking point by its criminal handling of the pandemic.

Around 10,000 of the strikers are represented by the GMB. According to a poll conducted by the union of ambulance workers in July, a third had been involved with cases where a patient’s death was linked to a delay. Eighty-five percent reported delays had impacted patient recovery.

Ambulance crews were unable to respond to one in four 999 emergency calls in October, the highest proportion ever recorded, due to delays in handovers at A&E departments because of bed shortages.

Martin Flaherty, Managing Director of the Association of Ambulance Chief Executives (ACCE) representing the heads of ten regional ambulance services in England, commented, “The life-saving safety net that NHS ambulance services provide is being severely compromised by these unnecessary delays and patients are dying and coming to harm on a daily basis.”

Ambulance staff have been struck down in large numbers by COVID-19 due to a callous official indifference towards their safety that has claimed the lives of 1,500 health and social care workers and condemned many more to ill-health, including extended ill-health with Long COVID.

While ambulance workers are denied a cost-of-living increase, made ill and overworked, and the NHS is starved of funds, the private sector continues to leech millions of pounds. A GMB report showed that the 10 trusts in England handed over £235 million in three years to the private sector for emergency and non-emergency transport.

The poverty pay levels presided over by the health unions are such that the NHS had to introduce a top-up this year for its lowest paid staff, including call handlers, cleaning, catering and transport staff, to avoid prosecution for breaching the statutory minimum wage—just £9.50 an hour, set to rise to £10.42 next year.

The trade unions have been forced to call strike action by the mounting anger of their members, but they are waging a covert campaign of sabotage to prevent a
unified offensive against the government from developing.

Unison and Unite called off strike action by ambulance workers in Scotland to push through a pay offer from the Scottish National Party devolved government averaging just 7.5 percent. Even the 11.24 percent for the lowest paid does not keep up with inflation.

The GMB also withdrew strike action last month at the Scottish ambulance service to ballot on the offer. However, the deal was rejected by a two thirds majority of the union’s NHS workers last week, showing the depth of opposition among the 8,000 nurses, porters and radiographers including 1,700 ambulance staff it represents.

The double-speak of union leaders about standing up for ambulance workers and the NHS is epitomised by Unite General Secretary Sharon Graham, whose union represents 1,600 ambulance workers striking today. She praised the pay award in Scotland, covering 1,500 ambulance workers in Unite, as proof that it fights “for better jobs, pay and conditions in the health service”.

By packaging revised offers amounting to pay cuts as “victories,” Graham has played a key role in preventing unified action by workers in the UK’s largest private sector union—on the rail and buses, council refuse, docks and oil refineries. This goal is what lies behind Graham’s desperate appeals for Prime Minister Rishi Sunak to meet with union leaders. Speaking on Sky News yesterday she begged, “It does not have to be a long negotiation, we’ve done this already in Scotland.”

The Scottish deal touted by Graham was rejected by a third of Unite members. Wilma Brown, chair of Unison’s Scottish health committee, was forced to acknowledge widespread discontent over the deal, which passed with only 57 percent in favour. “It was far from a unanimous decision and many of the NHS professional grades feel badly let down,” she said. “Almost half of Unison NHS staff voted to reject this latest pay offer, and many who did vote to accept, did so reluctantly.”

Foisting a below inflation agreement on an angry membership wanting a real fight sums up the role the health unions are playing, with Unison the largest union in the UK and representing nearly half a million workers in the NHS.

The ambulance workers’ strike immediately follows the second day of national action by up to 100,000 nurses in the Royal College of Nursing (RCN) opposing the same derisory pay award and demanding an increase 5 percent above inflation. 30,000 RCN members in Scotland threw out the proposed deal with the SNP by a massive 82 percent majority. Members of the Royal College of Midwives also rejected the deal by 65 percent.

Today’s action also exposes the divisions the unions sow. Services affected include nine with workers represented by the GMB, five with workers represented by Unison, and three by Unite. Even where strikes coincide in the same service, the unions ensured different start and finishing times for the stoppages to prevent combined action.

The health trade unions blocking unified action is of a piece with the union bureaucracy’s suppression of the wider strike movement. The pseudo-left Socialist Worker has reported details leaked to them by a friendly bureaucrat of a meeting of the leaders of 20 unions already engaged in action or balloting for strikes, privately deliberating over a possible one-day national stoppage on February 1. Were such a token protest to take place, this would involve one million workers. In contrast, only a quarter of a million workers have been engaged in strikes over the last fortnight on the rail, Royal Mail and in the NHS thanks to the dead weight of the union apparatus.

The fight by NHS workers can become the focus of a general strike against the Sunak government and the employers, but the main obstacle to such a struggle is the union bureaucracy. To oppose its campaign of sabotage and suppression, power must be returned where it belongs, to the workers themselves, by forming a network of rank-and-file committees. We encourage ambulance workers to read and share the Socialist Equality Party statement, “For a general strike to back the nurses fight to defend the NHS from the Tory government: Build rank and file committees”.

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