

# GMB union deal at Airedale hospital sells support workers short to maintain outsourcing

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The GMB union announced November 5 that outsourced support staff at Airedale hospital near Keighley, West Yorkshire had accepted a new deal with AGH Solutions (AGHS). Around 150 support and non-clinical workers—porters, cleaners, caterers, security and sterile services staff—took strike action in September and October demanding parity in pay, terms and pensions with directly employed colleagues in the National Health Service (NHS).

The struggle by porters, cleaners, caterers, security and sterile service staff who perform vital functions in the hospital was animated by the demand to reverse their inferior terms at the hands of AGHS—a subsidiary company (Subco) established by Airedale NHS Foundation Trust in 2018.

GMB organiser Joe Wheatley hailed the settlement as a “fantastic victory”. But even the union’s press release, headlined “Airedale workers win pay boosts after strikes”, lets slip the truth: a bitter struggle for equal treatment has been reduced to a handful of concessions designed to keep the outsourcing racket intact.

The GMB trumpets “significant steps forward” on full alignment of weekend enhancements, annual leave, maternity/paternity leave and death-in-service benefits. But other rights remain second rate: sick pay is subject to a series of staged improvements; a “pay boost” of 50 percent this year, 25 percent in the next financial year with discussions on “further improvements” to open in 2027, while pensions remain inferior.

The union’s talk of “full alignment” in some indefinite future is political theatre. Its function is to buy time, demobilise anger and restore cosy relations between GMB officials and Trust management. “The fight isn’t over”, they proclaim—after shutting it down at the earliest opportunity on terms deemed acceptable by AGHS and the Trust.

The essential demand must be immediate equality—now, not in 2027. This is incompatible with the Subco model, a mechanism created explicitly to divide the NHS workforce and slash labour costs through the commercial arms-length subsidiary formed by the Trust. The only genuine solution is to abolish AGHS, transfer all staff back into the National Health

Service, and secure backdated compensation for years of pay and entitlement losses. The GMB refuses even to raise this because providing the apologetas for the continued existence of the outsourced arm of the Trust has become its default role.

The message this sends to every Trust operating a Subco in the NHS is unmistakable: throw out a few concessions and the union bureaucracy will step in to smother resistance. In doing so, they act as frontline enforcers of the Starmer Labour government’s continuation of a back-door privatisation scheme.

## **Union bureaucracy works with Streeting to smother opposition**

The Airedale deal followed NHS England’s September announcement of a “pause” on new Subcos—a cynical manoeuvre which explicitly stated that existing Subcos would remain and future ones could still proceed with approval of the trade unions. This confirms that the trade union bureaucracy are not seen as opponents by NHS leaders.

GMB National Secretary Rachel Harrison declared that the pause over Subcos—approved by Labour Health Secretary Wes Streeting—was proof they were “listening to GMB members”. This is aimed at disarming workers and herding them back into secret negotiations while the Subco system remains untouched.

The Airedale settlement vindicates the warnings of the *World Socialist Web Site* (WSWS): Streeting’s “pause”—identical to the sham performed by NHS Improvement, the then regulator of NHS Trusts in 2018, is being utilised by the union bureaucracy to suffocate struggle, keep workers isolated and assure the Labour government of their reliability as an industrial police force.

Unison follows the same script. In Dorset, south-west England, members voted for strike action against the transfer of 1,700 support workers into a planned Subco. To head off confrontation, the three Trusts withdrew the plan and Unison

triumphantly declared “victory”.

The stand taken by Dorset NHS workers has forced a temporary retreat. But this is undermined by the role of Unison, along with the GMB and other health unions to block any unified fight against existing Subcos in a damage limitation exercise for the Starmer government. Its pre-election pledges to “bring about the biggest wave of insourcing of public services in a generation” are a proven lie. Streeting in January announced a £2.5 billion privatisation drive to outsource a million NHS treatments a year to the private sector.

Streeting is seeking to achieve the same attacks against NHS workers via different means through his 10-year plan. The leaders of the health unions are concealing the content of these “reforms” from their members so as not to disrupt their cooperation. This includes overhauling the contracts of NHS staff based on “modern incentives” tied to productivity strings. Overall funding will be squeezed, with increasingly necessary emergency funding top-ups ruled out. A new “care model” will shift patient treatment from hospitals to neighbourhood health centres developed through Private Finance Initiatives (PFI): notorious for leeching billions out of the NHS in private profits.

When WSWS reporters visited the Airedale picket on October 3 and circulated an article warning workers about the fine print of the “pause” on Subcos and the Labour government’s broader agenda of attacks on NHS staff, GMB officials responded with open hostility. They ordered workers not to give interviews and discuss these issues, and Regional Senior Officer Peter Davies even threatened to call the police.

The GMB bureaucracy will collaborate with Trust bosses, endorse outsourcing firms and promote Streeting—who is waging a vicious attack against resident doctors and preparing further cuts—but cannot tolerate a socialist organisation speaking to workers about a unified fightback.

Their fear is that workers would oppose the blockade the GMB and other health unions are enforcing on any wider struggle: with no coordination with Unite and Unison members at AGHS, no mobilisation of staff directly employed by the Trust, no call for united action across the dozens of Trusts operating subsidiaries.

The Airedale deal is a classic “firebreak” agreement—just enough to claim a “win”, but carefully crafted to preserve the cost-cutting machinery and maintain Labour’s confidence in the union bureaucracy as a partner in NHS restructuring.

## The way forward

The fight abruptly terminated by the GMB must be taken forward by workers themselves through forming a rank-and-file committee. This can provide the means to unify AGHS staff with NHS workers across union affiliations and with non-union

workers linking their struggle to the 1.4 million-strong workforce now facing a government offensive centred on attacks by the Starmer government against resident doctors.

Streeting said that inflicting a defeat against their fight for pay restoration and tackling unemployment could not be “painless” and must serve as deterrent against battles he knows he faces referring to a “contagion” of strikes. For now, he is solely reliant on the services of all the other health union leaders who are sitting on this pent-up opposition. This includes the imposition of a 3.6 percent below inflation deal this year against nurses, paramedics and other NHS staff on “Agenda for Change” contracts. This was emphatically rejected by union members but restricted deliberately to non-binding consultation ballots by the GMB, Unison, Unite and the Royal College of Nursing.

NHS FightBack proposes the following demands:

- Abolish all subsidiary companies; bring every support worker back into the NHS.
- Full restoration of Agenda for Change pay, conditions and pensions.
- Compensation for all losses under Subco contracts.
- A unified struggle across the NHS against every form of privatisation and cost cutting—outsourcing, PFI and productivity-driven restructuring.
- Funding for healthcare, not the NHS privateers and war.

Only an independent movement of workers—breaking decisively with the union apparatus and guided by a socialist, anti-privatisation programme—can defend and rebuild the NHS as a publicly owned, democratically run service.

This was the perspective discussed at the NHS FightBack online meeting on Tuesday, “Defeat Starmer–Streeting budget cuts and privatisation! For a unified fightback by NHS workers!”—which outlined the strategy to turn the resident doctors strike into the spearhead of a fightback against the Labour government.

**Read and share the report of the meeting and help build NHS FightBack.**



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