

NHS STAFF VOICES

A Doctor's Plea



From the 'Doctors Vote' protest at Downing Street Monday 25 July: the BMA junior doctors' protest with nurses, other NHS staff, unions, KONP and other supporters.

Keep Our NHS Public has been forced to campaign for 17 years against privatisation of the NHS, and in defence of the fantastic service that it is.

Unfortunately for the last 12 years, the government has deliberately been running down the NHS, deliberately running our staff into the ground, and deliberately creating 110,000 vacancies that we now face. Now the danger signals are out with orchestrated media articles and interviews saying the NHS is finished, that an alternative has to be found.

The action today is about pay and staff morale, but it is also about the running down of the NHS, with the private concerns already brought into the NHS, increasingly so over the last 12 years.

The NHS is now facing calls that it can no longer survive and is not good enough. But these journalists refuse to look back. Maybe, like many here, they were still at school or university 12 years ago.

Many journalists don't even know that 12 years ago we truly had an NHS that was the best in the world.

It didn't have waiting lists in A&E, it didn't have people dying at home waiting for an ambulance, it didn't see people dying in ambulances, or in A&E awaiting trolleys, or on trolleys before getting to the wards; they didn't have people who couldn't be discharged because there's no social care.

We had a service to be proud of and it was assessed as the best in the world over and over again. Just look up the 'Commonwealth Fund'. Those who say the NHS is finished are liars and they're choosing ideologically to prepare the NHS for a private system.

And it's already here: we know that the biggest GP operator now is Operose - the UK operative of American corporation Centene. Operose is trying to replace GPs with physician associates who are less trained and experienced.

They will replace doctors with nurses, replace nurses with nursing associates, nursing associates with health care assistants and healthcare assistants with people looking after themselves at home without any treatment at all.

We've got to call a stop to this.

This is a fantastic action today. I want you to know that Keep Our NHS Public up and down the country is with you. If you are on strike, we will be on the picket lines with you.

They say there is no more money - well, we've already had one the speakers referencing the £37 billion wasted on the test and trace system. The company Radox had 12 months of contracts worth £547 million for the failed test and trace system and posted profits of £257 million - 47%! - that's just theft. It's a disgrace. It's corruption. But you are calling it out now, alongside the nurses that have lost between 10% and 30%.

We are with the zero-hour contract cleaners, porters and security staff, that are not even employed by the NHS anymore, even though they work alongside us - often denied PPE because they worked for ISS or other private companies. The RMT spoke brilliantly: stand with everybody and we win, divided we fall.

My own final call is to 'KEEP OUR NHS PUBLIC!'

Tony O'Sullivan co-chair of KONP and retired NHS consultant paediatrician

What to do?

IT'S NO SECRET THAT NHS STAFF ARE STRUGGLING

Lunch break chats in our service centre around the injustice we see, from patients struggling to survive on benefits to colleagues leaving in droves because they can no longer afford to work in the NHS.

Whilst those at the top of society are transported to and from their jobs by limousines, our union members are out of pocket driving to patient's homes as fuel costs spiral out of control.

It can be hard to stand up and take action when the emotional and physical toll of working in the NHS is so high; but we cannot continue with a health service on its knees and a workforce so burnt out that the NHS charities fundraise for additional staff counselling.

There are three things every NHS worker can do, whether you're a cleaner or a consultant:

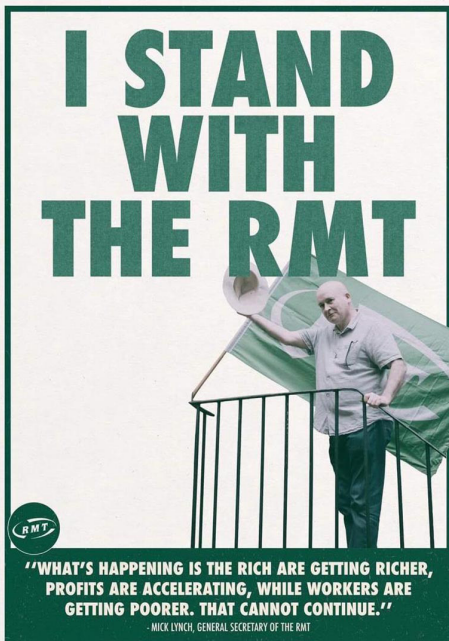
1: Become a union steward. All NHS trusts have partnership working agreements under **Agenda for Change** - you cannot be penalised for being in a union and are entitled to reasonable time during work hours for union activity.

2: Use your position to talk about pay and conditions. Fair pay is not a dirty word - we need to make it clear that we won't do emotionally taxing, back-breaking work just from the goodness of our hearts. In my workplace, unions have a regular meeting to air concerns with Trust directors.

I explained that our members are struggling financially to the extent of using food banks and payday loans. We asked our directors to write to NHS England and call for a pay rise for all NHS staff - and they agreed to share a draft letter with us at our next meeting. Some fellow union reps had questioned the point of raising this request as 'they'll just say no' - but we have to pose the question of pay passionately and consistently.

3: Talk to your colleagues about the need for co-ordinated strike action. It's not something that comes naturally to NHS staff; we've been fed the lie for decades that if we strike, we're letting patients down. But we all know that patients are being let down right now, by a chronic lack of underfunding and dangerous staffing levels leaving people in A&E for hours or even days, or stuck on waiting lists for years with debilitating conditions. Going on strike isn't easy - but the alternative is worse. The alternative is patients dying preventable deaths on A&E stretchers, and it's staff experiencing mental health crises and leaving the profession in droves.

We need to show this right-wing 1830s style government and their billionaire friends that they can't run the NHS like a workhouse, and that we are ready and willing to stand up and be counted.
Elly Badcock - Occupational therapist & Unison steward



DEPLETED SERVICE, DEPLETED STAFF

The impact can feel so overwhelming sometimes it just blots out anything else and all I can focus on is loss - patient lives lost, fellow workers.

Friends have moved on, been tired and pushed out of their jobs by impossible demands, low/no resources, invalidation, isolation, victimisation, bullying.

Last year, after 18 months of pandemic nursing I was hit by such a wave of grief I had to stop working completely. My heart burst, full of guilt and shame. I felt so numb, sad, so enraged. It took months to shift and be able to work again, come back and relearn how to carry on, connect my remembrance with others' and politicise it.

I draw strength from friends who recently handed managers a petition of signatures from hospital workers opposing low staffing levels. I try to move from reverence; I try to remember how to move when exhausted, how to care whilst aching with grief that sits like a finger permanently pressed through the heart. Remembering team defences against cuts and job losses, pushing

back at top-down restructures, outsourcing, and fragmentation. I remember the importance of raising (constant) concerns and going public with them. All kinds of day-to-day tactics for coping and surviving scarcity and separation between workers, between workers and patients, between services and the public.

In its desperate present tense, the NHS is in crisis. Being able to hold onto its founding vision of a universal free public healthcare, survive attacks on this at this moment whilst protecting its future, takes a tremendous amount of effort and care.

Of course, it also takes militancy, but this must be alongside a collective care for and with everyone in its orbit. We must continue to strengthen these aforementioned bonds, while finding more efficient ways to look out for each other.

As the government have made it ardently clear that they are not interested in the majority of us, not in our health nor our safety - each other is all and everything we have... Mental health nurse



One of the many burdens carried by the NHS is the cost of agency staff. With the ongoing recruitment and retention of staff looking likely to continue worsening, this represents an increasing cost to NHS trusts.

An issue with agency staff, recognised by many NHS employees but not often spoken of, is the inherent risk to patient safety.

I recognise there are many excellent agency staff, and I have worked with several, however, agency staff are often drafted in at last minute to cover shifts caused by sickness or staff shortages. This often means working on unfamiliar wards with unfamiliar staff and, often, with unfamiliar patient cohorts.

Many agency staff are unable to undertake some patient tasks, and frequently do not have access to IT systems where patient care details are recorded. This leaves employed staff covering much of the work that the agency nurse cannot do in addition to their own, overloaded workloads. Unfortunately some, and I do stress some, agency staff are happy to leave their employed colleagues to carry the bulk of the work and will barely contribute during a shift. This may be exacerbated by unfamiliarity with the work area, or maybe sometimes by low commitment.

Either way, this can leave patients vulnerable as they are under the care of nursing staff left carrying double their workload. This has obvious potential impacts upon the safety of patients and staff. To further rub salt into the wound, employed staff know that their agency colleagues are being paid up to three times the hourly rate that they are, in addition to being recompensed for mileage and accommodation costs.

There are no easy solutions to this issue, but it is almost certain to worsen in the short and medium term. *Adult nurse*

Managing work stress - A CLINICAL PSYCHOLOGIST'S VIEW

As NHS staff we take pride in our roles whether in a team member or as lone practitioners, we take pride in providing a service to our patients and their carers.

The desire to provide a good service can make it difficult to admit to being under stress, stress which has become inevitable for all working in an under resourced NHS.

Underlying the difficulty in recognising the stress one is under, is a fear or worry of being perceived to be 'moaning' and incapable of handling the 'normal' or 'expected' stress of the job. The wish to hide or deny the effects of stress alongside the knock to our sense of pride, purpose and confidence creates even more stress.

So what can we do? Naming the experience is a first step. It can feel a scary thing to be the one person in a team meeting willing to speak about how stressful it feels to be expected to cope

with the ongoing and often emotionally difficult pressures of the job. However, if all experiencing such stress speak out as a group, it will at the very least act as support for one another, and relieve some of the aforementioned burdens that can otherwise interfere with the quality of the work/care we hope to provide. Facilitators for such staff groups can be found in many Trusts.

Moreover, a good, supportive working culture should include proper breaks, something we often sacrifice in the interest of patient care, but by ultimately along with us, it is patients that suffer.

Time for reflection should not be viewed as a luxury but as a necessary aspect of good, and efficient working practice.

We must speak out for these conditions in order to provide the best service we can.

Principal clinical psychologist

WHO WE ARE

NHS Staff Voices is a network of NHS workers, from medical to domestic staff, all interested in fighting for a better, safer and fairer NHS. We are part of a wider campaign called Keep Our NHS Public, the largest NHS campaign in the UK.

We all know there is a huge crisis in the NHS and that we are at a point where the service is very compromised. Coronavirus has exposed this, and now is the right time to campaign for better pay and working conditions for staff, as well as improving outcomes for our patients.

Find out more by visiting our facebook page which has all the up to date information, including links to our meetings which we encourage you to join: <https://www.facebook.com/NHSStaffVoices/> You can sign up to our mailing list by emailing us at NHSStaffVoices.KONP@gmail.com



Whether you simply want to get organised, let us know how things are in your workplace, volunteer or write for us, send an email to NHSStaffVoices.KONP@gmail.com



Join us for our next organising meeting

We look forward to hearing from you. Together we can save the NHS.