

# Unite in Health newsletter

Autumn 2016



**This is the newsletter for all Unite members who work in the NHS and associated health services. It's online for members, with hard copies available from your region. We'll update you on major developments in health and your union, Unite.**

## '... it's not only doctors and nurses' King's College Hospital Admin Network packs the boardroom



*Natasha Bernard,  
King's College Hospital's  
Admin Network founder*

**Natasha Bernard**, who's a medical secretary at King's College Hospital, Denmark Hill, London, and a Unite in Health member, has set up a network for her colleagues, as she's disappointed about how admin and clerical staff are treated. Natasha also wrote to her **MP, Rt Hon Harriet Harman QC**, expressing her dismay about staffing levels, increasing workloads and poor working conditions. Ms Harman has written to the Chief Executive of King's, on Natasha's behalf, about the difficulties the admin staff face, and is awaiting a reply.

The first open meeting for the network drew 55 staff to raise their concerns to the Associate Director of HR. Despite the question "is it all Doom and Gloom?" getting a resounding 'YES', some staff were quick to praise good managers. The warmest applause was for Natasha, who'd set up the network to give staff a voice. They felt that admin and clerical staff were overlooked, and wanted to emphasise that it was 'not only doctors and nurses' keeping the hospital going.

Most who spoke began 'I have been at King's since' ... and the lengths of service ranged from four, to an impressive 27 years. Many described the failure to replace staff who'd left, ie fewer people to do more work. One department previously had 13 staff, and now has a sole survivor, with the job title 'assistant' but no one to assist! Other offices struggled to cope with staff on leave or off sick being covered by only one or two remaining colleagues. As a result, many lower-banded staff have been forced into 'acting up' into more senior roles, and not paid for the additional work and responsibility. Some departments have been reorganised many times, one person had to reapply for her own job three times in four years.

Returning from holiday or sick-leave, staff have to catch up on piles of work which hasn't been covered in their absence. People often take

fewer days off (presenteeism), and feel stressed about returning. On the wards, receptionists working 12-hour shifts may have to cover work built up by those working eight-hour shifts, as well as dealing with the demands of their own job.

There was frustration at delays in approving vacancies - a one-year contract had only nine months remaining by the time it was advertised. However, whilst support staff numbers dwindle, managerial and senior posts are filled quickly. Some new managers were criticised for not wanting to understand admin roles, nor work 'back on the floor'. Existing clerical staff were given more and more work, and there were concerns about increasing bullying. Higher consultant numbers meant secretaries covering up to 12 consultants each.

Many couldn't believe the severe cuts to essential stationery and supplies budgets, whilst money was spent on expensive promotional leaflets. One department anticipated not working for a fortnight on any new paperwork, as there was no funding for additional computer storage space.

Staff felt that when they'd raised concerns, nothing happened, no-one seemed able or willing to do anything. HR acknowledged the strength of the points made by the staff, and has promised to respond. Meanwhile, the network continues to meet, and Natasha's been busy publishing their regular newsletter.

**Frank Wood, senior rep at King's, and on the Unite Executive Committee (for Unite in Health)**, tells us 'It has been great for the branch to have been able to support admin staff in establishing their own network. The amazing thing is, how a hospital, absolutely reliant on hundreds of hard-working women who keep the service going, pays so little attention to them, until they get organised'.

[www.unitetheunion.org/health](http://www.unitetheunion.org/health)



This year saw the very first 'Health Visitor Week', running from Monday 26 - Friday 30 September, organised by Professional Officer, Dave Munday, ably assisted by recipient of the CPHVA 'Advocate of the Year 2016' award, Angela Lewis. Public organisations, private companies, charities and individuals, signed up as supporters, followed #HVweek on Twitter, liked it on Facebook, and told us why they love health visitors. The week complements the 120th Anniversary of Unite's Community Practitioners' and Health Visitors' Association (CPHVA), which falls this year.

As part of #HVweek, we've run four national events:

- Wales on Monday 26 September, in Cardiff.
- Scotland on Tuesday 27 September, in Glasgow.
- England on Wednesday 28 September, online.
- Northern Ireland on Thursday 29 September, in Belfast.

You can catch all the action and recorded sessions on our #HVweek website: [www.unite-theunion.org/how-we-help/list-of-sectors/healthsector/healthsectoryourprofession/cphva/hvweek-26th-30th-september-2016/hvweek-videos](http://www.unite-theunion.org/how-we-help/list-of-sectors/healthsector/healthsectoryourprofession/cphva/hvweek-26th-30th-september-2016/hvweek-videos)

### What can you do locally?

Dave tells us: 'the main focus for health visitor week was to make sure as many people as possible know about the amazing work that health visitors do'. Health visitors are not just for 'HV week'! To help this happen, we need you to do something to make that a reality. Get in touch and tell us what you did during the week, and what great things you do locally. You can get in touch by email and on social media. 'If you include @Unite\_CPHVA in any tweets, we'll hopefully see your message and can share your ideas with our followers'.

# Support for our students!

If you're supervising students, perhaps on a placement with you, or they're working while studying (like on an apprenticeship programme), and they haven't joined a trade union yet, ask them to join us! We've some information especially for student members:

**'Support for our student members'** - information about what to do if things go awry.

**'How to make the most of your placement'** - common sense for workplace-based modules.

**'How to study'** - for new students, or those going back into learning again.

We've also got these **'Member get member'** postcards, especially for health students, to join up their friends on the course, and get a reward voucher!

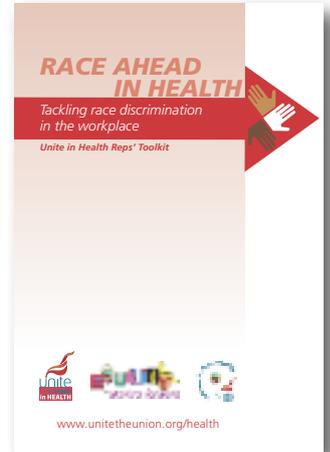
Your Unite rep should have a small supply of these leaflets, or they can get some by contacting the admin team at their local Unite office ([www.unite-theunion.org/regions](http://www.unite-theunion.org/regions)), or from their regional officer.

# Will the WRES make a difference?

In our summer newsletter we mentioned the WRES, the Workforce Race Equality Standards, that require all NHS providers in England to demonstrate their progress against a number of workforce equality measures. The WRES have been in place since April 2015, and are included in the standard contract for NHS organisations. Each of the nine standards compares the percentages of BAEM staff with white colleagues, across recruitment and selection, promotion, training, progression and career development, and those experiencing discrimination, bullying and harassment. They're based on workforce data, the national NHS Staff Survey results, and there's a specific indicator to address low levels of Black, Asian and Ethnic Minority (BAEM) people at senior (Board) level within the NHS.

There's a great video to watch if you want to get the low-down quickly! The WRES Implementation Team have provided a link: <https://youtu.be/G44C9yn-oo0>, a diverse workforce in the NHS leads to greater patient care! You can feed back your comments by email, to [england.wres@nhs.net](mailto:england.wres@nhs.net), or tweet using @wres\_team

Unite in Health professional officer, Obi Amadi showed off the printed first draft at the NHS Diversity and Inclusion conference on 22 September at Canary Wharf. Our Health national industrial sector committee (NISC) launched the document officially at their meeting on 12 October, at our Holborn office.



## Light up the ladies' bridge!

September 23 and 24 saw a celebration of the women who worked to rebuild Waterloo Bridge during the Second World War. The aim of the community-based project, part of the 'Totally Thames 2016' event, was to inspire the new generation of much-needed women engineers with an exciting variety of events held around the bridge. As well as projected illuminations, films and sound-tracks at the National Theatre complex, a choir of 100 sang songs from the Second World War under the bridge on Saturday 24th. The event culminated in a human chain across the bridge to Somerset House. Unite branches and reps were invited to sponsor the event and encouraged to attend the festival. Our Unite in Schools, Union Learning Fund organisers, and Education department are building support for the longer-term, to encourage young women into engineering.

## Campaigning to save services – and some good news for ambulance paramedics at last!

So many services in England are now under threat from 'efficiency' savings placed on health organisations, which mean cuts by any other name. Community campaigners in Chorley are keen to link up with others campaigning around the country. They've a long-running (four-year) campaign to save services, like the recently closed accident and emergency services at Chorley Hospital, part of the Lancashire Teaching Hospitals NHS Foundation Trust. Unite reps tell us that the service doesn't have enough doctors, and is therefore unsafe to run. It's just one example of government cuts affecting local communities.

Local and national media have reported widely on the impact that having to send ambulances to other regional hospitals has had. ITV Granada News reported at the beginning of August that during one lunch hour, nine ambulances were queuing outside the emergency department at Preston Hospital, and another eight were lined up at the main entrance, all with patients on board to admit. This isn't the only instance, our Unite ambulance staff organising professional committee (OPC) tell us it's becoming the norm for their colleagues.

On another note, at last, the NHS Staff Council has agreed to release a paramedic job profile at NHS Agenda for Change pay band 6 - work has been ongoing, in the face of attempted 'down-banding' by other health service organisations, and is a great achievement. It's hoped that this will attract and recruit more people into the profession, and help to retain existing staff. Find out what people are saying about this, and other news, on the Unite in Health Facebook pages [www.facebook.com/UniteInHealth](http://www.facebook.com/UniteInHealth)

## Mind the gap!

### Women still face the gender divide on pay

Women working in health, like other public services, social care, education and local authorities still lag behind their male colleagues when it comes to pay. In the private sector, it's reportedly worse. If you've taken maternity leave, and time to raise your family at home, have caring responsibilities, or have worked part-time, you'll probably not catch up with comparative male wages over your working life.

What's your experience? The gap between men's average earnings and those of women could be as high as 20%. The Trades Unions Congress (TUC), called the outcome of research by the Institute of Fiscal Studies and the Joseph Rowntree Foundation, 'a scandal', and called for changes in government policy and employer attitudes towards women workers; more affordable or free child-care; better paid leave for fathers to support equal parenting; and flexible working options, like job-share or compressed hours (working your normal weekly hours over fewer days).

Black, Asian, and Ethnic Minority (BAEM) women face an even greater pay divide, as recruitment and selection, promotion and career development opportunities are worse than white women colleagues'. That's for working women - the latest Office for National Statistics figures show that BAEM women are nearly 30% 'under-employed' compared with white women, and are far more likely to be unemployed, or in lower-paid roles, and under-represented in senior posts.



# Conference roundup

It's that time of year again, when Unite in Health members from different groups are heading towards their annual conferences.

Our College of Healthcare Chaplains (CHCC) returned to High Leigh Conference Centre in Herfordshire on 6 and 7 September, for their joint mental health and general chaplaincy programme. Professional officer, Jane Beach, told us 'The mental health sessions were excellent, in particular the talk from an asylum seeker on his experiences in Syria and Iraq before coming to the UK'. Our newest national officer, Sarah Carpenter, also attended, and Jane tells us this was very well received by the chaplains.

The Community Practitioners' and Health Visitors' conference is being held in Telford International Centre this year, on 15 and 16 November, check out <http://www.cphvaconference.co.uk> for details of the programme, booking and accommodation.

Unite lead regional officer for health in the West Midlands, Frank Keogh, and Health Sector Industrial Sector Committee member, Ian Evans, introduced students to Unite in Health at the one-day Scientific Trainee Programme event at Aston Villa on 13 September.

Unite in Health's Mental Health Nursing Association (MHNA) will also be playing a part in the 'Nursing in Practice' conference in Birmingham on 8 November – if you're going, come and say hello!

This autumn, Public Health England, held their annual conference at Warwick University in Coventry (13 and 14 September). Unite's the largest union at PHE, and members are scientists, nurses, non-medical consultants, admin and clerical and other support service staff. Unite professional officer, Dave Munday, and Unite Health Sector organiser, Kate Oultram were there this year.



Unite in Health lead officer for Public Health England, Dorothy Fogg, on our Unite stand, at PHE conference at Warwick University.

## Case study - Unite supports medical secretary to gain higher pay-out

Unite's National Litigation Unit, in Stoke on Trent, has supported a Unite in Health member to get a higher settlement following her workplace accident, Jenn Clews, Unite's National Co-Ordinator, Legal & Affiliated Services, tells us.

Our member, who works at a Child, Adolescent and Family Unit in our North-East, Yorkshire and Humber region, sustained injury after stepping into a pothole in the workplace car park, whilst getting out of her car. The Trust originally stated that the accident took place on premises owned and run by NHS Property Services, and not by them. However, the Trust employs our member, and so owed her a 'non-delegable' duty of care. Although it took a Court order application, the Trust subsequently confirmed that they were the owners of the car park, responsible for its maintenance, and admitted liability for our member's accident. An original offer of £1,550 in full and final settlement of the claim was made, however, after advice to reject the offer, our member was finally offered a higher settlement of £2,750.

Have you had an accident at, or away from work? Why not check out the range of legal services that members can benefit from, on <https://www.unitelegalservices.org> (please note that some terms and conditions may apply).

## Seen and Heard - do you work in contact with children?

There's a new training package and e-learning, aimed at anyone who comes into contact with children - for example, if you're a paramedic, therapist, technician, or dental professional. You'll need to listen carefully to children in case they are trying to alert you to the fact they are being sexually exploited. The training's developed by the Children's Society (charity), and commissioned by the Department of Health in England, although the content and issues are not country-specific, so it's suitable for everyone.

Our Unite in Health Professional Officers have been consulted about the content of the package, and Professional Officer, **Ros Godson** says 'please do the training yourselves, and encourage your colleagues and network contacts to do the same'.

Information about the Children's Society is on <http://www.childrenssociety.org.uk>, and the training's on <http://learning.seenandheard.org.uk>.

## Are you covered? Make sure you're paying the correct contribution rate

Are you still paying the student contribution rate for your Unite membership? Fine, if you're in full-time education. However, if you continue to pay a reduced rate for membership, you've finished your studies, and you're now working full- or part-time, please tell us. You're no longer eligible for the lower contribution rate, and you may not be covered for legal or other membership benefits.

It works the other way too, of course. If you've gone back into full-time education, you're no longer employed, you're on maternity leave, or long-term absence through illness or disability, or your working pattern has changed - let us know. You may be paying too much for your membership.

Check your own subscriptions are correct, your bank statement will show direct debit amounts paid to Unite. You can find the correct full- and part-time and reduced membership categories and cost on <http://www.uniteunion.org/growing-our-union/joinunite/contributionrates> or you can call your local Unite office and ask one of our admin colleagues to check for you (you'll need your membership number, or date of birth and postcode). You can also check that we've got your up-to-date address, contact details like phone, email, your job title and employer (if you're working) correct. Don't leave it to chance - get covered!

### UNITE MEMBERSHIP CATEGORIES

Unite offers a range of membership categories so that you can pick the one which best fits your circumstances.  
See colour-coded chart for benefits in each category.

**ENHANCED:** This is the category that most people opt for because it includes valuable protection for you and your family.  
**COST:** Full Time: £3.50 per week or £15.14 per month  
 Part Time: £1.83 per week or £7.33 per month (up to 21 hours per week)  
 Low Pay\*: £2.25 per week or £9.74 per month

**NO 1 CHOICE**

**BASIC:** Entitles you to core union benefits. No additional protection.  
**COST:** Full Time: £3.25 per week or £14.05 per month  
 Part Time: £1.70 per week or £7.37 per month (up to 21 hours per week)  
 Low Pay\*: £2.00 per week or £8.66 per month

**APPRENTICES:** If you are not yet in full time employment but are in training or on a certified apprenticeship programme.  
**COST:** Year 1: £0.65 per week or £2.79 per month    Year 2: £1.30 per week or £5.63 per month  
 Year 3: £1.95 per week or £8.43 per month    Year 4: £2.60 per week or £11.27 per month

**SPECIAL DISCOUNTED RATE CATEGORIES:** People not working or in further education.  
**COST:** £0.50 per week or £2.17 per month

\*For members whose (a) basic hourly pay is below the Living Wage (currently £8.25 per hour working out of London and £9.40 per hour working in London) and whose normal weekly net earnings are below £300 or (b) aggregate gross P90 earnings (across all employers) are less than £16,000 per year (indexed annually). Verification will be required annually.

**OPTIONAL BENEFITS**  
 You can choose to add additional benefits which reflect your occupation:  
**DRIVER CARE** provides specially tailored cover should your driving licence be permanently revoked due to injury, disability, illness, poor eye-sight or assault.  
 Personal Accident and Assault Cover is also included.

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