



**UNISON Health Care Service Group Executive**  
Annual Report 2014/2015

**NHS – care for it?  
Vote for it**



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## Foreword from the chairing team

We are pleased to present you with this year's Health Care Service Group Executive (HSGE) annual report, which provides a record of the work carried out by UNISON's health group on behalf of the HSGE and our members working in healthcare between April 2014 and March 2015.

The annual report provides an overview of the work programme, which is shaped by the decisions taken at UNISON's health conference, alongside the objectives and priorities endorsed by UNISON's National Executive Council (NEC). We hope that the report demonstrates the hard work that has taken place at all levels of the union to support and protect our members and to ensure that our work upholds the union's objectives.

Across the UK, our members continued to be devalued and demoralised by the ruthless decisions made by the Westminster government. In the devolved countries members have had to endure the effects of funding cuts by Westminster, and continued to see their standards of living deteriorate as they struggle to keep up with rising costs.

Only the Scottish government implemented the Pay Review Body's (PRB) award in full and went even further by agreeing to a long-standing UNISON demand for the Living Wage.

Ballots were held in England, Wales and Northern Ireland over pay. Members in Wales accepted an offer from the Welsh government before the first strike action and, at the time of writing, members in Northern Ireland were being balloted over pay and cuts.

In England, 60% of NHS staff have been denied a pay rise following the government's decision to ignore the Pay Review Body's (PRB) recommendation to award all NHS staff a 1% pay increase. In response, our members took the difficult decision to vote for the first strike action over pay in the NHS in 32 years - a decision that our members did not take lightly. Throughout the year, we ran a strong campaign calling for fair pay in the NHS, and branches and regions worked tirelessly to mobilise members, with thousands taking to the picket lines and attending branch organised events up and down the country. The sheer scale of support for the campaign has been evident by the extensive media coverage we have received, as well as widespread support from the public.

The NHS pay campaign, along with UNISON's safe staffing levels report and the increasing demands placed on the health service, helped UNISON to keep the NHS in the media spotlight. This led to the NHS becoming the key election issue above immigration, the economy and welfare in the build-up to the general election.

Alongside the NHS pay campaign, we have continued to fight against increasing privatisation, cuts to jobs and other threats to our members' terms and conditions across all four countries and have had victories along the way. We successfully fought off the privatisation of George Eliot hospital through a strong local campaign and by working collaboratively with local councillors and patient groups to challenge the flawed engagement process at the trust. Furthermore, the King's Fund report confirmed UNISON's fears that the government's NHS reforms would put profits before patients.

Needless to say, the fast approaching general election will bring with it more uncertainty for the union. However, our members' strength and resilience gives us confidence that we will be able to continue our fight together. Once again, we would like to thank all members of the HSGE and the occupational groups, as well as staff both in the health group and in regions, for their dedication and hard work. Above all we want to pay tribute to the hundreds of thousands of members and activists in UNISON who keep the NHS running and safe for patients and for their amazing support and commitment to our union.

**Roz Norman, Debra Tickle, George Barron**

Chairing team

Health Care Service Group Executive

**Christina McAnea**

National Secretary for Health

# Objective 1: recruiting and organising

## Recruiting and organising initiatives

Well-coordinated local and regional recruitment plans alongside the union's national advertising campaign delivered another increase in the number of health members joining UNISON in 2014.

The total number of members who joined in each of the four UK countries is shown below.

Joiners	2012	2013	2014
England	39,930	47,157	49,718
Scotland	4,291	5,454	6,218
Northern Ireland	2,686	3,468	3,281
Cymru/Wales	3,053	2,709	3,157
<b>Health total</b>	<b>49,960</b>	<b>58,788</b>	<b>62,374</b>

As agreed at conference 2014, the organising work of the health group was directed towards supporting the pay dispute and was badged as a key element of the union's 'Worth it' campaign. The health group worked with colleagues in regions, learning and organising services (LAOS) and the strategic organising unit (SOU) to produce guidance, training courses and to provide practical support to make sure that the union did not miss opportunities to use the pay campaign to increase the number of stewards and members.

Social media continued to play an important role in promoting UNISON's influence and as an organising tool. Facebook and Twitter accounts were used in promoting activity around the pay dispute and other campaigns, including the anti-privatisation initiatives described on page 19 and the NMC fees campaign. Health branches were encouraged to participate in the new 'organising space' developed by the SOU and live blogging, web chats and webinars were all used as a way to connect to stewards and regional organising staff.

## Recruitment in Cymru/Wales

In 2014, Cymru/Wales recruited 3,157 new members – an increase of 17% on the year before. It was also the highest amount recruited by the region in any previous year.

In October, the region recruited three fighting fund campaign organisers. Because the organisers started

their role during the NHS pay campaign, they were heavily involved in explaining the issue to NHS workers, ensuring a good turnout in the ballots for industrial action and consultation, and raising the union's profile in workplaces. Furthermore, they worked on recruiting and building capacity in all health branches in Cymru/Wales around local issues and regional campaigns such as the review of the Barnett formula. This additional resource and the NHS pay campaign helped the region to experience its most successful recruitment period of 2014 between October, November and December.

## Recruitment in Northern Ireland

In 2014, 3,281 members were recruited in Northern Ireland. Building on the recruitment success of the Northern Ireland fighting fund projects over the past two years, a number of branches again co-funded local organiser posts through the NEC fighting fund. Although the new staff did not commence their roles until August 2014, branches have already seen the benefit of their appointment.

In October 2014, the region reported to regional council that 11 branches had taken part in the fighting fund project this year. Of these, two exceeded their annual recruitment target, seven were on or near the target, and two were being assisted to reach it.

The region's 10 social services branches formed a consortium which enabled the employment of a second local organiser to work on the region's private homecare project. Eight of the 10 branches were near or exceeded their annual target, and a further two were on course to reach their target before the end of the project.

In early 2014, the Northern Ireland regional committee commenced detailed work on leavers in health and education. As a result of three years of austerity, thousands of members left both services. The regional committee project, led by organising staff, examined the extent of replacement of both jobs and union members.

Throughout the year, the region had outstanding success when recruiting and organising in the private sector. The region concentrated in particular on existing private sector membership in nursing homes,

contractors and its highly successful private homecare project. This increased the region's membership by several thousand private sector workers over the year.

The organising strategy in the private nursing home sector continued with steady success. The region's members were employed across nearly 400 private nursing homes. The majority of members recruited in the private nursing home sector worked as care assistants. However, members also included administrators, cleaners, laundry and catering staff, nurses, and increasingly, home managers.

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**Recruitment in Scotland**

In 2014, 6,218 members were recruited in Scotland – an increase of 14% on the year before. The Scottish region undertook a number of recruitment initiatives in its health branches. Many branches used local campaigns to encourage members to join the union. One example of this was the Lanarkshire Health Branch campaign to get all soft facilities management services (catering, cleaning, portering, etc) in Hairmyres and Wishaw General Hospital, currently employed by SERCO and ISS, brought back in-house.

The staff employed by SERCO and ISS are predominantly part-time, low paid female workers. Most of them do not have access to the NHS pension scheme with their pension provision being almost half that of a directly employed member of staff. The branch organised workplace visits, canteen stalls, public meetings, newsletters, briefings and a petition in support of the campaign. The campaign helped the branch reach over 5,000 members.

The branch received support for the campaign from across the political spectrum with many MSPs, MPs and locally elected members of both North and South Lanarkshire Councils writing to the board in support of members. The Scottish region petitioned members of the public in town centres in Lanarkshire, gathering over 4,000 signatures of support.

The UNISON campaign prompted an intervention from Shona Robison MSP cabinet secretary for health, wellbeing and sport who instructed the health board not to proceed with the proposed negotiated settlement with SERCO and ISS until she was

satisfied that all options open to the health board have been considered.

Furthermore, she commissioned the Scottish Futures Trust to undertake an independent review of the situation and to provide a report in order that she can be assured that the board has considered the UNISON campaign. The Scottish region wrote to her asking that the independent review take evidence from UNISON. As a result, the Scottish region will be able to present the case that will put people before profit as part of the review.

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**Private contractors unit**

UNISON's private contractors unit (PCU) continued to co-ordinate bargaining and organising in the private contractor sector. The unit had the national lead for the following major health related companies: Capita, Carillion, Compass/Medirect, Interserve, ISS Mediclean, Serco, and Sodexo.

Following the abolition of the various workforce codes in December 2010, and the Transfer of Undertakings (Protection of Employment) Regulations 2014 amendments, the PCU has liaised with regions on pay and other Agenda for Change terms and conditions developments in private contractors.

In accordance with the 2014 National Delegate Conference (NDC) resolution on organising in the fragmented workforce, the PCU has worked with the national strategic organising unit to ensure that recruitment and organising is prioritised in the private contractor sector. Work on this is at an early stage and a progress report will be made at the 2015 NDC.

Other work during 2014/2015 included:

- monitoring new tenders to assess the extent to which two-tier pay and conditions began to develop
- ongoing negotiations to develop recognition agreements with several large national employers
- working in partnership with employers, such as ISS, to reduce sickness absence rates, while resisting attempts to remove Agenda for Change sick pay entitlements.

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## **British Association of Occupational Therapists (BAOT)**

UNISON continued to work closely with the British Association of Occupational Therapists (BAOT), providing industrial relations support to its members and fulfilling BAOT's role as an NHS trade union.

At the College of Occupational Therapists' (COT) conference held in June, UNISON delivered a session looking at the impact on occupational therapists (OTs) of new service delivery vehicles, and the growing trend in local authorities to outsource many aspects of social care, including assessment and care management. The session was well received.

UNISON continued to raise relevant policy and industrial relations issues affecting occupational therapy staff across a range of stakeholder bodies. This included representing BAOT as a trade union at the NHS Staff Council, through Social Partnership structures, and in the submission of evidence to the PRB.

The national OT panel (made up of representative BAOT/UNISON stewards from across the UK) met three times during the year to discuss bargaining, organisational and campaigning issues relevant to OT members, and to contribute to an ongoing work plan including the development of the OT stewards network. UNISON continued to work closely with BAOT to encourage OT members to take up roles as stewards and to actively participate in their UNISON branch.

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## **British Association of Prosthetists and Orthotists (BAPO)**

UNISON's partnership with the British Association of Prosthetists and Orthotists (BAPO) continued through 2014-15. UNISON provided advice and support to individual BAPO members through the national BAPO branch based in the North West region, and ensured that BAPO's interests were represented in ongoing policy work.

Regular UNISON updates were sent out to the BAPO network on issues affecting prosthetists and orthotists at work, including during the industrial action. BAPO's executive committee received regular reports from UNISON on activities undertaken on

behalf of members. UNISON continues to liaise with BAPO's executive committee to strengthen the relationship between the two organisations.

During the period, UNISON provided support, guidance and representation to BAPO members in need of trade union assistance.

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## **College of Operating Department Practitioners (CODP)**

This year was an important year for UNISON and the College of Operating Department Practitioners (CODP). CODP merged fully with UNISON to become part of the science, therapy and technical (STAT) occupational group and ceased to be a UNISON subsidiary.

The merger required a change in membership structure whereby CODP members who were not also UNISON members were required to join UNISON in order to retain their CODP membership. A CODP area of the UNISON website was created and the bi-monthly journal was replaced with an ODP newsletter. These initiatives were designed to maintain the identity of the college and attract new members.

CODP has worked hard to set out how its role as a regulator stakeholder and a representative body can continue to function within UNISON structures.

CODP and UNISON continue to work to maintain the high profile and international respect they have earned representing ODPs and theatre staff.

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## **Managers in Partnership (MiP)**

Managers in Partnership (MiP), UNISON's joint venture with the FDA, has 6,000 members working in healthcare management.

This year's activity was dominated by the pay dispute, with MiP members and officers joining UNISON colleagues on picket lines and at rallies around the country, attending the lobby of MPs and promoting the case for fair pay through our publications and social media.

This year, MiP launched a campaign for respect for NHS managers jointly with the Health Service

Journal. Patient campaigners and clinicians have joined MiP to call for a change of attitude towards NHS managers, for politicians of all parties to treat managers with the same respect they would accord the rest of the NHS workforce, and to acknowledge the essential job they do for patients and the public.

The campaign was launched at MiP's annual conference, Managers Matter, in London in November. That and the issue of fair pay dominated the conference, attended by over 250 delegates and chaired by Channel 4 health correspondent Victoria Macdonald. Speakers included NHS England chief executive Simon Stevens and health minister Dr Dan Poulter. Other work included:

- joining UNISON colleagues in recruitment events at local employers
- working with UNISON colleagues in partnership to defend the interests of our members in arms length bodies as they faced swingeing cuts
- working with Big Difference Company to deliver a series of seminars on building personal resilience and patient engagement, which will be rolled out over the coming year
- delivering a programme of master classes, with support from the Union Learning Fund (ULF), to help members develop their own skills and those of their staff.

# Objective 2: negotiating and bargaining

## NHS pay

As agreed at conference 2014, campaigning on pay was the main focus for the health group over the year. Formal disputes in England, Wales and Northern Ireland absorbed significant resources in regions and UNISON Centre.

The government ignored a PRB recommendation to pay 1% consolidated to NHS Staff in all four UK countries from 1 April 2014. This led to different pay scenarios unfolding across the four countries.

Scotland was the only country to implement the PRB recommendation, plus additional sums at the bottom of the pay scales (See Scotland section on page 13).

Cymru/Wales planned to implement an uplift of the same total sum as in England. Following initiation of a formal dispute, members voted to take industrial action. NHS staff were offered an improved package which delivered the Living Wage in addition to a consolidated sum on all pay points. UNISON's HSGE endorsed the decision of branches in the region to accept the offer in November 2014 (See Cymru/Wales section on page 12).

Northern Ireland did not implement any pay uplift for NHS staff from April 2014. At the time of writing, UNISON was in formal dispute and balloting members for industrial action (See Northern Ireland section on page 12).

In England, the Department of Health imposed a pay freeze for 60% of NHS staff, with only those at the top of their pay scales given a non-consolidated sum of 1%. Pay rates for 2014/15 remained the same as 2013/14.

### NHS pay dispute – England

In accordance with motions from conference 2014 a formal dispute was initiated with the Westminster government and NHS employers in England. Preparations were made for a ballot of all NHS members in England and work undertaken to coordinate with other NHS trade unions. During this period of preparation, the health group worked closely with regions to undertake campaigning activities. These included:

- fair pay in the NHS included as part of the

### 'Worth it' campaign

- social media presence
- membership surveys
- joint union days of activity
- press calls and political meetings
- representative lobby of parliament and coordinated constituency lobbies.

The campaign was run under the overall umbrella of the 'Worth it' campaign. Much work was done to coordinate the fair pay campaign and formal dispute with other NHS trade unions. Agreement was reached on a pay campaign involving all trade unions and included political lobbying work and general campaigning on fair pay and implementation of the PRB award. Importantly, UNISON worked closely with those trade unions that also entered into a formal legal dispute with employers to agree timetables and campaign messages and encourage joint work at local level in the run-up to and during periods of industrial action.

UNISON balloted around 250,000 members in England over a four-week period in the autumn of 2014, resulting in a mandate for the union to call industrial action for fair pay in the NHS. Work undertaken to support the dispute included:

- a suite of campaigning materials including MP communications, syndicated press stunts, public-facing leaflets and stickers
- mobilising materials, including industrial action guidance, planning workshops and workplace presentations
- organising materials including posters, leaflets, stickers and other publicity, direct email and SMS communication to members
- advice to branches (general and bespoke) on technical issues including emergency cover, exemptions, professional registration and deductions from pay
- social media campaign for the strikes 'take your breaks' and 'don't work for free' periods.

For four hours on Monday 13 October, members of UNISON took the first NHS pay strike for three decades, along with colleagues from other unions. The strike received supportive and comprehensive coverage in all forms of media, generating lots of support from the public and influencers. The strike was followed by a short period of action short of strike in the form of a 'take your breaks' activity, during which many branches ran organising and recruitment initiatives in workplaces. Bespoke action short of strike was also organised in ambulance trusts.

More unions joined the dispute and a second four hour strike was held on Monday 20 November. This was well-supported by the public, although it did not achieve the same levels of media dominance as the first strike. The strike was followed by a period of 'don't work for free' action short of strike, which again was used as an organising and recruitment initiative by many branches.

Although this action achieved public and member support, it did not lead to an improvement in the offer from the government. Indeed, having stood down the NHS PRB for the 2015/16 pay round, the Department of Health for England confirmed that it would again freeze pay for most staff in 2015-16, repeating the pattern by paying a non-consolidated sum to only those on the top of their pay band. Following further consultation with regions, it was agreed in November 2014 to escalate action in order to bring about a negotiation. Consequently, a 12-hour strike was called for 29 January 2015 with plans for a 24-hour strike to follow in February.

As a result of this planned action, the government held urgent negotiations and made an offer which increased the money to be spent on the 2015-16 pay bill. At the time of writing, UNISON, along with the other NHS trade unions, was in consultation to determine if members wished to accept the offer or to continue with the programme of industrial action. Work was underway to provide members with detailed information on how the offer would affect them, and to work with regions and branches to ensure all members were given the opportunity to vote on what was being proposed.

### **NHS Pay Review Body Round 2015-16 (Scotland)**

Ministers in Scotland issued a remit for the NHS PRB to take evidence for pay 2015-16 and make recommendations consistent with published pay policy. Scottish public sector pay policy announced in September 2013 included a provision for an increase in basic pay for all staff. This increase is subject to an overall cost cap of 1%. UNISON submitted detailed written evidence to the PRB on behalf of members in Scotland. The evidence called for a fair pay rise for all NHS staff in Scotland which protects the value of NHS pay against prevailing inflation rates, pay policy that continues to protect the lowest paid workers in the NHS with delivery of the Scottish Living Wage and the evidence noted concerns staff side unions have on moving away from a four-country system for NHS pay.

An oral evidence session was held in November 2014 and health group staff from the region and UNISON Centre attended and gave evidence to the PRB in support of these claims. At the time of writing, the report of the PRB had not been published.

### **NHS Pay Review Body Round 2015-16, Seven-Day Services**

Health minister for England Dr Daniel Poulter MP wrote to the PRB in August 2014 to inform them that they would not be required to make recommendations on NHS pay rates for 2015-16. Instead they were asked to look at the 'barriers and enablers' to extending seven-day services across the NHS and how this could be done within existing budgets.

The NHS PRB responded to this remit by requesting detailed information from submitting bodies about current arrangements and costs of unsocial-hours working and calling for views on what factors acted as barriers or enablers to extending services needed in order to improve out-of-hours care. Shortly before the deadline for receipt of evidence, it was confirmed that the remit would also cover staff in Cymru/Wales and Northern Ireland.

In response, UNISON submitted detailed evidence to the PRB consisting of a response to the specific technical questions and particularly about the need for detailed workforce analysis of the likely impact of

extending services, and the potential to further incentivise 'hard to fill' shifts through additional payments. Also included in the evidence was a piece of qualitative evidence commissioned from Keele University. This report supported our evidence that staff had become increasingly reliant on unsocial hours payments since the start of the pay freeze, and demonstrated the dreadful impact that any cuts to these rates would have on members' standards of living and on the ability of the NHS to fill night and weekend shifts.

Evidence submitted to the PRB by the Department of Health (England) and the NHS Employers' organisation did not respond to the broader workforce elements of the remit but contained a list of options for changes to the payment systems for unsocial hours. UNISON highlighted these documents as evidence of the likely attack on unsocial hours payments for NHS staff in England (and potentially Cymru/Wales and Northern Ireland).

At the time of writing, the health group was due to attend an oral evidence session.

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## Agenda for Change

### NHS Staff Council

UNISON held the chair of the NHS Staff Council during the period of this report, with an AGM due at the time of writing. UNISON's delegation to the Staff Council was voted in at the HSGE AGM in July, and met ahead of meetings of both the Staff Council executive and full meetings. An update on Staff Council issues was given at HSGE meetings during the year. Key Staff Council agenda items over the period included:

- updates on Wales changes to Agenda for Change – implementation of the '2013 England' changes to terms and conditions plus an all-Wales agreement on mileage
- refreshed remit and operational plan for the Job Evaluation Group
- Section 27 (working time) review – continuation of work started last year to bring NHS terms and conditions in line with latest practice on Working Time Regulation issues

- Section 16 (redundancy) – after an initial meeting held in March 2013, the trade union side of the Staff Council withdrew from formal talks on potential changes to section 16
- Update of disability, flexible working and parental leave policies to bring them in line with legislation
- Review of High Cost Area Supplement (HCAS) – a review of HCAS was conducted by Frontier Economics and presented to the NHS Staff Council in July 2014. The report concluded that there was insufficient evidence on which to make recommendations to change HCAS.

In November 2014, the NHS Staff Council asked for and received a report from Sir Bruce Keogh on the 'seven-day services' vision.

The trade union side of the NHS Staff Council also commissioned work to support their arguments about the need for parties to Agenda for Change to return to a shared philosophy on pay and incremental progression. This was produced in anticipation of future threats to incremental structures.

In addition to these items, the NHS Staff Council and Executive received regular reports from the three devolved country Agenda for Change structures (see country reports below) and standing groups. These groups include:

- Working Longer Review
- Equality and Diversity Group
- Job Evaluation Group
- Health and Wellbeing at Work Group.

### Annex E (unsocial hours' payment system for ambulance trusts (England))

UNISON successfully defended unsocial hours' payments for ambulance staff. Following the cycle of deductions (deemed unlawful by UNISON), industrial action consultative ballot and withdrawal/repayment of deducted monies by employers in 2013/14, the trade unions entered negotiations with employers on the issue of potential changes to Annex E. An outline agreement in principle was reached in the summer of 2014 but the offer was withdrawn by employers before consultation could commence. The trade

union side argued against a move to section 2 and initiated a joint data collection exercise to inform this position. Employers also commenced a high court action seeking a judgement which supported the legality of deducting from Annex E without staff side agreement. At the time of writing, employers had made the offer to cease this court action and other plans to move from the current system of payment.

### Support to branches and regions

Guidance and advice was circulated in branch circulars, and staff from the health Group continued to provide regions and branches with support on particular Agenda for Change and terms and conditions issues on request. Common requests for advice included local incremental pay policies; downbanding; and implementation of the revised mileage scheme.

The health group also fed in to cross-service group work on terms and conditions issues such as casualisation and zero hours working and the impact of the *Lock v British Gas* case on pay during annual leave.

### Threats to Agenda for Change

Following two years where a number of employers in England sought to use 'dismiss and reengage' strategies to move away from Agenda for Change, there were no reported breakaways from Agenda for Change by NHS organisations. A poll of employers undertaken by NHS Providers in November 2014 showed that the majority of NHS organisations supported the principle of national pay, terms and conditions.

Threats to Agenda for Change during this period arose mainly from the implications of the Health and Social Care Act on organisational forms and contractual relationships (see Care UK dispute in Objective 3). UNISON continued to press for Agenda for Change to be embedded in NHS provider contracts in England and used meetings of the Staff Passport Group (a sub-group of the NHS Social Partnership Forum) to highlight two-tier workforce issues arising from certain contractual practices, sub-contracting to a wholly owned subsidiary or arms length organisation in particular.

### Cymru/Wales - pay, terms and conditions

Last year, following a suspended day of strike action and a successful consultation, UNISON Wales reached an agreement with the Welsh government and NHS Wales employers regarding NHS pay. The agreement reached included a one-off, non-consolidated payment of £187 pro-rata, a 1% pay uplift from April 2015 and the implementation of the Living Wage for all Agenda for Change staff across all health boards in Wales. The deal is for two years, with pay strategy from 2016 onwards to be looked at by an NHS Wales Workforce Commission.

UNISON members in Wales were consulted on changes to Agenda for Change for NHS Wales. The areas for consultation with staff principally comprised changes which were subject to consultation across the NHS in England during 2012. These changes took effect from 1 January 2015 and last three years.

Further negotiating and bargaining activities that UNISON undertook included:

- revising the all-Wales email and internet policy
- working with employers to bring down sickness levels by revising sickness absence policies and procedures.

### Northern Ireland – pay, terms and conditions

UNISON Northern Ireland produced comprehensive analysis of the overall health budget and trust delivery plans. This analysis was used by activists and lead negotiators when negotiating and in public campaigns in the region.

The absence of any meeting of the health partnership forum for the past 18 months has distorted this landscape. The regional secretary and head of bargaining met the new permanent secretary in health in early October 2014 in an attempt to move the agenda forward. In addition, UNISON intervened with the acting chief executive officer of the Belfast Health and Social Care Trust to ensure genuine engagement on fundamental change matters in accident and emergency.

This year, Agenda for Change and job evaluation dominated the agenda of the Northern Ireland joint

negotiating forum which included all health unions, the Department of Health, and health trusts.

Regarding Agenda for Change, UNISON secured agreement until November 2014 from employers that decreases in mileage rates would be delayed until the crisis in the payroll system was fully resolved. UNISON continued to highlight the particular needs of the social care workforce and UNISON activists engaged with each trust to address the particular combinations of travel and mileage that UNISON members experience.

Regarding job evaluation, UNISON congratulated its representatives that worked tirelessly to uphold the job evaluation processes. Key actions UNISON led on included:

- holding Agenda for Change awareness sessions to defend terms and conditions
- maintaining job evaluation processes in partnership
- supporting members against potential down bandings
- supporting those identifying role changes and ensuring they go through the proper processes
- challenging health trusts and Northern Ireland Practice and Education Council for Nursing and Midwifery (NIPEC) who were trying to bypass regional processes by making changes without agreement to job descriptions or drawing up new ones
- human resources policy reviews on grievance and disciplinary processes, including a draft review document on the Working Time Directive.

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## Scotland – pay, terms and conditions

Regarding NHS pay in Scotland, UNISON submitted evidence on behalf of the Scotland region to the PRB on 19 December 2014.

Regarding NHS terms and conditions in Scotland, UNISON Scotland:

- is awaiting an offer from the employer regarding equal pay

- set up a working group to consider High Cost Area Supplements with the aim of agreeing a Scotland-wide protocol
- raised the ruling in *Lock v British Gas* with the employers and established a working group with the intention of achieving a Scotland-wide agreement. In the case, the court ruled that employees whose pay is commission based are entitled to holiday pay that includes their commission
- circulated information to branches about a new mileage rate that had been established.

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## NHS Pension Scheme

In June 2014, governance arrangements for the NHS Pension Scheme (NHSPS) changed to comply with the new rules required under the Public Service Pensions Act 2013. These were implemented in shadow form ahead of full implementation in April 2015.

The Pension Board seeks to ensure compliance with scheme regulations. The Scheme Advisory Board (SAB) makes recommendations to the secretary of state on the desirability of scheme changes. UNISON held seats on both boards and held the deputy staff-side chair of the SAB.

The SAB (composed of representatives from the Department of Health, NHS Employers, HM Treasury, the government Actuary's Department and NHS trade unions) continued the work of the NHS Pension Scheme Governance Group, discussing policy affecting the NHS pension scheme.

Discussions focussed on the implementation of the new 2015 NHS Pension Scheme and ensuring that it reflected the Proposed Final Agreement agreed in 2012, as well as how the contribution rates for the new scheme should be set. UNISON, along with the trade unions representing the majority of NHSPS members, argued that because scheme members had incurred three successive years of pension contribution rate increases there should be no further consideration of changes to the contribution tiers until at least after the 2016 valuation of the NHS pension scheme had taken place. This was agreed although the government fixed the contribution tiers so that

they would no longer be up rated annually in line with any Agenda or Change pay rises, potentially pushing some scheme members into a higher contribution tier earlier than they otherwise would have been.

UNISON’s pensions unit held numerous pensions clinics as well as regional presentations and briefings to help members to understand the new 2015 pension scheme.

UNISON continued to hold a seat on the communications subgroup of the SAB where communication materials were produced jointly between the Department of Health, NHS Employers, NHS trade unions and NHS Pensions for the Choice 2 exercise, which began in October 2014 and affected half a million NHSPS members. Choice 2 was a rerun of the original Choice exercise which gave members of the 1995 section of the NHSPS the opportunity to move their benefits to the 2008 Section. The exercise was rerun due to the changes in the normal pension age of the new 2015 scheme which may have altered scheme members’ original decisions.

After long negotiations and discussions between the Department of Health and NHS trade unions, the widening Access regulations to the NHSPS were introduced allowing staff delivering NHS services employed by independent providers to become members of the NHSPS when they had not been compulsorily transferred. Under the Access scheme, independent providers can choose from two levels of Access: Access for existing scheme members or Access for all eligible staff who are wholly or mainly employed on NHS work. Alternatively, independent providers can choose to maintain the default position where they only comply with New Fair Deal regulations so only staff who had been TUPE transferred would be eligible.

.....  
**Working Longer Review (WLR) Group**

UNISON continued to hold the chair of the staffside of the Working Longer Review (WLR) – a partnership review group between NHS trade unions, NHS employers and health department representatives.

Last year, UNISON participated in a longitudinal study by the London School of Economics and the Medical Research Council looking at the impact to staff, patients and services of working longer.

Additionally, the WLR group published a report entitled “NHS Working Longer” making 11 recommendations, which have since been approved by the relevant government minister.

Recommendations included the need for more specific data to be collected on the impact of extending the retirement age for NHS staff.

.....  
**Equality**

UNISON continued to champion the equal treatment of its members and maintained its membership on NHS England’s Equalities and Diversity Council (EDC). As part of this work, UNISON collaborated to refresh the equality delivery system and to produce three large pieces of guidance on maternity, disability and flexible working.

Following publication of the “snowy white peaks” research report, UNISON helped develop a comprehensive work plan to look at why black and minority ethnic staff were far more likely to face disciplinary action than white staff.

UNISON responded to the EDC’s consultation regarding its equality delivery system, which will become a mandatory requirement in April 2015, and contributed to the development of its race equality standards. UNISON supported the decision to embed the race equality standards in the NHS constitution.

The health group worked with colleagues in UNISON’s membership participation unit (MPU) to provide advice and guidance on a variety of issues as required. The health group also participated in the self-organised groups’ conferences throughout the year.

**Lesbian, Gay, Bi-sexual and Transgender (LGBT)**

UNISON’s health group continued to campaign on a range of workplace and service delivery LGBT health equality issues in partnership with our MPU and continued to work with NHS Employers on issues affecting LGBT staff working in the health service.

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**NHS Staff health and wellbeing**

UNISON continued to provide representation on the NHS Staff Council’s Health and Safety Wellbeing and Partnership Group (HSWPG).

UNISON campaigned, through press and news stories, to expose the impact of cuts to staff and services on the health and welfare of NHS workers. In particular, it highlighted the increase in stress levels and the number of assaults, both physical and verbal, on NHS staff.

UNISON also worked with European partners through the European Federation of Public Service Unions, the European Bio Safety Network and the European Trade Union Federation.

In particular, UNISON worked with safer needles and European bio-safety networks to campaign for the full implementation of the 2013 Health and Safety (Sharp Instruments in Healthcare) Regulations 2013. This campaign exposed the reluctance of some NHS employers to use safer needlestick devices.

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## **'New' NHS Structures in England**

### **NHS England**

UNISON worked hard to establish negotiating and partnership arrangements with NHS England. A national partnership committee and a series of sub groups undertaking specific functions were created. All of these were populated by a majority of UNISON elected lay representatives supported by the UNISON national officer who chaired the national partnership forum.

However, the Department of Health set very severe cuts targets on NHS England to apply from 1 April 2015. For six months, the union was in discussions about the impact of these cuts which would result in approximately 350 redundancies. At the time of writing, the union remained hopeful that most of the redundancies would be voluntary and, given that considerable numbers of staff expressed an interest in voluntary redundancy, the challenge may be met to achieve these cuts consensually.

NHS England continued with the reorganisation of primary care support services, which affects over 1,800 staff and some 800 UNISON members. In the summer of 2014, a transfer of the whole service to Shared Services Connected Ltd (a company 50% owned by the Cabinet Office and 50% owned by Steria Ltd) seemed likely. However, in July 2014, NHS England decided not to proceed with this

transfer after taking legal advice. It also decided to reject an in-house reorganisation of this service.

Since then, NHS England undertook a full European Union procurement process on a £1bn contract over 10 years. UNISON opposed this huge privatisation programme forcefully with good media coverage. In September 2014, a bidder event to meet potential private contractors garnered interest from the arms manufacturer Lockheed Martin and KPMG whose new director had been a member of the Tory cabinet. This was revealed in leaks to the media. Online petitions against these companies gathered hundreds of thousands of signatures.

In the end, NHS England selected three other companies (Capita, Equiniti and Capgemini) as preferred bidders. At the time of writing, their bids were being considered. However, NHS England announced that no decision on award of the contract will be made until after the general election. While this was frustrating for UNISON members, it held the prospect of this £1bn contract not going to a huge private company and this work and our members staying in the NHS.

UNISON set up a national forum for its stewards across NHS England. This body elected its representatives to the various partnership committees with the employer. The national forum met regularly over the past year. Work was undertaken to strengthen UNISON within NHS England with some organising resources being devoted to recruitment of members and stewards in the large central offices in Yorkshire and London.

### **Health Education England (HEE)**

HEE were set target reductions in their operating budget meaning that a major reorganisation to reduce posts was started. It was anticipated that much of the reduction would be achieved by natural wastage and voluntary redundancy.

Through partnership structures UNISON was involved in work to protect jobs and pay and support members through the reorganisation process.

UNISON was represented on the national partnership forum by both a UNISON lay representative and a national officer. In common with the other new national bodies, UNISON's organising resources were

directed to encouraging regular meetings of stewards in a national forum alongside supporting recruitment activities aimed at winning new members and new stewards.

**Public Health England (PHE)**

PHE – essentially a civil service organisation with a ring-fence of staff on NHS terms and conditions of employment – embarked on a major reorganisation. This reorganisation was driven by the need to make cuts in their operating budget, which was cut by the Department of Health.

This reorganisation will result in fewer jobs. Voluntary redundancy is being offered to staff. However, it seems likely that staff will nevertheless be made compulsorily redundant at the end of the reorganisation.

UNISON continued to be represented on the PHE national partnership forum by both a lay representative and a national officer and was fully engaged in all the discussions with the other recognised trade unions.

**NHS Property Services**

UNISON continued to be the main union representing staff in NHS Property Services.

Having established a national partnership forum, UNISON took a leading role through its position as staff side secretary. The forum became an integral part of the partnership process in NHS Property Services and met bimonthly.

The UNISON NHS Property Services’ activist forum, which consisted of representatives from across the UNISON regions in England, met on a regular basis. It played an active role in producing monthly members’ newsletters and elected a delegate to sit on the national partnership forum.

UNISON continued to negotiate the harmonisation of a wide range of human resource policies in 2014/15. This work took place through the policy sub-committee of the national partnership forum.

During the period covered by this report, NHS Property Services went through a series of business redesign programmes in the asset, facilities and corporate services directorates. UNISON was heavily

involved in the respective consultation processes and in providing support and advice to members.

**Commissioning Support Units (CSUs)**

Members working in CSUs are ‘hosted’ by the Business Services Authority (BSA) pending their spinout into private companies.

UNISON retained reasonable membership despite the declining number of CSUs. The decline arose from mergers and loss of business with clinical commissioning groups (CCG). UNISON had stewards in most of the CSUs and had a national partnership forum. Staff are employees of NHS BSA, but work in individual CSUs is managed overall by NHS England. UNISON has worked hard to maintain a national partnership forum for CSUs.

The national partnership forum contained representatives of managing directors of CSUs together with the recognised trade unions. Steps were taken by UNISON to create a national forum of CSU stewards and from there to elect their representatives sitting on the national forum and its various sub groups.

UNISON secured agreement with the management side of the CSU partnership forum to expand its membership to include elected lay UNISON representatives to sit on the body and its sub committees. A new partnership agreement was being created which recognises UNISON as the primary trade union for staff in the CSUs.

The introduction by the Department of Health of a Lead Provider Framework for commissioning support has very serious implications for CSU staff beyond 2016, particularly for those working in the North West and Yorkshire and Humberside CSUs which have not been accepted on to the Lead Provider Framework.

.....  
**Other National Employers (England)**

**NHS Blood and Transplant (NHSBT)**

The long-established national forum elected by representatives of the NHS Blood and Transplant (NHSBT) branches across the regions continued its work within NHSBT. UNISON remained the lead union, working well with the other health trade unions

in the bargaining and partnership structures within the employer.

The last year was a very challenging one for UNISON members and the union within NHSBT. Every part of the organisation was subject to reorganisation, though not every reorganisation resulted in job losses, which when they occurred were mainly voluntary.

One of the most difficult was the reduction of blood collection teams across England following a sustained drop in the demand for blood in the health service. Several teams were reorganised and UNISON's stewards spent large amounts of time working with UNISON members locally and with managers in trying to do this in the best way possible.

The Staff Partnership Committee, whose trade union side was chaired by UNISON, continued to do its work on developing agreements on unsocial hours pay and on-call – making use of the best agreements in the NHS. Because NHSBT incorporated Annex E into their local agreement, the national discussions in the ambulance service were being watched very carefully by UNISON members in NHSBT.

Trade union membership continued to be consolidated and UNISON retained a very high ratio of stewards to members within NHSBT.

The forum worked closely with colleagues in the blood services of Wales and Scotland, sharing practice and strengthening the union in the blood services across the whole of the UK.

### **NHS Supply Chain (NHSSC)**

In February 2014, NHSSC entered into pay negotiations with UNISON. A number of initial offers were made by the employer and rejected by UNISON after consultation. A revised pay offer of 2% from April 2014 (backdated) and 1.75% from April 2015 was put to UNISON members who subsequently voted to accept the two-year pay offer.

## Objective 3: campaigning

Although the pay dispute and the wider ‘Worth it’ campaign for fair pay absorbed much of the resource of the health group over the year, campaigning activity continued on other key areas. In addition to supporting the campaigns detailed in the occupational group reports (eg better hospital food; safe staffing levels; NMC fees), UNISON worked with partners and through formal NHS structures to oppose privatisation and reduce the effects of fragmentation and marketisation of the NHS.

### National Social Partnership Forum (England) and sub-groups

The national Social Partnership Forum (SPF) (England) continued to provide a focus for national engagement and dialogue, and to debate and influence the workforce implications of government health policy. UNISON’s National Secretary for Health is staff side chair and lead officer for the 16 NHS trade unions represented on the SPF.

UNISON continued to support the philosophy of partnership working because it puts an onus on both employers and trade unions to engage and consult on all decisions that affect staff.

This year it was agreed to establish an SPF strategy group bringing together senior representatives from the Department of Health, NHS England, Health Education England and NHS Employers, along with representatives from the main trade unions. UNISON’s National Secretary for Health co chairs this group with the CEO of NHS Employers. This smaller group has met to discuss key workforce issues in more detail.

Over the year, the SPF held regular meetings of its wider, strategic and sub-groups, and worked in partnership to discuss a wide range of policy areas affecting the healthcare workforce. At the time of writing, discussions centred on seven-day services, NHS Five-year Forward View and the need for an underpinning workforce strategy. Other key areas of work undertaken throughout the year included the following:

#### Staff engagement guidance

The government’s response to the Francis Inquiry report ‘Hard Truths’ requested the SPF produce guidance to support staff engagement in the NHS.

The SPF published guidance which built on the six key messages identified by the SPF and featured in the Francis Inquiry report into Mid Staffs Hospital. The guidance has now been published and is available on the SPF website.

#### Patient safety

SPF maintained a regular dialogue with the Care Quality Commission’s chief inspectors of hospitals and social care to discuss the impact of staff engagement on the quality of patient care and identify how to improve partnership and staff engagement within health and social care organisations.

#### Employee engagement and patient outcomes

SPF continued to liaise closely with professor Michael West from the King’s Fund/Lancaster University who has undertaken numerous pieces of evidence-based research on the importance of staff engagement in relation to the quality of patient care.

#### Staff Passport Subgroup (SPG)

Through the SPG, the SPF played a vital role in providing clarity on New Fair Deal and, working with HM Treasury, produced a set of frequently asked questions about the application of New Fair Deal in the NHS for independent providers. It also produced guidance about the application of ‘access’ to the NHSPS for independent providers who employ staff working on NHS clinical contracts who have not been directly transferred from the NHS. UNISON, alongside the other trade unions on the SPG continued to press for access for all staff working on these contracts, not just clinical staff.

The staff side continued to press for the inclusion of Agenda for Change terms and conditions to be included in the NHS standard contract as well as for the NHS sub-contract to be made mandatory, so that sub-contracting of NHS services is not seen as a way to reduce terms and conditions or accountability. The SPG also engaged with Monitor and NHS England around the national tariff for 2015/16.

UNISON, along with the other trade unions on the group, pressed for further information and engagement on the government’s Mutuals in Health programme which encouraged NHS trusts to become mutuals. UNISON continued to raise serious concerns

at the SPG and through Labour Link that this programme was about privatisation.

### **Raising concerns at work**

To promote the importance of staff raising concerns, SPF produced posters and campaign materials to encourage staff to raise concerns when they were aware of a risk, wrong doing or malpractice in their organisation.

### **Flu fighter campaign**

Continuing its support for the NHS flu fighter campaign, SPF produced a suite of model letters that local organisations could use to encourage staff to get their seasonal flu jab.

The SPF, keen to collate and disseminate good practice examples of partnership working at local level, sponsored a national award through the HPMA to recognise and celebrate effective partnership working at local level.

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### **NHS Support Federation**

UNISON's work with the NHS Support Federation (NHSSF) continued to pay dividends, with the organisation's 'NHS for sale' monitoring work featuring prominently in BBC coverage of the NHS and in the print media. The latest reports suggest that £4.8bn of clinical contracts were awarded through the market since the Section 75 regulations were passed in April 2013, and that two-thirds of these were won by non-NHS providers; as much as a further £13bn of contracts remain in the pipeline and is potentially up for grabs.

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### **Anti-privatisation success stories**

Following the victory at George Eliot Hospital in early 2014, UNISON celebrated another success as Weston Area Health Trust in Weston-super-Mare opted for an "NHS only" future. This meant that the Weston General Hospital was pulled back from the brink of a private franchising operation. UNISON's vocal campaign on the ground argued throughout the process for an NHS solution rather than handing over patient services to unaccountable private operators.

In October, it was announced that elderly care services in Cambridgeshire would remain under NHS

management and control. This was the culmination of a lengthy campaign by UNISON in the Eastern region, working with campaigners and patients.

This was followed a week later by further good news. Following much UNISON campaigning, Dorset County Hospital announced its decision to retain pathology services in-house, rather than outsourcing to a privately run regional centre.

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### **Hinchingbrooke**

In January 2015, the news broke at Hinchingbrooke hospital in Huntingdon – the blueprint for the "franchising" model – that private operator Circle was to pull out of their 10-year contract to run the hospital after only three years. This announcement pre-empted a damning report by the Care Quality Commission on the way Hinchingbrooke had been run.

UNISON warned of the problems with this approach from the outset. As a result, UNISON was the first port of call for virtually all media outlets on the day of the announcement, with the union warning that patients and staff now faced huge uncertainties about the future.

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### **Care UK**

UNISON members working for Care UK made the history books by taking a total of 90 days of strike action by the end of 2014. The dispute started in March 2013 over cuts to pay when the learning disability service they worked for moved out of the NHS. The dispute highlighted the threats to quality of care that arose from this outsourcing of care services. The strike action led to concessions from the employer and an improved package including a multi-year pay offer that was accepted by members in November 2014. The dispute was strongly supported by branches, the Yorkshire and Humberside region and the union nationally and achieved a high profile within UNISON, the TUC and the wider public and media.

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### **The "Prime Provider" model**

The use of the "prime provider" model took off in 2014-15. In the most high-profile example, the coordination of £1.2bn of cancer and end of life

services in Staffordshire will be handed to an external organisation (or organisations). The shortlist of bidders was revealed in November 2014 and included the likes of United Health and Virgin Care.

UNISON did much work nationally and regionally to challenge the Staffordshire procurement, with advice and assistance available to other areas. This work included detailed briefing of Labour and Liberal Democrat MPs on the House of Commons Health Select Committee ahead of a session with those responsible for the Staffordshire procurement. UNISON also sought meetings with the clinical commissioning groups (CCG) and charities responsible for this exercise to highlight staff and union concerns.

.....  
**Clive Efford’s NHS Bill**

Clive Efford MP produced a private member’s bill to repeal the worst elements of the Health and Social Care Act 2012 towards the end of 2014. The Bill aims to restore full responsibility to the secretary of state for providing a comprehensive health service free at the point of delivery. It would remove those parts of existing legislation that enforce market competition in the NHS and would prevent hospitals from prioritising private patient income at the expense of NHS patients. The Bill attempts to make sure that the forthcoming Transatlantic Trade and Investment Partnership (TTIP) does not subject the NHS to competition and market obligations.

UNISON encouraged members to sign the government e-petition in support of the Bill and to contact their MPs to make sure they attended the Parliamentary debate on the Bill. UNISON was an integral part of the Trade Union Labour Organisation (TULO) campaign to raise the profile of the Bill, which included a number of campaign days around the country.

The Bill passed its first hurdle on 21 November when it was debated by MPs and received the overwhelming support of 241 MPs (with only 18 voting against), including a number of Liberal Democrats and Conservatives who were convinced to vote against the government. The debate allowed a number of politicians to raise important issues for UNISON, such as the billion-pound procurement of primary care support services by NHS England and

the controversial use of the “prime provider” model in Staffordshire. The challenge since has been to keep alive the issues raised by the Bill.

.....  
**Health Select Committee**

In October 2014, UNISON produced a substantial submission to the House of Commons Health Select Committee’s inquiry into public expenditure. The response particularly emphasised ongoing UNISON campaigns on NHS pay and in defence of the Care UK workers.

UNISON pointed out that the government’s Better Care Fund seems unlikely to achieve its aims of a more seamless service between health and social care, with its emphasis increasingly placed on cost-cutting measures. UNISON highlighted the substantial increase in privatisation since 2010, and the growing body of domestic and international evidence showing that competition has a negative impact on the quality of NHS services. The response also challenged the use of personal health budgets in the NHS, and pointed out the grave concerns that the union has about the potential impact on the NHS and public services of TTIP and other international trade deals.

.....  
**UNISON National Delegate Conference**

The NHS featured on the agenda of national delegate conference in June 2014, with motion 46 (“An NHS for the future”) calling for support for the NHS and defence against privatisation.

.....  
**TUC Congress**

UNISON put up speakers on the NHS composite which was debated on the floor of Congress. Furthermore, UNISON played a prominent part in an NHS fringe meeting, with the union outlining the ongoing NHS pay campaign and encouraging union members to get behind Clive Efford’s NHS Bill.

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**Labour Party Conference**

UNISON had speakers on the NHS resolution on conference floor and also organised a fringe meeting as part of the ‘Worth It’ campaign that allowed the union to raise important issues around public sector pay.

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## Safe Staffing Level Survey 2014

For the third year running UNISON conducted a safe staffing levels survey. It was conducted on 4 March 2014. Despite the survey being held on a normal working day, 51% of nurses working that day told us that there were not sufficient numbers of staff to deliver dignified, compassionate care. The union's findings made the front page of the Daily Mirror and helped to influence mandatory tools in Scotland and Wales and NICE guidance regarding safe staffing levels.

UNISON is proud to be a founding member of the Safe Staffing Alliance which campaigns for safe staffing levels. In January 2015, the Safe Staffing Alliance published its manifesto calling on the government to ensure that there are sufficient nurses in all areas of service provision.

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## Be safe training

The be safe training course was refined following pilots held in 2014. UNISON regions began to roll out the training although this was slower than originally planned due to the impact of the NHS pay dispute.

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## Francis, Berwick, Keogh and Cavendish reports

Although the Frances, Berwick, Keogh and Cavendish reports were published in 2013, further work relating to the reports continued over the last year.

UNISON attended focus groups and met with Robert Francis in relation to an independent review on creating an open and honest reporting culture in the NHS called "Freedom to speak up". At the time of writing, the union was awaiting publication of the second Francis report.

UNISON responded to the GMC and NMC consultations regarding the inclusion of a duty of candour requirement in their respective codes of conduct following the Berwick report into patient safety in the NHS in England.

UNISON, the only union represented on the Cavendish Governance Assurance Board, played a leading role in work to implement the

recommendations from the Cavendish report covering healthcare assistants (HCAs) and support workers. UNISON was heavily involved in working groups looking at individual recommendations including the Care Certificate, the voluntary code of conduct and developing consistency in job titles.

Progress was made on developing and piloting the Care Certificate due to be launched in April 2015. However, UNISON continued to raise concerns about the need for accreditation, robust quality assurance and funding for the delivery of the training. UNISON began to work with colleagues in LAOS on materials and workshops to maximise the organising opportunities linked to the Care Certificate and the voluntary code of conduct.

The Cavendish recommendations on career frameworks for HCAs and new entry routes into pre-registration nursing training – including higher apprenticeships – were picked up in the Talent for Care strategy led by Health Education England. UNISON contributed formally and informally to the development of this strategy and to plans for implementation during 2015.

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## Health Education England initiatives

### Pre-degree care experience pilot

Following the Francis Inquiry's recommendation that nursing students should have 12 weeks of pre-degree caring experience, the government responded by proposing that student nurses should spend up to a year working as a healthcare assistant in order to receive the NHS student bursary. UNISON continued to be involved in the pilot programme which was created to take forward these proposals and assess the most appropriate timescale.

### Talent to care

Last year, HEE launched its consultation on how to develop staff in roles banded 1-4. Staff in bands 1-4 make up around 40% of the NHS workforce and are responsible for an estimated 60% of direct patient contact, yet this group of staff receives only around 5% of the whole training budget. UNISON contributed evidence, time and advice to the induction phase of this project and expects to continue collaboration with HEE as the project

progresses. The publication of the final report entitled “talent to care” highlighted how important staff in roles banded 1-4 are, and emphasised the need to develop, design and make available relevant training opportunities that would ensure they have the same career prospects as other staff.

**The Shape of Caring Review**

Last year, HEE undertook the Shape of Caring Review. The review aimed to ensure that nurses and care assistants receive high-quality education and training, which supports high-quality patient care. UNISON was represented on the Shape of Caring Sponsoring Board, which helped to guide the review.

**Professional services unit (PSU)**

The professional services unit (PSU) provides advice and representation when a member is subject to investigation and potential disciplinary action from their professional registration body. There was a big rise in the number of cases involving health and social care professionals. The biggest increase came from social care staff. In order to reduce the level of stress on members, PSU helped negotiate methods of settling cases without the need for a public hearing.

Despite a 60% increase in caseloads in the last two years, PSU continued to deliver satisfactory results in most cases. In order to ensure levels of awareness of regulatory bodies, PSU ran training events for both full-time and lay officials in UNISON.

**European Federation of Public Service Unions (EPSU)**

UNISON continues to have a leading role in EPSU and currently holds the vice presidency of the Health Standing Committee. This year UNISON has worked with the other member trade unions in EPSU and the European TUC on issues around health and well being at work, in particular the incidences and impact of musculoskeletal disorders and the psycho-social risks and stress at work.

EPSU has worked with the European Employers Network for the hospital sector, HOSPEEM on a number of projects including, producing a report on “Effective recruitment and retention strategies/practices in the healthcare sector”, and preparatory

work for a joint EPSU-HOSPEEM “Statement on the importance of ensuring access to life-long learning (LLL)/continuing professional development (CPD) for all healthcare workers”. At the time of writing, UNISON is working with EPSU on EU plans to develop a common training framework for health care assistants (HCA).

**Sponsored awards**

**Healthcare People Management Association awards (HPMA)**

During 2014, the Social Partnership Forum once again sponsored the award for partnership working as part of the Healthcare People Management Association (HPMA) annual awards. The award recognises and celebrates effective partnership working between employers and trade unions. The winner and shortlisted entries provided potential good practice case studies which could be rolled out across the service and adapted for use by other health and care organisations.

**Health Service Journal awards (HSJ)**

During 2014, UNISON joined with MiP to sponsor the award for effective staff engagement as part of the Health Service Journal (HSJ) annual awards. The award celebrates and recognises health organisations which are committed to partnership working and are able to demonstrate that staff engagement is at the heart of their decision-making processes.

**Nursing Times awards**

In partnership with NHS Employers, UNISON sponsored the team of the year category at the 2014 Nursing Times awards. The category recognises projects that demonstrate the value of teamwork and clearly show how an entire nursing or multidisciplinary team has contributed to development, implementation and ongoing delivery of an initiative to improve the quality of patient care or effectiveness of a service. The winner was George Eliot Hospital Trust for their “We built it together!” project.

**Cymru/Wales – campaigning**

Following a UNISON healthcare conference motion last year, UNISON Wales called for a review of the

Barnett formula – a mechanism used to alter the amount of public money allocated to Wales and the other devolved nations to reflect changes in spending levels allocated to public services in England. The issue also became a key policy objective for the Welsh TUC and Welsh Labour. A working group, which included UNISON, was created to look at the way Wales is funded.

UNISON supported a private member’s bill going through the Welsh Assembly on the topic of improved minimum staffing levels in the Welsh NHS by giving written and verbal evidence. Minimum staffing levels is an issue that the region and UNISON nationally have championed for years through responses to government consultations, awareness raising, calls for action and partnership working groups. The progression of this bill can be viewed as a victory in the fight to ensure appropriately staffed care environments.

.....  
**Northern Ireland – campaigning**

**Laundries**

In April 2014, UNISON responded to the departmental consultation on the regional strategy for the provision of health and social care laundry and linen services.

**Integrated health centres**

In the past year, UNISON intervened in the process of the building of health and care centres to demand an effective equality assessment and full involvement in the specifications and contracts including the need for inclusion of social clauses and provision of apprenticeship schemes. Lisburn and Newry are pathfinder projects with a further 10 to come. Following continuous analysis by UNISON, it was discovered that the building of these centres was being subsidised by the Department of Health. This was in contradiction of the stated position that these partnerships were a more cost-effective option so UNISON challenged the minister to provide full details.

**Homecare procurement**

UNISON intervened with the Health and Social Care Board (HSCB) Domiciliary Care review group on social care procurement. Furthermore, UNISON

made interventions with a number of trusts on key UNISON objectives such as the Marmot principle, the Living Wage and minimum wage compliance. UNISON pursued regional engagement with each trusts’ homecare procurement team on the same agenda.

**Ambulance service**

UNISON made a detailed submission to the Northern Ireland ambulance trust. This led to a withdrawal of proposals which seemed to imply the extended use of the private sector in non-emergency transport.

**Other bargaining issues**

Issues in private care homes continued to centre on poor terms and conditions and understaffing. Many staff were still paid minimum wage, felt generally overstretched and complained that they felt under pressure to follow instructions from their employer, even when these were in clear breach of staff-to-resident ratio guidelines.

UNISON has begun developing a campaign to secure the Living Wage, and has initiated discussions with the Private Employers Federation on this basis.

.....  
**Scotland – campaigning**

Pensions remained the primary campaign during 2014-15. Discussions began and were still ongoing around contribution rates from 2015 to 2019. The staff side advised of their position - agreeing that the rate should be set as a whole time-equivalent.

The Scottish Public Pension Agency (SPPA) consulted on the new Scottish NHS pension scheme regulations and transitional and consequential regulations between 27 November 2014 and 4 January 2015 and, at the time of writing this report, was considering responses. The intention is that they will be laid in the Scottish Parliament in March and come into force from 1 April 2015.

Following the valuation process, the employer contribution rate to be put in place in Scotland from 1 April 2015 was announced at 14.9% – a 1.4% increase over the previous rate of 13.5%.

## Objective 4: an efficient and effective union

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### Health care service group executive (HSGE) report

The HSGE met on nine occasions during the period to oversee the implementation of policy and to consider issues arising in relation to pay, terms and conditions, recruitment and organising and campaigning and professional issues relevant to members.

At its annual general meeting in July, the HSGE re-elected its chairing team.

The HSGE agreed a work programme for 2014/15, identifying priority areas of work in line with conference decisions and UNISON's four objectives. In light of the government's pay announcement, the HSGE gave priority to the NHS pay campaign, with several extraordinary meetings organised to agree and review a campaign and industrial action strategy.

The other areas of work the HSGE focused on were changes to the NHS pension scheme, monitoring the NHS structures transition, and dealing with privatisation, which included the implications of changes to the Transfer of Undertakings (Protection of Employment) Regulations 2006, trade agreements which threaten public services such as TTIP, and recognising the need to organise in private companies.

The HSGE working groups continued to supplement the work of the committee and an NHS pay campaign group was created to guide the work of the HSGE during the duration of the NHS pay campaign.

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### Cymru/Wales

The Cymru/Welsh regional health committee met four times during the period covered by this report. Sector groups continued to operate for ambulance, nursing, operational services and science and technology (including BAOT).

The committee continued to represent UNISON members in Cymru/Wales on the Wales Partnership Council, on the NHS Wales Partnership Forum and at the Cymru/Wales Health Policy Forum.

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### Northern Ireland

Pension reform was handled on a devolved basis, and negotiations on the application of changes were co-ordinated through Irish Congress of Trade Unions. However, due to considerable delays, UNISON was only just beginning to engage on the scheme specifics in health. Issues regarding the scheme's governance and the role of worker representatives have yet to be fully finalised. All unions agreed that special training will be required for the worker representatives involved.

The 2015-16 Department of Health, Social Services and Public Safety (DHSSPS) budget resurrected what UNISON saw as a failed plan and approach, which is likely to fail again on performance, inequalities, and financial management. UNISON argued that the executive approval process should be objective and needs-based, not financially driven as in the current paper.

This year, a parallel health and social care (HSC) administrative review was announced. In its response, UNISON proposed radical alternative structures which were capable of releasing significant funds (up to 15%) from the health budget.

Pay restraint that failed to implement PRB recommendations in full was, on the Marmot inequality principles, already widening health inequalities. Failure to implement on pay, coupled with the reductions in jobs and services inherent in the entire plan, UNISON believes, will lead to industrial action in the service. Given that the original March 2015/16 budget made full provision for implementation of the PRB recommendations and the new plan removed them, this action was seen by UNISON as provocative.

Because of major difficulties and user distrust of the payroll system, concerns have already been raised regarding the shared services agenda. Proposals to move ahead with a further shared services agenda, when the crisis created in payroll has neither been evaluated nor fully remedied constitutes an irresponsible proposal likely to result in millions of pounds being wasted.

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## **Scotland**

The Scottish regional health committee remained a strong co-ordinating force for all UNISON objectives across NHS Scotland. To focus its organising and bargaining strategies, the committee drew on the agenda laid out in the major partnership committees such as the Scottish Partnership Forum, Scottish Workforce and Governance Committee, local board area partnership forums and Scottish Terms and Conditions Committee. The committee also focussed on the move toward the integration of health and social care by working in partnership with local authority teams.

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## **Occupational groups**

### **Ambulance**

The national ambulance occupational group met three times during the year covered in this report. Five extraordinary meetings were also held to discuss proposed changes to unsocial hours in England only.

The group continued to provide support to the work of the HSGE on mainstream issues. The group also continued its membership on the National Ambulance Strategic Partnership Forum (NASPF), which will be holding regular meetings from March 2015 to look at national issues such as demand on 999 services, recruitment and retention of ambulance staff and the impact of working longer.

Main areas of work included:

### ***National Education Network for ambulance services***

UNISON maintained its presence through this network exploring the development of roles within the ambulance service to meet the future needs of the workforce. Last year saw the publication of the Paramedic Evidence-Based Education Project (PEEP), which put forward arguments for additional training for paramedics and standardisation of roles across the UK.

### ***Extending working lives***

Working age was still a massive concern for ambulance staff that has not yet been dealt with either at an employer or political level. UNISON

continues to contribute to the Working Longer Review as well as a new 'extending working lives' study being undertaken by the Universities of Leicester and Bath with funding from the Medical Research Council. UNISON's campaign on working age in ambulance services is ongoing.

### ***Industrial action campaign***

This has been the main focus of the ambulance occupational group during the year covered in this report. Ambulance members contributed significantly to the strike days held during this time. UNISON ambulance members were very visible on picket lines and also provided emergency cover to protect life and limb.

### ***Agenda for Change (England) Annex E negotiations***

The ambulance group continued to focus much of its efforts on addressing proposed changes to Agenda for Change in England.

### ***Ambulance seminar***

Planning for the biannual ambulance seminar began in 2014/15. The theme of the seminar will be changes to ambulance response times and issues with recruiting and retaining ambulance staff.

### ***Organising and recruitment***

The ambulance occupational group had a presence at the Emergency Services Show 2014 and a significant number of student paramedics were recruited. Overall, ambulance recruitment was a growth area for the union.

### ***Nursing***

The national nursing and midwifery occupational group met for three ordinary meetings during the year covered in this report.

The group continued to provide support to the work of the HSGE on mainstream issues. Alongside these initiatives the group continued to pursue its agreed programme of work which included:

### ***Safe staffing levels***

On Tuesday 10 February 2015, UNISON ran its

fourth annual nationwide staffing-levels survey. Respondents working in the nursing family were asked to report on staffing levels and patient safety on that day. The survey and its following report formed part of the union's ongoing campaign for and commitment to safe staffing, a key priority for the nursing and midwifery occupational group. It also assessed the effectiveness of mandatory tools introduced in Scotland and Wales and the NICE guidance on safe staffing for nursing in adult inpatient wards in acute settings in England.

UNISON continued in its role as a founding member of the Safe Staffing Alliance and helped to write its manifesto which was launched in January 2015.

**Healthcare assistants' conference and nursing seminar**

These were postponed during the pay dispute.

**Nursing and Midwifery Council (NMC)**

UNISON continued to work closely with the Nursing and Midwifery Council in several areas, and held seats on advisory groups that fed into the revalidation project. UNISON helped shape the revalidation pilots and continues to participate in them. UNISON argued that any new model of revalidation must not be funded by increased registration fees.

In addition, UNISON responded to an NMC consultation regarding its decision to revise its code of conduct. Many of UNISON's concerns helped to shape the new code which was published in March 2015.

Finally, UNISON wrote a submission to the NMC consultation on fee increases for registrants. Unfortunately, despite a UNISON campaign against it, NMC fees were increased to £120 from February 2015 following approval by the Privy Council.

**Further work**

Other work undertaken by the nursing and midwifery occupational group included:

- continuing work on the Mary Seacole awards and support for the Mary Seacole statue
- a submission to the Migration Advisory Committee on the occupational shortage list in

the UK. UNISON recommended that all nurses, paramedics and occupational therapists should be added to the occupational shortage list

- attending the Florence Nightingale Foundation annual conference in March 2015.

**Operational services**

The national operational services occupational group met for three ordinary meetings during the year covered in this report.

The group continued to provide support to the work of the HSGE on mainstream issues. Alongside these initiatives the group continued to pursue its agreed programme of work. This included tackling the abusive use of zero-hours contracts that are still in place across the country, highlighting the need for the introduction of the Living Wage, and continued support for the Campaign for Better Hospital Food.

Main areas of work included:

**Organising and recruitment**

The operational services occupational group oversaw a very successful recruitment campaign within NHS Property Services. The occupational group offered its help and assistance with organising this group of workers. This resulted in elections of UNISON activists who will participate in future work or campaigns that the occupational group is involved in.

**Industrial action campaign**

The industrial action in England over NHS pay had an impact on the group's work plan resulting in some campaigns (for example, UNISON's one team campaign) and events (for example, the national operational services seminar) being put on hold or postponed.

However, this enabled the occupational group to focus on supporting its members who were taking and leading on the pay dispute. Porters, cleaners, medical secretaries, caterers and other workers under the occupational group were heavily represented in supporting the action and standing on the picket lines encouraging others to get involved.

### ***Science, technical and therapy (STAT)***

This year saw the implementation of agreed changes to the science, technical and therapy (STAT) occupational group. This followed the occupational group review which brought together the former professional and technical 'A' (PTA) and professional and technical 'B' (PTB) committees. These groups are now fully integrated into the current STAT committee. The occupational group met for two of the three ordinary meetings during the period covered by this report.

The group continued to provide support to the work of the HSGE on mainstream issues. Alongside these initiatives, the group continued to pursue its agreed programme of work. This included:

- regulation issues, including the government policy on voluntary registration of health and social care workers
- pensions and contributions to the working longer review
- the submission of consultation responses to bodies including the HCPC
- the production of a twice-yearly STAT newsletter which received a positive response and generated a steady stream of membership applications

### ***Industrial action***

The group considered and fed into the main SGE strategy representing the views of STAT members and the barriers and enablers to industrial action. The group was also involved in the production of industrial action newsletters aimed at increasing participation in the industrial action and recruitment opportunities.

### ***Representation***

The STAT occupational group continued to represent its membership nationally. It maintained links with the Health and Care Professions Council (HCPC) on matters relating to regulation and professional bodies including the national occupational therapy panel.

The occupational group continued to represent UNISON on the Modernising Scientific Careers (MSC) trade union, Department of Health and NHS Employers liaison committee as well as other NHS-wide bodies such as the NHS Staff Council.

### ***Further work***

Other work undertaken by the occupational group included around the areas of:

- the impact of the government's NHS reforms including the Health and Social Care Act 2012
- the continuing impact of the government's Any Qualified Provider policy

## Appendix 1: 2014 health conference motions

The table below shows the motions passed at UNISON's health conference last year and indicates the status of the work to achieve the action points from the motions. Where progress on agreed policy is identified as 'ongoing' or 'outstanding', the work still to do has, where possible, been included in HSGE motions to conference 2015.

<b>Motions passed at health conference 2014</b>	<b>Status of action points from motions</b>
Composite A - the challenge of recruiting and organising in a fragmented NHS	Ongoing
Motion 3 - science, technical and therapy staff in the NHS	Outstanding
Motion 4 - one team - caring for patients	Achieved/ongoing
Motion 5 - supporting outsourced members	Achieved/ongoing
Emergency motion 1 - launch a national challenge to Hunt's divisive pay strategy	Achieved/ongoing
Motion 8 - pay resolution 2014	Ongoing
Motion 9 - NHS pay	Achieved/ongoing
Motion 10 - defending Agenda for Change	Achieved/ongoing
Motion 11 - resisting downbandings/pay cuts	Achieved/ongoing
Motion 12 - prepare members for collective action	Achieved/ongoing
Composite C - zero hours contracts in the NHS	Ongoing
Motion 16 - proposal to reduce the Agenda for Change working week to 35 hours per week	Outstanding
Motion 17 - at least a living bursary for student healthcare professionals	Ongoing
Motion 18 - 'trainee' nursing assistants	Ongoing
Motion 19 - a future for young people in the NHS?	Ongoing
Composite D - future pay determination in the NHS	Achieved/ongoing
Motion 23 - equality and diversity training for health staff	Achieved/ongoing
Motion 24 - staffing shortages in the NHS and their impact on women in the workplace	Achieved
Motion 25 - protecting and promoting equality in NHS pay and conditions	Outstanding
Motion 26 - legal framework for regulators	Ongoing
Motion 27 - registration for healthcare assistants	Ongoing
Motion 28 - access to student nurse education pilot	Ongoing
Motion 29 - career pathways in the ambulance service	Achieved/ongoing
Motion 30 - campaign for ambulance workers pension retirement age	Achieved/ongoing
Motion 31 - categorisation in the ambulance service	Achieved/ongoing
Emergency motion 3 - NMC fees	Achieved
Composite I - bullying and harassment in the NHS	Achieved/ongoing/outstanding
Motion 37 - privatisation, franchising and procurement	Achieved/ongoing
Motion 38 - influencing the NHS	Ongoing/outstanding

## Appendix 1 continued

Motions passed at health conference 2014	Status of action points from motions
Composite E - procurement and cost improvement in the NHS	Ongoing/outstanding
Motion 41 - campaign against privatisation of George Eliot Hospital and the wider implications	Achieved/ongoing
Composite F - fighting privatisation	Achieved/ongoing
Motion 45 - reclaiming the NHS agenda for workers and users alike	Ongoing/outstanding
Composite G - campaigning against privatisation in the NHS	Achieved/ongoing
Motion 48 - privatisation within the NHS	Ongoing
Motion 49 - how we want to work - a charter for the NHS workforce	Ongoing
Motion 50 - integration – taking the workforce with you	Achieved/ongoing
Motion 51 - learning and partnership working	Achieved/ongoing
Motion 52 - be safe training	Ongoing
Motion 53 - mental health services	Outstanding
Motion 54 - future food provision within the NHS	Ongoing
Composite H - nursing workforce - safe minimum staffing levels	Ongoing
Motion 58 - safe and achievable staffing levels	Ongoing

## Appendix 2: publications and submissions

Date produced	Type	Title	Produced by
April 2014	Article	Response to PRB	Nursing Times
20/06/14	Article	Industrial action	Nursing Times
25/07/14	Branch guidance	Agenda for change injury allowance - a UNISON guide	UNISON
31/07/14	Written evidence submitted	UNISON's response to the NMC fee increases consultation	UNISON
11/08/14	Written evidence submitted	UNISON response to consultation on a draft revised NMC code and revalidation	UNISON
28/08/14	Article	NHS pay	Nursing Standard
Sept 2014	Article	Ambulance retirement age	UNISON for Ambulance Today
22/09/14	Written evidence submitted	UNISON's submission to the NHS Pay Review Body 2015-16 (Scotland only evidence)	UNISON
19/11/14	Oral evidence submitted	UNISON's submission to the NHS Pay Review Body 2015-16 (Scotland only evidence)	UNISON
21/11/14	Article	NHS pay and industrial action	Huffington Post
Dec 2014	Article	Demand on workers - employers need to care	UNISON for Ambulance Today
05/12/14	Written evidence submitted	Migration Advisory Committee (MAC) review of shortage occupation lists	UNISON
19/12/14	Written evidence submitted	UNISON's submission to the NHS Pay Review Body 2015-16 (Department(s) of Health in England, Northern Ireland and Wales special remit on seven-day services)	UNISON
05/02/15	Article	'Unsocial hours payment cuts will hit care as well as morale'	Nursing Times
03/03/15	Oral evidence submitted	UNISON's submission to the NHS Pay Review Body 2015-16 (Department(s) of Health in England, Northern Ireland and Wales special remit on seven-day services)	UNISON

## Appendix 3: Health care service group executive and occupational group representatives

HSGE	
Region	Name
Eastern	Harry Seddon
East Midlands	Gary Freeman
East Midlands	Roz Norman
Greater London	Mike Davey
Greater London	Janet Maiden
Greater London	Lynn Burbidge
Northern	Maria Alberts
Northern	George Barron
Northern	Helen Kilpatrick
Northern Ireland	Roberta Magee
Northern Ireland	Maura McKenna
Northern Ireland	Jill Weir
North West	Karen Reissmann
North West	Debra Tickle
North West	Diane Cawood
Scotland	Alex Joyce
Scotland	Wilma Brown
Scotland	Julie Ballantyne
South East	Stephen Bell
South East	Anne Prout
South East	Jean Butcher
South West	Mark Wareham
South West	Trudie Brailey
South West	Alison Evans
Cymru/Wales	Joe Conaghan
Cymru/Wales	Elizabeth Nolan
West Midlands	Jenny Harvey
West Midlands	Mary Locke
Yorkshire & Humberside	Adrian O'Malley
Yorkshire & Humberside	Karen Smales
Yorkshire & Humberside	Sheila Hepworth
Ambulance	Bryn Webster
BAOT	Peter Hewin
Nursing & Midwifery	Hannah Middleton
Operational Services	Ewing Hope
Operational Services	Sue Orwin
STAT	Gemma Cannon
NEC	Eric Roberts

HSGE continued	
Region	Name
NEC	Ann Moses
NEC	James Anthony
NEC	Christine Sullivan

Ambulance	
Region	Name
Eastern	Steve Imrie
Greater London	Eric Roberts
North West	Craig Wilde
Northern	Joel Byers
Northern Ireland	Ali Young
Scotland	Steven Gilroy
South East	Andy Martindale
South West	Jo Fowles
Cymru/Wales	Joe Conaghan
West Midlands	Peter Green
Yorkshire & Humberside	Bryn Webster

Nursing and midwifery	
Region	Name
East Midlands	Martin Hallam-Benn
Eastern	Hannah Middleton
Greater London	Mike Davey
LGBT	Jaden Biggs
North West	Christine Sullivan
Northern Ireland	Eoin Stewart
Scotland	Alex Joyce
South East	Shane (Jay) Nevett
South West	Trudie Brailey
Cymru/Wales	Jean Morris
West Midlands	Sharon Otto
Yorkshire & Humberside	Ann Moses
Yorkshire & Humberside	David Pickersgill
Academic	Mick McKeown
Student	Robert Pitt

## Appendix 3 continued

Operational services	
Region	Name
East Midlands	Violet King
East Midlands	Christina Pitts
Eastern	Paul O'Brien
Greater London	Jim Mansfield
North West	Debbie Turner
Northern	Tanya Pretswell
Northern Ireland	John Murray
Scotland	Ewing Hope
South West	Susan Orwin
Cymru/Wales	Margaret Thomas
West Midlands	Linda Woods
Yorkshire & Humberside	Katie Hodgson
Yorkshire & Humberside	Luke Steenson

Science, therapy and technical	
Region	Name
East Midlands	Lynn Booth
Eastern	Sarah Moss
Greater London	Gemma Cannon
North West	Peter Dales
Northern	Tracey Lloyd
Northern Ireland	Steven McNeill
Scotland	Reg Lloyd
South East	Richard Eggleton
South West	Lynn Ward
Cymru/Wales	Sam Singh
West Midlands	Patricia Davies
Yorkshire & Humberside	Eve Rose

Staff	
Name	Role
Gail Adams	National officer
Sharan Bandesha	Assistant national officer
Nick Bradley	National officer
June Chandler	National officer
Sara Gorton	Senior national officer
Susan Hall	Team administrator
Caroline Hennessy	Assistant national officer
Celestine Laporte	National officer
Rosemarie Lewis	Team administrator
Alan Lofthouse	National officer
Christina McAnea	National secretary for health
Hanna Najeme	Team administrator
Helga Pile	National officer
Colm Porter	Assistant national officer
Sian Rabi-Laleh	National officer
James Randall	Assistant national officer
Jennifer West	Assistant national officer

## Appendix 4: UNISON events

Date	Title	Location	Organiser
04-06/06/14	NHS Confederation annual conference	ACC Liverpool	NHS Confederation
05/06/14	NHS pay - day of action	Multiple	UNISON
06/06/14	Presented cheque for unpaid overtime to Jeremy Hunt	ACC Liverpool	UNISON
01/07/14	Midlands and East RSPF event	Kettering	UNISON and employers
24-25/09/14	The Emergency Services Show	Birmingham NEC	UNISON and others
30/09/14	NHS Pension Scheme New Fair Deal and ACCESS workshop	London	UNISON, Department of Health, and NHS Pensions
13/10/14	NHS 4-hour strike (England)	Multiple	UNISON
14-17/10/14	NHS action short of strike (England)	Multiple	UNISON
21/11/14	West Midlands Regional Health conference	Walsall	UNISON
24/11/14	NHS 4-hour strike (England)	Multiple	UNISON
25-30/11/14	NHS action short of strike (England)	Multiple	UNISON
02/12/14	Pay stunt outside the treasury	London	Joint union
10-12/10/14	The South East Coast Ambulance seminar	Brighton	UNISON
23/12/14	Scrooge stunt on pay	London	Joint union

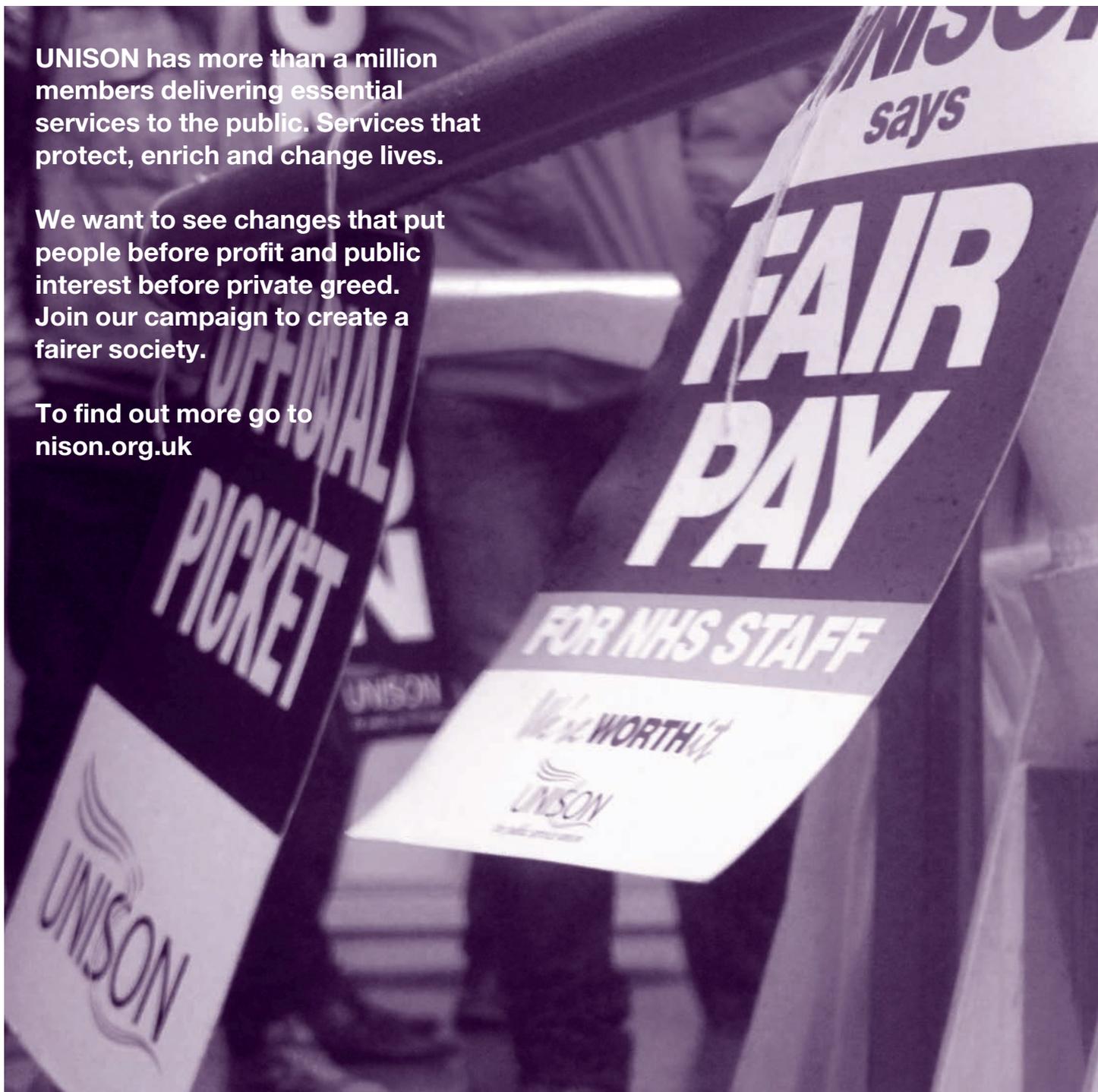




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