



Unison Newsletter

East of England Ambulance Service

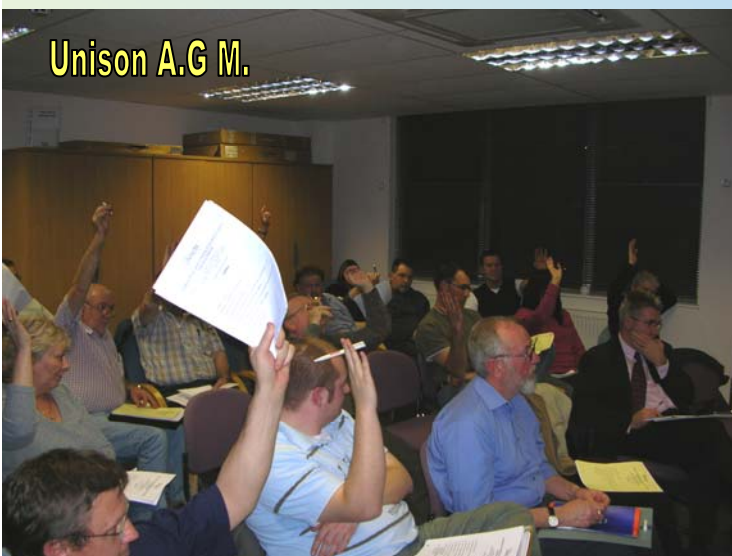
East of England
Ambulance Branch
20106

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The use of the Democratic alternative

The low turnout (only 20%) associated with the results of this years Pay Offer has produced the effect of sending rather mixed and muddled messages when trying to analyse whether members are satisfied with their Pay increase or otherwise. A 60 over 30 percentile result from a 20% turnout is hardly the clear and unambiguous result when giving the representatives a steer for the future.

The 'tactically staged' unfairness factor with its rather blatant application of 'unequal pay for equal value' or more money for another region for doing the same job, would also normally have tipped the balance in favour of a definite 'No' but not so, that appears to have been perhaps noted and readily absorbed, for this year anyway. It may well be that the increases working through from Agenda for Change are still having a tranquilising effect, but arguably not everybody in the Ambulance Service or the NHS generally reflected all of those same benefits. In any event for Ambulance Staff the more than average increases brought about by A.F.C. were long overdue in their arrival, (nearly ten years overdue,) regarded by many as more of an overdue pay settlement for services already rendered.



This was due to the advent of increased training, mainly demanded from Paramedic ascendancy, increasingly loading an open ended, or in many cases, non existent Job Description with learning accountability, and significantly increased responsibilities to the Patients along with the expectation of new protocols and drugs administrations.

It is interesting to note that in the years preceding the last dispute of 1990 the ballot results and returns were also lackadaisical, presenting a bewildering insight into what was being voiced in the crew rooms and corridors by both management and staff. Coupled with poorly attended branch meetings set against mediocre ballot results.

Historical facts suggest that exercising the democratic vote comes well down in the list of things to do, coupled with disparaging expressions of likely or unlikely outcomes that we don't have control of anyway, leaving apathy once again to keep the upper hand if only for the time being. Failing to use the ballot paper produces nothing, it is misleading, does not confront the problem, and certainly has the effect of building up a simmering discontent. More importantly makes it almost impossible for those representing branches to reconcile the vocal expectations of the membership against the democratic evidence delivered.

There is little doubt that if the three year Pay deal at 1999 (with the promise of AFC based on equal pay for equal value to follow) had not been delivered, Ambulance services would have yet again been plunged into another needless acrimonious dispute, on this occasion fortunately it was recognised and avoided.

It is important to recognise as the time goes on to use the Balloting opportunities as and when they arise, thereby using the process to send the Unions back to the table with the positive evidence from the people they are there to represent. Ballot papers are currently sent to home addresses, prepaid for return, with Branch notification and also receiving a great deal of media coverage to stimulate an active response.

In a new era where Unions are positively and openly working on a Partnership basis, representing Professional Health Service members in a way which they feel most comfortable, the importance of the democratic process is a vital barometer for them to act upon at the wider forums, particularly when being requested for Regional input into the National picture of which will be asking each of them in turn for a full report on the views of their membership.

This time it was Pay, at going to print it may well be the General Election with a chance to influence the outcome, either which way we have another chance to make our vote count.

EM Communications.

Secretary's Corner



Hi and welcome to Secretary's corner, a new edition to the newsletter which I hope to make a fairly regular feature in an attempt to keep staff up to date on branch activity and 'hot topics'. It has been a pleasure recently to be invited to some station meetings to discuss mainly annual leave, but also other local and national issues, as well as suggestions on how you would like your branch to work for you. Secretary's Corner was one of those suggestions. As much as I would like to include all the branch activity in one go, I'm afraid the newsletter would run to so many pages, that the Communications Officer and Branch Treasurer would not be best pleased, so I will kick off this month with three areas.

Firstly Pay. As Unison is the only Trades union with Ambulance Staff within its membership that balloted its members on the latest pay offer from government, I can inform members that despite a disappointing return of papers, the result of the ballot was 68.8% to accept the offer, with 31.2% voting to reject. I'm sure we all have our own views on this outcome depending on how you voted (if at all) but Unison's democratic process has been followed, the membership has had their say, and as soon as we get the go ahead from the Health Service Group Executive we will be meeting with management to ensure that the money is put into pay packets as soon as possible.

The Technician Job Analysis Questionnaire (JAQ) has finally been completed and I would like to say a big thanks to the Tech's that gave up their time to help complete this important piece of work. The JAQ has now gone out for further consultation, it will then go to management for agreement and sign off, and we will then get a Job Evaluation panel set up as quickly as possible. I will report further on progress.



Finally and with some sadness I have to report that due to personal reasons Mike Pelling has taken the decision to stand down from all of his Unison duties. Mike has been a staunch supporter of the branch for many years, he has successfully represented many members at Grievance and Disciplinary hearings. As a member of the Health & Safety Committee has argued for improvements on H&S

issues, and was a member of the Vehicle working group. Mike was also the Branch Education Officer, and did a huge amount of work in getting representatives on courses as well as arranging their abstractions through scheduling. Mike will be sorely missed by the branch, and I would like to offer a big thanks to him for all that he has done over the years, and wish him and his family all the very best for the future.

Well that's about it for now, we hope to be doing some station visits in the not to distant future, so look out for us, and we are happy to come to any station meetings that are arranged to meet up with as many staff as we can, just let me know well in advance. Until the next time Kevin Risley Branch Secretary

NAPF News Meal Break Project

The objectives of the Meal Break Group are:-

Survey and summarise the current arrangements for managing meal Breaks in all Ambulance Trusts in England and the other counties of the UK. This will include, time out, time paid for, and any restrictions or rights.

- Assess each approach in terms of compliance with the AFC Handbook, in particular section 10 Annex N.
- Consider and list these options in terms of their compliance with AFC, their ability to offer the most reasonable and achievable flexibility for staff and for the ability of the employers to provide services to the public.
- Highlight any differences between rural and urban settings, and service delivery models.
- Concentrate on the Emergency service area but be prepared to consider other options which work well in Non-emergency and Primary Care services.

The MBG will not:-

- Consider the operational needs of Services.
- Work outside the requirements of Agenda for Change
- Try to find only one preferred option for meal breaks, the task is to find the best possible models.

The Group has completed a thorough analysis of existing meal break practice that has revealed variations across and within nearly all Ambulance Services.

The Group has reviewed all aspects of these in the light of the requirements of the Working Time Regulations and the provisions of Agenda for change. To assist their work the group obtained further clarification from the NHS Staff Council on application of the AFC provisions, Section 10.1 in particular.

The group will be submitting its report to a full NAPF to enable the matter to be dealt with in detail on October 2nd 07 in London.

Unison's National Ambulance

Chairs report August 2007

This report is from:- Jo Conaghan Chair of National Ambulance Sector Committee.

I wonder if many staff working back in 1948 for the recently founded NHS had any knowledge of the many Whitley Councils about to be created which covered all of their Terms and Conditions for the various occupations for the next 50 odd years. Or was it like that when I joined the NHS in 1982, there was a simple reference made at the interview that hours, pay and all terms and conditions were determined by Whitley Council. There was no such thing as the internet then to download and check, it was just left to a few knowledgeable colleagues who filled the gaps.

I was a Rep for COHSE back in 1984 and I remember writing to the Department of health in Leeds on a typewriter borrowed from a friend asking for a copy of Whitley to be sent to me at the local hospital, the brief response informed me that a copy was lodged in the Personnel Department, and getting a copy from there was like extracting gold flakes.

Around the time of the Ambulance dispute in 1989, most Staff knew their Terms and Conditions better than many of their reps and managers, and could quote chunks of paragraphs about Bank Holiday entitlements etc verbatim.

When I first became a member of UNISON's Ambulance Sector a couple of years before Agenda for Change, the discussions were about little else. I spent the 3 hours on the train digesting the Draft AFC proposals before arriving for the meetings and memorably I remember undertaking a joint piece of work transposing approx eleven Whitley Council Handbooks into what I discovered was a very early draft of the Agenda for Change agreement. This was the most forensic piece of work I had ever been associated with, and it was led by the person with the most analytical and forensic mind I have ever met, Paul Marks who was at that time leading the Staffside on the Shadow Staff Council, the ultimate replacement for all Whitley Councils, including those for Ambulance and Control Staffs and Ambulance Officers.

When Unison's Health members voted for Agenda for Change in 2004 no one could have predicted how long and sometimes painful the transition would be. Much has been written and discussed about the good and not so good aspects of AFC especially regarding Ambulance. I have heard on many occasions that Agenda for Change was not written with 'Ambulance Staff in mind'. However in analysis, the Whitley Handbook for Ambulance was not so dissimilar to the one for Ancillary staff ie, years of local contracts and separate negotiations meant that Ambulance Staff had moved further away from their Handbook than most of their NHS Colleagues based in Hospitals.

Input from Unison's National Ambulance Sector has been raised at the Staff Council in the past three years through a network of full time officers and NHS colleagues on our Health service group executive. Many of the issues brought to the table by the Staffside have had particular implications for Ambulance, ie- Meal Breaks, AFC Bandings, Unsocial Hours, Ill Health Retirement, Mileage, plus numerous other Terms And Conditions issues.

It is the job of a staff council member from either the Trades union or Management to consider issues as they affect the whole of the NHS and all of its component groups, but it was the case that the Staff Council did not include anyone from directly within the Ambulance service.....until now.

That is why I feel so proud and humbled that my colleagues in Unison on the Health Service group executive, representing nearly half a million members from across the UK and all parts of the NHS (including those currently forced to toil for private sector profit) have elected me to one of the seven Unison seats on the NHS Staff Council.

As I have mentioned Staff Council members have to consider issues in the wider NHS context. I hope that I can bring the sensibility gained from being an Ambulance paramedic and a Unison activist from a devolved country to meet this broader remit and justify the faith shown in me by Unison's National Ambulance sector and health Service Group Executive.

Jo Conaghan Chair of the National Ambulance Sector Committee.

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Unison Newsletter

This Monthly Newsletter is for the benefit of UNISON East of England Ambulance Branch consisting of (Beds & Herts- Essex & EAAT) UNISON Membership. It is produced on a Monthly basis under the new UNISON East of England Branch No 20106 Your Contributions are therefore welcome BUT must reach the Editor by the last day of the month for the next edition.

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Circulation of this Newsletter is to all Workplace addresses within the East of England Ambulance Trust & all UNISON Contacts.

UNISON Regional Office & Mableton Place. Please note in future Newsletter Monthly publications can also be found on the new Unison East of England Branch Website.
At WWW.eeas-unison.com

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Conference for the Disabled 27-29 October 07

Dave Edwards our Branch Disability Officer will be in attendance at the above Conference this year, we as a merged branch are fortunate to have found an active participant to support this cause to give us a full report for a later edition of our Newsletter. There is a Unison Rule Book change to be proposed at this event in that— The post of Disability Officer should be included in the Rule Book, to work specifically on behalf of members.

It calls for Rule G4.I.I to be amended as follows, G4.I.I After Equality Officer, insert Disability Officer. The role of this Officer is to be the advocate for all disabilities issues in the Branch. The Conference instructs the National Disabled members Committee to work to secure a rule change at the National Delegate Conference of 2008.

Hertfordshire Hospital Cutbacks

Unison has published its response to controversial plans to downsize hospital services for 1 million people in Hertfordshire, reducing the County from the present 4 Hospitals to just two with the loss of QEII and Hemel Hempstead.

The cut backs are as a result of the Private Finance initiatives and being pushed through by the East of England Strategic Health Authority. Unison has submitted a detailed response to the proposals arguing that they are cash driven and would result in the loss of one in five of the county's front line acute hospital beds.. Unison also points out that the NHS cash allocations in the East of England generally and Hertfordshire in particular are well below average, which explains the deficits of local Trusts and Pct's. Unison response also draws attention to a major report by the Academy of Medical Royal Colleges which has argued that there is no clinical evidence for the benefits of centralising most Health services, and insists that any changes in service must be driven by clinical need other than financial pressures. Unison members working for the East of England Ambulance Service have also been angered to find managers from their Trust lending support to the plans without any attempt to consult staff on their views, which are far from favourable.

Eastern Region Head of Health- Tracey Lambert said:- "We do not find these latest proposals at all convincing, we are very concerned that Hospital services will close without proper alternatives in place. The new system would not be viable or cost effective— and not what patients want. Hertfordshire P.C.T's are not taking us forward to a future of modernisation, but dragging us backwards as they adopt policies that have failed and were replaced over a decade ago. The lack of detail means we are being asked to buy a 'Pig in a Poke'."

You can get more about Membership services offers from UNISON direct ON -0845-355-0845