

Dear Prime Minister,

Resolution needed over intensifying NHS strikes

It has been nearly [two months since we last wrote to you](#) on behalf of NHS leaders to express our deep worry about the level of harm and risk that patients could be exposed to due to ongoing industrial action.

This was on the eve of the first ambulance strikes in England and immediately following the first time nurses had staged a national walk-out in the 106-year history of the Royal College of Nursing (RCN).

You appear not to have heeded this warning and the situation around industrial action has become more severe, with the RCN having announced on Thursday 16 February an escalation of industrial action with three further days of strikes from 1-3 March. We are also expecting junior doctors to stage a three-day walkout in March, subject to the British Medical Association confirming its ballot results next week. In the meantime, patients continue to suffer as a result.

We write to you again to ask for you to urgently reconsider your government's stance in relation to the pay dispute or run the risk of your key pledge to reduce waiting lists being compromised.

The leaders we represent across all parts of the NHS in England fear that as long as your government's position stays as it is, industrial action with all of its worsening knock-on effects will become 'business as usual' for the NHS. This will put delivery against key performance targets and the NHS's capacity to improve at risk.

The evidence for this is clear. There have already been 12 strike days directly affecting NHS services, which have led to almost [141,000 appointments and procedures](#) needing to be postponed, so that the most critical and life-saving services could be maintained. While agreements between NHS organisations and trade union representatives have ensured that 'life and limb' cover could remain in place, our members are extremely concerned that their worst fears

Date

16.02.2023

For the attention of

The Prime Minister
Rt Hon Rishi Sunak MP

CC.

Secretary of State for Health and Social
Care
Rt Hon Steve Barclay MP

about the impact of the strikes on patients are playing out before their eyes and that there appears to be no end in sight.

All of this has happened as staff have responded to one of the most challenging winters in living memory, while contending with over 130,000 vacancies and insufficient investment in the NHS's estate.

The disruption caused by the prolonged industrial action must be weighed up against the ambition we share with you to reduce waiting lists. Less than a month ago, you promised [to build a better future](#) for the country and announced your pledge to reduce waiting lists and make sure people get the care they need more quickly as one of your five priorities for the country.

Staff across the NHS have been working hard to clear the backlogs that have built up since the pandemic, including to make sure that people who have been waiting 18 months for a planned operation get one by April. Already, the NHS has virtually eliminated the two-year waiting list and in November, it had delivered 70,000 more elective procedures than in the same month before the pandemic. The NHS has shown it can deliver when the conditions are right.

However, as the NHS has had to contend with winter and industrial action, the rate of progress has understandably deteriorated. The latest statistics reveal that nearly 35,000 elective procedures and appointments had to be rescheduled in December due to industrial action, over 53,600 in January and approximately 53,000 so far in February.

The overall elective backlog has risen to over 7.2 million entries and in December, there were nearly 55,000 remaining procedures on the 78-week waiting list. As [analysis from the Institute for Fiscal Studies](#) showed last week, even without industrial action, the target to clear this list by April would be a tall order, despite what NHS teams are delivering. It is most likely that the waiting list will flat line, rather than fall this year. For that to change, elective activity would need to increase, which escalating waves of NHS strikes does not allow. Alternatively, the number of patients joining the list would need to be

unexpectedly low, which recent levels of tests and checks does not indicate will be the case.

Separately, the [National Audit Office](#) reported last week that soaring demand, exacerbated by the pandemic, will continue to outstrip the ability of mental health services to provide timely treatment and how there are 1.2 million people waiting for community-based support while 13% of mental health staff quit in the last year.

While the trade unions have shown a willingness to negotiate and compromise as we have seen with agreements reached in Wales in recent weeks, your government's position on the pay dispute is jeopardising your own pledge to reduce waiting lists and it is undermining the commendable progress the NHS has made to recover its services.

Also, it is adding to feelings of discontent among staff. Several NHS leaders have told us that since the start of this dispute, hundreds of their staff have joined a union, leading to the prospect of individual employers seeing more and more of their workers taking part in the walkouts as they continue. The impact on those staff who are not part of industrial action is also being felt, with some of our members reporting that their staff are having to work 15-16 hours to compensate.

There is also a growing financial cost to the dispute as trusts are having to pay high rates for agency staff to plug gaps in rotas.

Health leaders feel that a choice now needs to be made by your government: either seek to settle the dispute by negotiating with the trade unions on their concerns around pay or accept that key commitments to cut NHS waiting lists will be unlikely to be met.

Our members understand your position and the wider economic factors that your government will be taking into consideration, but it is the clear view of the many members we have across the NHS that a continuation of the Government's apparent refusal to discuss or compromise on pay is jeopardising your public commitment to reduce waiting times. The two policies – on NHS pay and on NHS waiting

lists – are becoming mutually incompatible. Pragmatic leadership is needed to get through the current stalemate.

We would be more than willing to meet with you and your advisers to discuss this further and can convene a group of our members for further conversations in private if that would be helpful. Your team can contact externalaffairs@nhsconfed.org to arrange.

Yours sincerely,



Lord Victor Adebawale CBE
Chair
NHS Confederation



Matthew Taylor
Chief executive
NHS Confederation