



# **SOCIETY OF RADIOGRAPHERS**

## **SUBMISSION**

**On the**

## **TRADE UNION (WALES) BILL**

## 1. INTRODUCTION

- 1.1. The Society of Radiographers (SoR) is the trade union and professional body representing over 28,000 members UK wide and working at all levels in diagnostic imaging and radiotherapy. There are approximately 1,300 members in Wales. Most are registered radiographers although our membership extends to others working in radiography including assistant practitioners and support workers. Over 85% of radiographers in the UK are members. We are democratic, led by a Council of elected members with policy determined by an annual delegates conference. Our work is transparent and we are, at all times, accountable to our membership.
- 1.2. In Wales, most of our members are employed in the NHS but we also have members in the independent sector. We rely on our local workplace representatives to provide members with representation, with one representative in each workplace to cover industrial relations issues. We also have Health and Safety representatives undertaking the role of protecting the health and safety of members and Trade Union Learning representatives (ULRs) who assist members with their continuing professional development, which they are required to evidence as part of their professional registration. The SoR is committed to the partnership model of industrial relations in Wales.
- 1.3. We are proud affiliates of the TUC and support their response to the consultation and its conclusions. In this response, we focus on areas of specific concern to us.
- 1.4. Radiographers are regulated by the Health and Care Professions Council (HCPC). They are therefore subject to the [HCPC's Standards of Conduct, Performance and Ethics](#). This places upon our members a requirement to act in the best interests of patients. This is supplemented by our own Code of [Professional Conduct](#) requiring radiographers to promote and protect the best interests of patients at all times. Our members are therefore subject to stringent regulatory and professional obligations ensuring they act at all times in the interests of their patients. These obligations dictate how a radiographer works and has a significant impact on the conduct of our members even when they take industrial action.
- 1.5. Our response takes into account this background and the requirements already placed upon our members externally and through our own guidance. We believe that if certain provisions of the UK Government's Trade Union Act 2016 (the Act) are not dis-applied, the partnership model in Wales would be at risk. It would be more difficult for our members to put patients first, even during industrial action, and this will adversely affect patient care.

## 2. BACKGROUND

- 2.1. Our members rarely take industrial action. In the last 35 years, we have had two brief national stoppages and both disputes were a reaction to austerity measures imposed by the UK Government.
- 2.2. We believe and trust in partnership working in Wales. It is rare for SoR members to even consider taking industrial action. It is unquestionably a last resort when dialogue has failed. However, the SoR has always made clear that in the event of a strike, we would agree detailed arrangements with employers to ensure the continuity of patient care. For our members, the commitment to patients is paramount as evidenced by the documents referenced in section 1.4.

### **3. INDUSTRIAL ACTION BALLOT THRESHOLDS**

- 3.1. The SoR supports the Trade Union (Wales) Bill's provision that removes the 40% ballot threshold for industrial action.
- 3.2. Industrial action happens when trade union members are in a dispute with their employers that cannot be resolved through negotiations; it is a democratic right. Even for a relatively small organisation such as ours, the proposed new ballot thresholds make it more unlikely that members would be able to exercise their democratic right.
- 3.3. Strikes are a last resort and SoR members rarely consider strike action over their pay and conditions. Occasionally, it is necessary to consider taking industrial action on issues of patient safety or staff safety. Imposing threshold requirements without a parallel decision to allow modern electronic methods of participation in the ballots undoubtedly makes it more difficult for our members to take, or even consider, industrial action.
- 3.4. The UK Government has promoted their Trade Union Act as enhancing trade union democracy. Nothing could be further from the truth. Many of our members abstain from voting in industrial action ballots. This is a principled position they wish to take but then abide by the decision and participate. It would be unjust to count an abstention as a vote against or for industrial action. It is undemocratic, disproportionate and has no respect whatsoever for the principle of abstaining.
- 3.5. Across the UK, during the 2014/15 pay dispute 75% of our members participated in strike action, although only 43% participated in the ballot; this is explained by two factors.
- 3.6. Firstly, members think carefully before taking industrial action, ensuring their professional and regulatory obligations are not compromised. An abstention in the vote, but support for the overall decision, recognises this and should be permitted and not treated as a vote for or against any action.
- 3.7. Secondly, we are prevented from using secure online means of voting. In a survey undertaken by the SoR, 83% of members would be more likely to participate in industrial action ballots if electronic voting was allowed.
- 3.8. It is unjust and undemocratic for legislation to prevent unions from using modern communication methods; no other sector of society is restricted in this way. Company AGMs, Building Societies and political parties all use electronic means of voting if they wish. The fact that it remains illegal for industrial action ballots to be conducted this way demonstrates that the UK Government's Act aims to restrict lawful, democratic engagement between Trade Unions and its members.
- 3.9. Our student members qualifying this year and registering with the HCPC have lived their entire life with home computers, the internet and email. They are comfortable using all forms of new technology. They routinely bank online and pay for things securely using contactless payment cards. Government should be mindful of the message it is sending to this generation of trade unionists who unanimously believe that it is not a government's role to prevent the use of modern technology by their trade union.

#### **4. FACILITY TIME ARRANGEMENTS**

- 4.1. The SoR supports the Bill's provision that protects existing arrangements for trade union facility time.
- 4.2. We believe the UK Government's Act was designed with a mistaken and prejudicial view of the role of local trade union representatives.
- 4.3. Each NHS Trust or Health Board is a separate employer and facility time arrangements are agreed through the collective bargaining process. This is not an area for government to legislate.
- 4.4. The concept of ensuring industrial relations issues are resolved closest to the people affected by them is a fundamental cornerstone of the partnership approach to good industrial relations. Time off for local representatives is therefore sensible, efficient and cost-effective. It ensures disputes are settled promptly without the need for escalation. Restricting facility time would damage this approach immeasurably. Conflict would inevitably increase and harm the partnership approach embedded within NHS Wales.
- 4.5. Of particular concern is the impact it would have on Health and Safety Representatives and Union Learning Representatives (ULRs). The positive work of health and safety representatives is well documented and the work of SoR H&S reps is widely respected throughout the NHS by all as being impartial and evidence based, providing much needed expertise on issues such as compliance with the Ionising Radiation Medical Exposure Regulations.
- 4.6. Our ULRs provide an essential service in assisting members with their ongoing commitment to Continuing Professional Development; a commitment they are required to regularly evidence if they are to maintain their registration. It should be obvious to anyone with any sense that radiographer professional development directly benefits patient care.
- 4.7. Our representatives deliver significant savings to the NHS as we share the responsibility for ensuring members are working safely and able to maintain their professional registration.

## **5. SUMMARY**

- 5.1. The SoR supports the aims and objectives of the Trade Union (Wales) Bill.
- 5.2. The UK Government's Trade Union Act is unnecessary and counter-productive. It is vindictive and aims to curtail the role of Trade Unions in partnership working with employers.
- 5.3. Its provisions in relation to Facility Time are driven by an abhorrence of trade unions and workers' rights; it conveniently ignores the benefits that partnership working can bring
- 5.4. The facility time proposals will harm the partnership approach to industrial relations embedded in the NHS in Wales and make it more difficult for problems to be resolved locally by those directly affected.
- 5.5. The proposals for ballot thresholds are unnecessary. If the UK Government is concerned about participation in these ballots, the restriction on trade unions using modern, secure means of voting must end. The UK Government's Trade Union Act is an attack on trade unions, an attack the Government appears to want to pursue with little or no regard for the adverse impact on the excellent industrial relations that exist in NHS Wales and, in our case, for the adverse impact it will have on patient safety.

**Society of Radiographers 16 February 2017**