East London staff to be auctioned off in PFI deal

750 in-house support staff at Barts & The London Trust (BLT) in east London face privatisation as they are handed over to a PFI consortium.

The deal makes a nonsense of pledges by Health Secretary Alan Milburn that deals for the building of new hospitals under the Private Finance Initiative can separate out the provision of the hospital building itself from the provision of support services.

Support services have until now been seen as part of the package, and as a potentially lucrative "income stream" for PFI consortia, but as disputes at UCLH in London and Dudley Hospitals have shown, handing over inhouse support staff to private contractors can be a flashpoint of angry resistance.

However Milburn's agreement that separate deals can be done does not yet appear to have been translated into practice - and the latest plans for the PFI redevelopment at BLT are a classic

A document for the BLT Board meeting on March 14 discussing the so-called "Soft Facilities Management" services (portering, cleaning, catering and laundry) points out that "Potential bidders view the inclusion of Soft FM services as important to making the Trust's Project attrac-

In a document larded with management jargon, the Trust board are told - contrary to all the experience of NHS staff who have been switched to private

contractors - that: "There are potential benefits for the staff

concerned ... Terms and conditions may be better than the NHS can afford to offer." [!!] "Transferred staff will

be part of a

larger, specialist FM provider organisation which can enhance career progression and provide better training and develop-

Who are they kidding? Trust bosses want to transfer staff to the profiteers in the summer of 2003, well in advance of the completion of the PFI project.



Not only will the new Birmingham University Hospital cost £291m, it will mean the closure and asset-stripping of Selly Oak

PFI costs soaring

THE LATEST batch of PFI hospital projects rubber-stamped by Alan Milburn will not be up and running until at least 2006 - after the next general

But the list of mega-schemes underline the heavy cost of PFI for generations to come.

The reconfiguration of hospitals in Leicestershire, for example, discussed in our last issue as having risen in cost from £150m to £225m, has been approved by Mr Milburn at a massive £286m - almost double the original projection.

Three other PFI schemes carry headline prices in excess of £200m - St Helen's & Knowsley, University Hospi-

tal Birmingham, and North Staffordshire. Eight schemes are priced at over £100m.

In each case the cost quoted is only an indication of the eventual bill to the NHS, since it excludes the interest payments, and the charges to be forked out for support ser-

One reason for the runaway rise in PFI costs could be Milburn's new insistence that new hospital projects should be "bed neutral" and not follow the pattern of massive bed reductions which made early PFI schemes a by-word for cutbacks. But the monthly lease charges will hang like an albatros round the necks of cash-strapped Trusts for the next 30 years or more.

CLINICAL services in English PFI hospitals may yet be subject to PFI bids, according to the Health Service Jour-

It reports a Depart-ment of Health spokesperson saying that there was "not necessarily any presumption against these services being included under PFI.

Until now ministers have insisted that nursing, professional and medical staff would remain directly employed by the NHS.

Carlisle's Cumberland Infirmary, the first PFI-funded hospital, ran out of beds at the end of February, leaving patients stuck overnight on trolleys. Management insisted that the trolleys were of "high quality" and very comfortable.

A former NHS finance director, Sheila Masters (now Baroness Noakes) has defined true partnership in PFI as "trusting the private sector to manage its services".

Contractors get the brush-off

pressure from UNISON has at last resulted in private contractors Initial being given their marching orders from Pontefract General Infir-

From April 2, non-clinical support services, some of which have been privatised for 15 years, will be brought back in-house, and staff will become NHS employees.

Domestics have been the longest in the private sector, after theirs was the first service handed over to contractors at the height of the Thatcher government's drive for privatisation in the mid 1980s. Porters and catering staff were included in the contract seven years ago.

Between 120 and 160 staff un now transfer to NHS con

But while it might seem a straightforward process to switch staff onto the enhanced pay and conditions available under the NHS Whitley Council agreements, there is a

Transfers have to take place under the so-called TUPE transfer of undertakings) regulations, which were originally designed to protect staff against any loss of entitlements when moved from one imployer to another.

However support staff at Pontefract are on worse terms han the NHS. So, in a bizarre wist, the TUPE regulations nean that they could be ocked into their current low pay scales until UNISON can negotiate a new package that will bring them up to the levels of their colleagues at Pinderfields, who are still on NHS terms and conditions.

Union Eyes spoke to Diane Moore, a domestic at Pontefract, to ask her what staff will miss most with the departure

"Where can I start? The pay is just £3.95 an hour, with no shift allowances," she says. "That's only just above the minimum wage."

"Overtime is paid at flat rate, except for Saturdays and Sundays at time and a quarter, and Bank Holidays, where you get double time but no time off in

"Initial pays no sick pay for domestics, and no pension rights, while the porters and catering staff get just one week's sick pay entitlement a

UNISON's firm stand against privatisation of support services at Pinderfields Hospital, Wakefield blocked plans by the Trust to unify services across both hospitals under a single private contrac-

So it is Initial that bites the dust. Now the task is to negotiate a rate for ancillary staff throughout the Trust.

"UNISON wants to make sure that Initial's profits, which were previously pocketed by their shareholders, now go to staff in improved pay and conditions," says UNISON branch chair Adrian O'Malley.



Sod off, Sodexho!

Robert Rae

Sodexho have the contract for all support services in the Victoria Infirmary, which is part of the South Glasgow Hospitals Trust.

Staff have been privatised for over five years and have seen cuts in terms and conditions and cuts in the service.

UNISON South Glasgow Hospitals branch launched a campaign before Xmas calling for Sodexho and a smaller contractor Olscot/Mitie to be removed and all staff to be brought back in-house.

We held two demon-

outsiae HEALTH the Victoria and did a stall outside the Sodexho cafeteria, asking staff to support their fellow workers by signing Xmas cards to the Chief Execu-Three

weeks after we started, we arranged for 'Sodexho' Claus to visit the Xmas meeting of

deliver over a thousand cards, along with petitions and e-mails.

Following on from this, we are now working with the **Hotel Services** Manager in the Trust, to put a paper to the Trust Board asking for the staff to be brought back inhouse.

We are hoping the Trust will bring the staff back in-house: if they don't, we are still planning to keep the pressure on at a local level. (from LabourNet)

PFI car park rip-off

Tempers are running high among staff and patients alike, as the privatised carparking facilities on Cardiff's University Hospital of Wales site again hike their charges by well above the going rate of inflation.

Cardiff UNISON health branch has protested at the hefty cost of parking, especially for low-paid support staff, who often have no alternative means of travelling in and out for shift work.

Staff parking rates are set to leap in price by between 6-10 percent, to a thumping £20.50 a month, or 85p per day. But the rip-off faced by staff is dwarfed by the massive charges for patients and visitors to the site, who face an extortionate minimum charge of £1.70, no matter how short their visit.

For anyone obliged to stay longer than four hours, either for treatment or while waiting with a relative, the hourly rate steadily increases to a thumping 80p per hour. Anyone unfortunate enough to have to stay 24 hours would have to shell out £16.80.

Patients and relatives have showered the Trust Board with complaints both over the cost of parking, and at the insensitive attitude of the private company which enforces the regulations, slapping sticky labels on the windscreens of offending cars, imposing fines of £25.

One angry husband, who had left a note on his car outside casualty to explain that he had to take his wife in urgently with a broken hip, only to find a penalty notice when he returned, was infuriated to be told that car-park staff "never read notes"

Trust bosses may be embarrassed by the hostility created by the car park and its operation, but they have little control over the private consortium which built the car park under the Private Finance Initiative, and is now free to cain in the profits from parking charges and fines under its 20-year contract with the Trust.