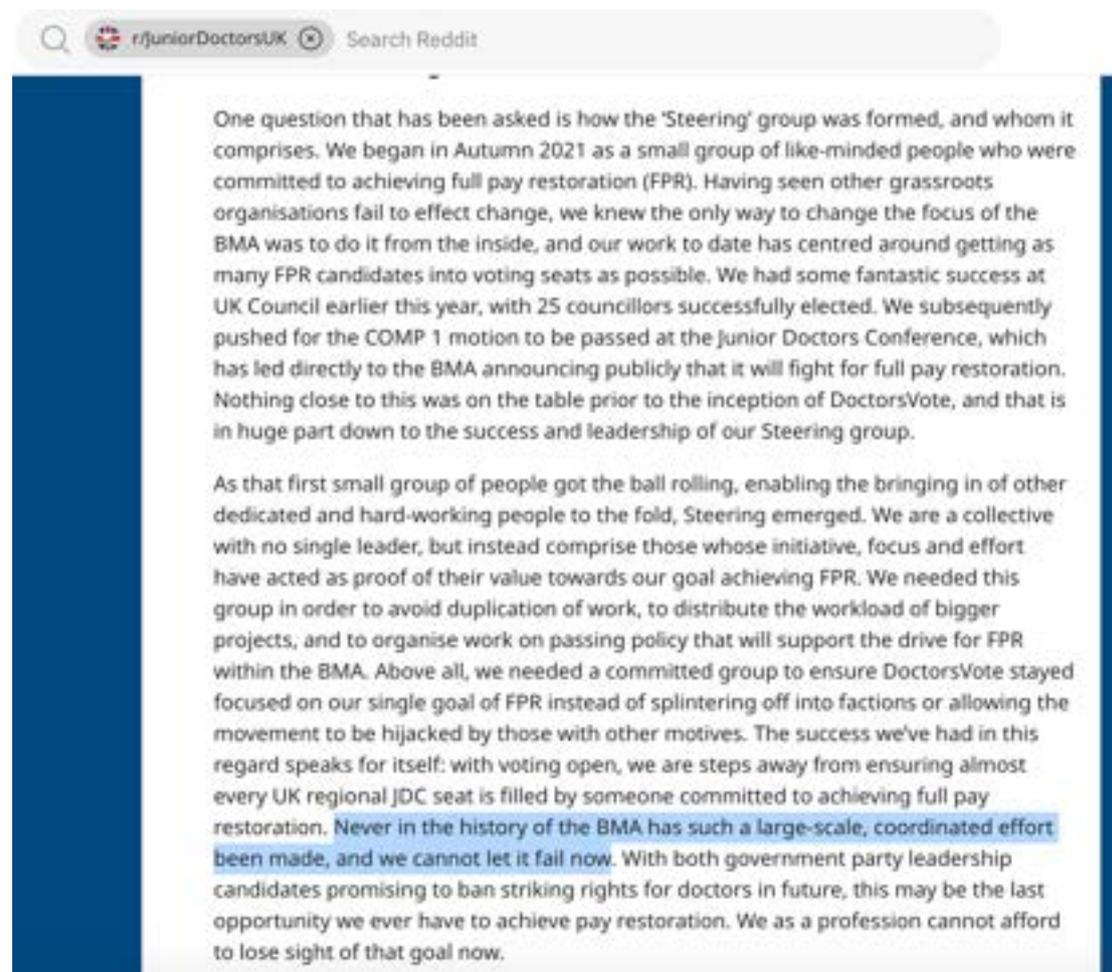


Appendix

Ref. 2 -

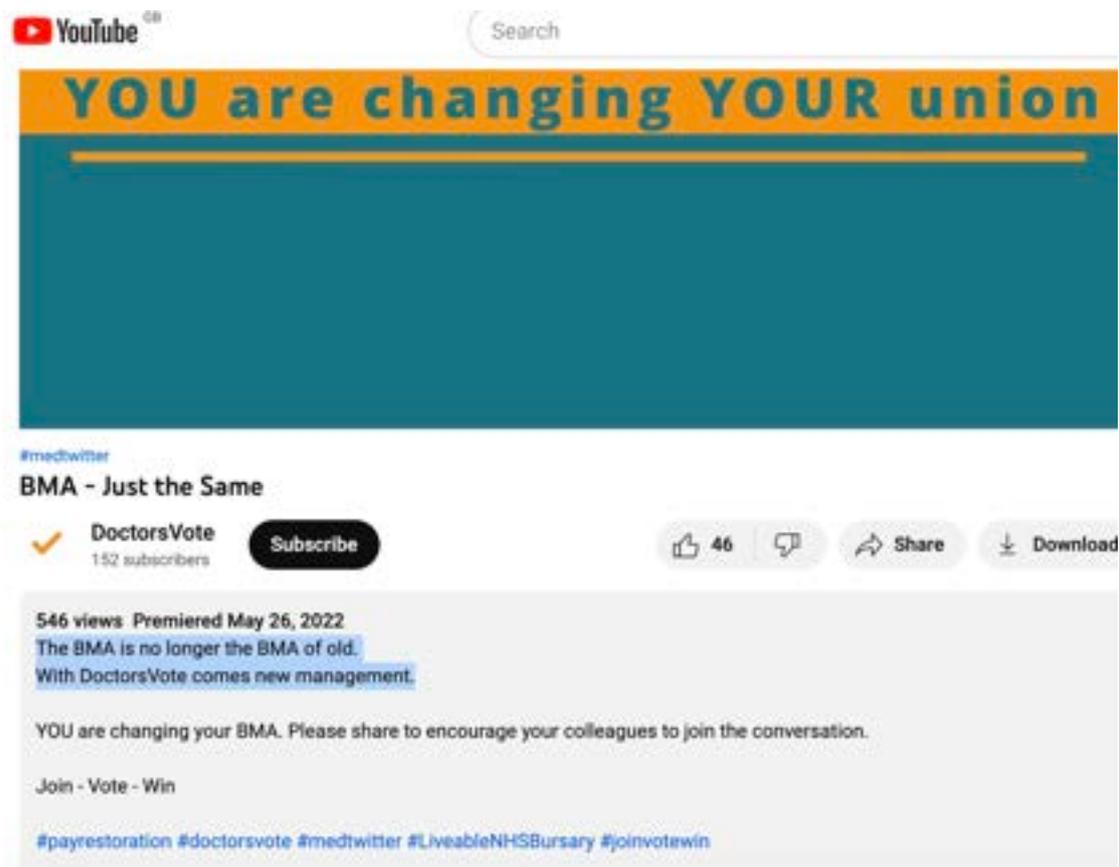
https://www.reddit.com/r/JuniorDoctorsUK/comments/wxnwcy/doctorsvote_statement/



One question that has been asked is how the 'Steering' group was formed, and whom it comprises. We began in Autumn 2021 as a small group of like-minded people who were committed to achieving full pay restoration (FPR). Having seen other grassroots organisations fail to effect change, we knew the only way to change the focus of the BMA was to do it from the inside, and our work to date has centred around getting as many FPR candidates into voting seats as possible. We had some fantastic success at UK Council earlier this year, with 25 councillors successfully elected. We subsequently pushed for the COMP 1 motion to be passed at the Junior Doctors Conference, which has led directly to the BMA announcing publicly that it will fight for full pay restoration. Nothing close to this was on the table prior to the inception of DoctorsVote, and that is in huge part down to the success and leadership of our Steering group.

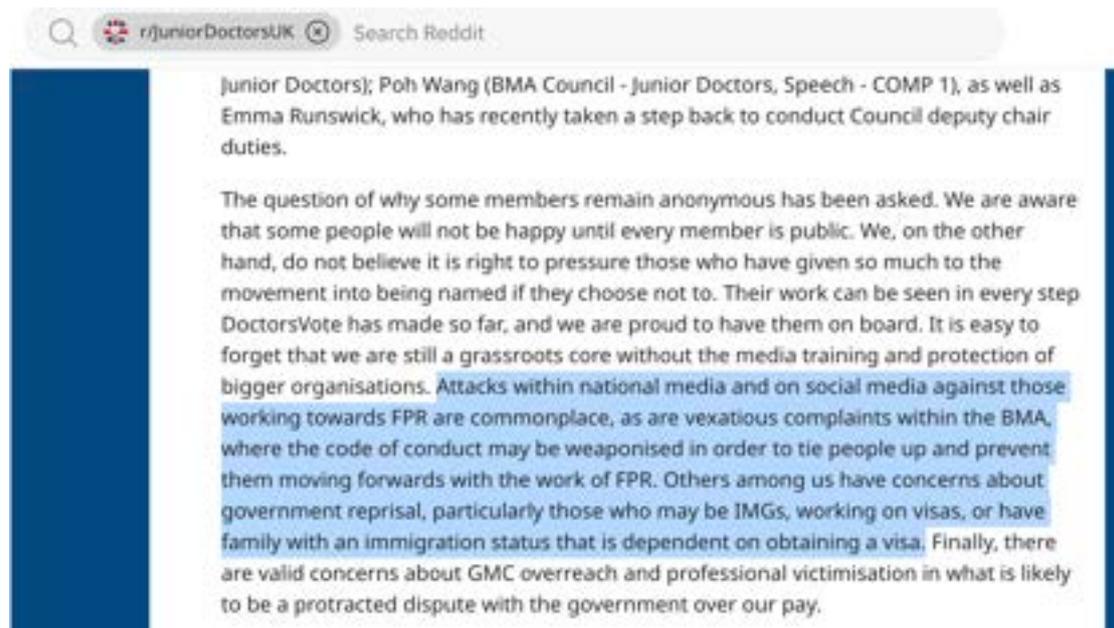
As that first small group of people got the ball rolling, enabling the bringing in of other dedicated and hard-working people to the fold, Steering emerged. We are a collective with no single leader, but instead comprise those whose initiative, focus and effort have acted as proof of their value towards our goal achieving FPR. We needed this group in order to avoid duplication of work, to distribute the workload of bigger projects, and to organise work on passing policy that will support the drive for FPR within the BMA. Above all, we needed a committed group to ensure DoctorsVote stayed focused on our single goal of FPR instead of splintering off into factions or allowing the movement to be hijacked by those with other motives. The success we've had in this regard speaks for itself: with voting open, we are steps away from ensuring almost every UK regional JDC seat is filled by someone committed to achieving full pay restoration. Never in the history of the BMA has such a large-scale, coordinated effort been made, and we cannot let it fail now. With both government party leadership candidates promising to ban striking rights for doctors in future, this may be the last opportunity we ever have to achieve pay restoration. We as a profession cannot afford to lose sight of that goal now.

Ref. 4 – <https://www.youtube.com/watch?v=BgH2sy0nBi0>



The image shows a YouTube video player interface. At the top, the YouTube logo and a search bar are visible. The video title is "YOU are changing YOUR union" in large, bold, blue letters on a dark blue background. Below the title, the channel name "DoctorsVote" is displayed with a checkmark icon, 152 subscribers, and a "Subscribe" button. To the right of the channel name are icons for likes (46), comments, share, and download. The video description includes the text: "546 views Premiered May 26, 2022", "The BMA is no longer the BMA of old.", "With DoctorsVote comes new management.", "YOU are changing your BMA. Please share to encourage your colleagues to join the conversation.", "Join - Vote - Win", and several hashtags: #payrestoration #doctorsvote #medtwitter #LiveableNHSBursary #joinvotewin.

Ref. 5 – https://www.reddit.com/r/JuniorDoctorsUK/comments/wxnwcy/doctorsvote_statement/



The image shows a screenshot of a Reddit comment from the subreddit r/JuniorDoctorsUK. The comment text is as follows: "Junior Doctors); Poh Wang (BMA Council - Junior Doctors, Speech - COMP 1), as well as Emma Runswick, who has recently taken a step back to conduct Council deputy chair duties. The question of why some members remain anonymous has been asked. We are aware that some people will not be happy until every member is public. We, on the other hand, do not believe it is right to pressure those who have given so much to the movement into being named if they choose not to. Their work can be seen in every step DoctorsVote has made so far, and we are proud to have them on board. It is easy to forget that we are still a grassroots core without the media training and protection of bigger organisations. Attacks within national media and on social media against those working towards FPR are commonplace, as are vexatious complaints within the BMA, where the code of conduct may be weaponised in order to tie people up and prevent them moving forwards with the work of FPR. Others among us have concerns about government reprisal, particularly those who may be IMGs, working on visas, or have family with an immigration status that is dependent on obtaining a visa. Finally, there are valid concerns about GMC overreach and professional victimisation in what is likely to be a protracted dispute with the government over our pay."

Ref. 6 – https://twitter.com/Dr_R_Acres/status/1601851782325755906

 **Dr Rebecca Acres #BMABallotReady**
@Dr_R_Acres

This is shameful.
[@UKLabour](#) had already lost my vote by their use of racist dog-whistles (both Kier and Wes) but this is a whole other low.

It would be unconscionable for any public sector worker to vote for this party in its current form.

Proto-fascist Red Tories

 **Wes Streeting MP** @wesstreeting · Dec 10, 2022

Not the headline I expected...

The BMA needs to accept that Labour's plans to train 7,500 more doctors a year must be met with higher standards for patients.

In contrast, other health unions are being reasonable - it's the government who are stubbornly refusing to negotiate. twitter.com/sgfmann/status/1601851782325755906

8:10 AM · Dec 11, 2022

Ref. 7 – https://twitter.com/Dr_R_Acres/status/1588462033389117442

 **Dr Rebecca Acres #BMABallotReady**
@Dr_R_Acres

The [@Conservatives](#) DO NOT HAVE TO do the almost genocidal thing that they are about to do to us as a country.
Austerity is the wrong choice right now; increased government spending is the right choice.



The Guardian Opinions

[theguardian.com](https://www.theguardian.com)
The UK economy is about to be thrown into a black hole - by its own governme...
It fits the definition of madness to propose more austerity. But that, along with higher interest rates, is what's coming, says Guardian economics editor Lary ...

8:23 AM · Nov 4, 2022

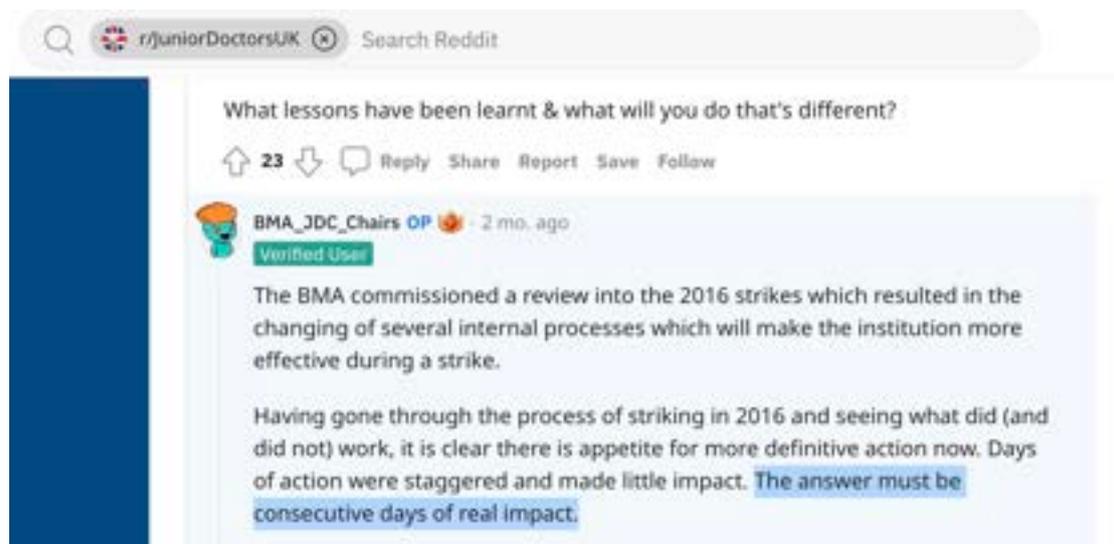
Ref. 8-

<https://twitter.com/RobLaurensonD4P/status/1601941103950839812>



Ref. 12. -

https://www.reddit.com/r/JuniorDoctorsUK/comments/yx6kio/comment/ix5hear/?utm_source=reddit&utm_medium=web2x&context=3



Ref. 13 – <https://www.doctorsvote.org/faq>

The screenshot shows the top navigation bar of the DoctorsVote website with links for 'RJDC Elections', 'Get Involved', 'FAQ', and 'Mailing list'. Below the navigation is a list of FAQ items, each with a right-pointing chevron icon. The items are: 'How are we going to achieve this?', 'Why pay and not College fees/training experience/rotations/parking etc?', 'How does DoctorsVote relate to the BMA?', 'How can I get involved with Doctors Vote?', and 'What stops this from being the same as the 2016 strikes?'. The fifth item is expanded, showing a paragraph of text: 'The 2016 Doctors' strike centered around the imposition of a contract of employment on doctors by the Government, which significantly reduced the pay for out of hours work. The subsequent industrial action took place with daytime walk-outs on 12th January; 10th February; 9th-10th March; and withdrawal of emergency care 26-27 April. The campaign was under-organised and many mistakes were made and learnt from. The campaign this time would potentially include a full walk out of all non-consultant grades for a week.'

Ref. 16 – https://www.reddit.com/r/JuniorDoctorsUK/comments/tjngxx/comment/i1p5bu4/?utm_source=reddit&utm_medium=web2x&context=3

The screenshot shows a Reddit comment from the user 'AcutelyMedic' (BMA) posted 10 months ago. The comment asks, 'How much do you think patient safety can be compromised during industrial action?'. The user's response states that patient safety could be compromised to varying degrees by any industrial action, citing a 100-day doctors strike in Kenya where hospitals shut down and patients died. The user notes that evidence from recent UK/European junior strikes shows that patient safety isn't compromised by these actions. The user's personal preference is for strike coordination to ensure maximum irritation value for least harm, but acknowledges that a strike must be disruptive in order to work. The comment has 10 upvotes and includes options for 'Reply', 'Share', 'Report', 'Save', and 'Follow'. Below the comment are buttons for 'Continue this thread' and 'Show this thread'. At the bottom, the post is dated '8:02 PM - Jan 8, 2023' and has '6,969 Views'.

Ref.18 –

https://www.reddit.com/r/JuniorDoctorsUK/comments/qj2vii/comment/hiquvfs/?utm_source=reddit&utm_medium=web2x&context=3



A screenshot of a Reddit comment. The browser address bar shows 'r/JuniorDoctorsUK' and a search bar. The comment is from user 'thatsycamoretree' (OP) with a karma of +1, posted 1 year ago. The user's profile name is 'doctorsstrike21'. The comment text discusses trade union negotiations and the BMA's stance on strikes. The text is as follows:

I don't think that trade union negotiations are similar to the negotiations when buying a house or international trade relations etc.

The ability for a trade union to win, comes from one thing - which is their ability and readiness to withdraw their labour for as long as it takes to win. That's an important distinction, because things like 'professionalism', 'looking respectable', and tactical secrecy are not relevant for trade unions - but a lot of people in the BMA are trying to say that they are, and using that as an excuse to keep survey results secret, and to not campaign properly - because it might make them look unrespectable. They are also using that idea to justify keeping our negotiations secret - but we would be stronger if they were open

Whatever our demand is, we should be prepared to go on strike until we get it. If we demand 30% then I would not be happy with any leader who calls off the strikes at 10%.

At the bottom of the comment are icons for upvote (3), downvote, reply, share, report, save, and follow.

Ref. 20 –

<https://www.reddit.com/r/JuniorDoctorsUK/comments/xyrvs3/comment/irj7ce8/>



A screenshot of a Reddit comment. The browser address bar shows 'r/JuniorDoctorsUK'. The comment is from user 'DoctorsVoteuk' (OP) with a karma of +3, posted 3 months ago. The user's profile name is 'Verified Account'. The comment text discusses a strike fund set up by the BMA and the impact of strikes on doctors. The text is as follows:

As mentioned, a strike fund has been set up by the BMA to the tune of £2 million. Some of that will go on campaigning and organisational costs, but some should be going into a hardship fund. Those on lower incomes (FY1s, LTFT) will likely take priority when hardship funding comes to be allocated. Whether it's a little or a lot, it is still essential to save whatever amount you can now.

There are almost certainly doctors living hand to mouth, but I doubt anyone will argue when I say they're (fortunately) a tiny minority, and as I say they should take precedence for hardship funding. Almost all of us can afford to scale back, even if just a bit, on non-essential expenditure. Yes, it sounds horrible - it is horrible - but the alternative from our perspective can't be to pretend that strikes don't cost anything, because they do.

Ref. 21 – <https://www.bma.org.uk/news-and-opinion/enough-is-enough-junior-is-not-the-word>

“ People are beginning to realise how much they have lost and are starting to get angry

Dr Newberry



Dr Newberry's point is **not that doctors are poor** compared with the average worker, but that they went into their careers thinking they would have well-paid jobs in return for their hard work and dedication.

Ref. 22 – https://www.reddit.com/r/JuniorDoctorsUK/comments/xyrvs3/a_strike_is_coming_start_preparing_your/?sort=new

DoctorsVoteuk OP +3 · 3 mo. ago
Verified Account

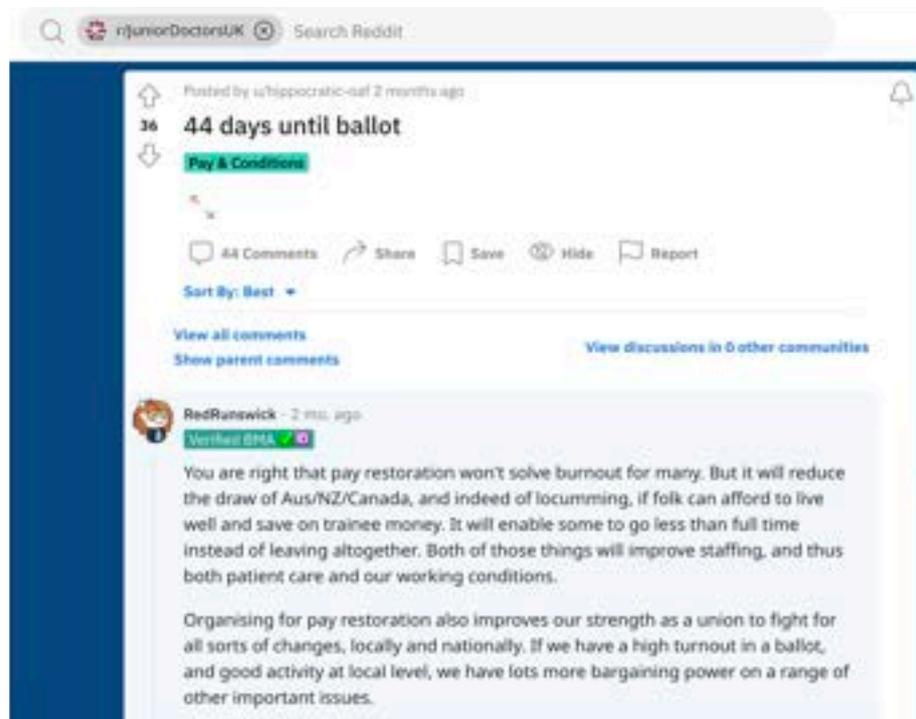
We're working on the exact calculations and will spread more graphics and videos on this topic in the near future, but it looks like you'll make an extra £1.5-2 *million* over the course of your career if we achieve FPR and link it to inflation (which is a must), depending on seniority, hours/week etc.

Strikes can hit hard which is why we need everyone to prepare now, but in the context of so much benefit for a period of relative frugality it's so worth the effort from all of us!

75 Reply Share Report Save Follow

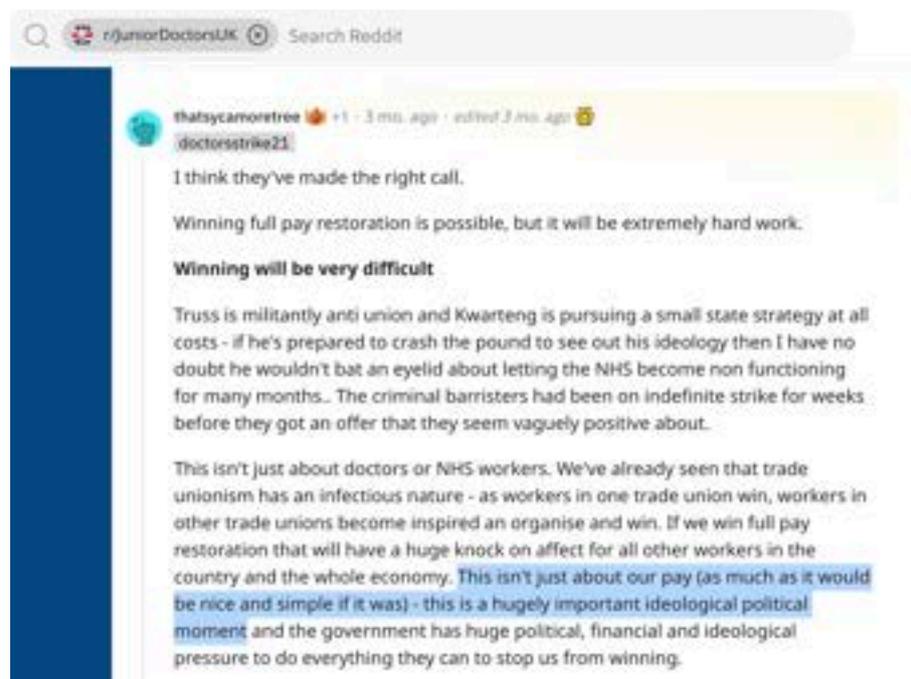
Ref. 14 –

<https://www.reddit.com/r/JuniorDoctorsUK/comments/z5io5n/comment/ixwpslt/>



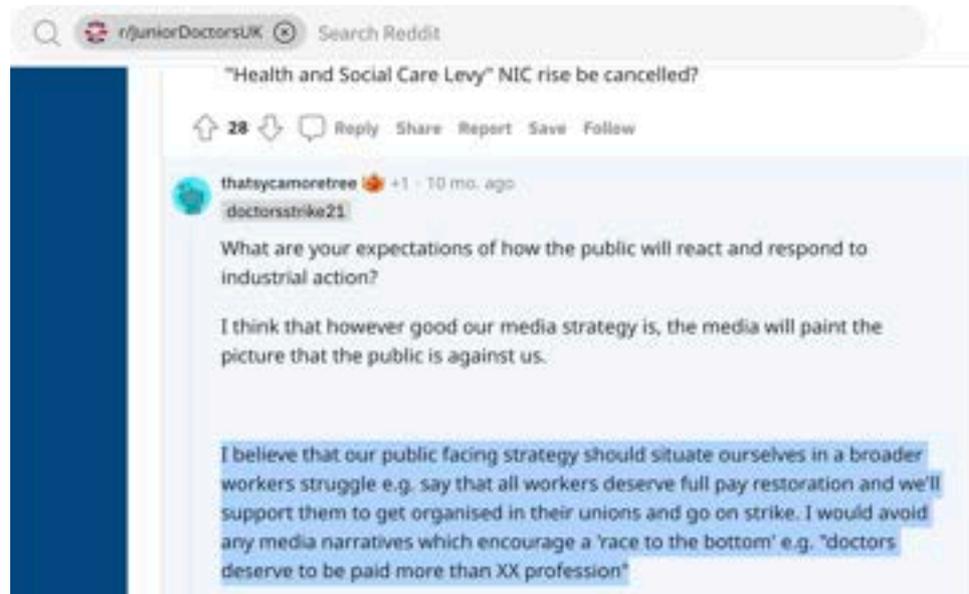
Ref. 24 –

https://www.reddit.com/r/JuniorDoctorsUK/comments/xt1dr6/bma_vote_to_strike_ballot_planned_for_9th_of/?sort=top



Ref. 25 –

https://www.reddit.com/r/JuniorDoctorsUK/comments/tjngxx/comment/i1pdcg0/?utm_source=reddit&utm_medium=web2x&context=3



Search Reddit

r/JuniorDoctorsUK

"Health and Social Care Levy" NIC rise be cancelled?

28 ↑ ↓ Reply Share Report Save Follow

thatsycamoretree +1 · 10 mo. ago

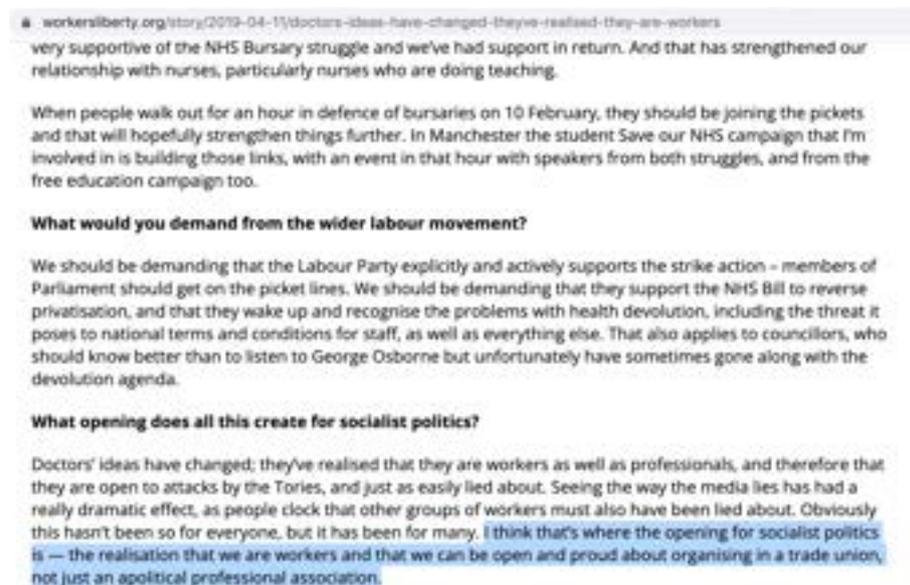
doctorsstrike21

What are your expectations of how the public will react and respond to industrial action?

I think that however good our media strategy is, the media will paint the picture that the public is against us.

I believe that our public facing strategy should situate ourselves in a broader workers struggle e.g. say that all workers deserve full pay restoration and we'll support them to get organised in their unions and go on strike. I would avoid any media narratives which encourage a 'race to the bottom' e.g. 'doctors deserve to be paid more than XX profession'

Ref. 26 – <https://www.workersliberty.org/story/2019-04-11/doctors-ideas-have-changed-theyve-realised-they-are-workers>



workersliberty.org/story/2019-04-11/doctors-ideas-have-changed-theyve-realised-they-are-workers

very supportive of the NHS Bursary struggle and we've had support in return. And that has strengthened our relationship with nurses, particularly nurses who are doing teaching.

When people walk out for an hour in defence of bursaries on 10 February, they should be joining the pickets and that will hopefully strengthen things further. In Manchester the student Save our NHS campaign that I'm involved in is building those links, with an event in that hour with speakers from both struggles, and from the free education campaign too.

What would you demand from the wider labour movement?

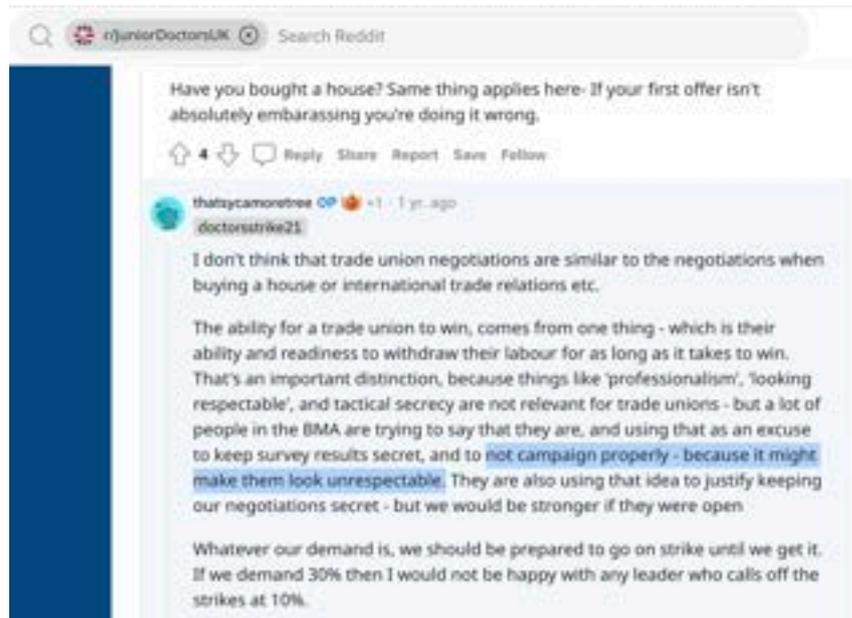
We should be demanding that the Labour Party explicitly and actively supports the strike action – members of Parliament should get on the picket lines. We should be demanding that they support the NHS Bill to reverse privatisation, and that they wake up and recognise the problems with health devolution, including the threat it poses to national terms and conditions for staff, as well as everything else. That also applies to councillors, who should know better than to listen to George Osborne but unfortunately have sometimes gone along with the devolution agenda.

What opening does all this create for socialist politics?

Doctors' ideas have changed; they've realised that they are workers as well as professionals, and therefore that they are open to attacks by the Tories, and just as easily lied about. Seeing the way the media lies has had a really dramatic effect, as people clock that other groups of workers must also have been lied about. Obviously this hasn't been so for everyone, but it has been for many. I think that's where the opening for socialist politics is – the realisation that we are workers and that we can be open and proud about organising in a trade union, not just an apolitical professional association.

Ref. 42 –

https://www.reddit.com/r/JuniorDoctorsUK/comments/qj2vii/comment/higuvfs/?utm_source=reddit&utm_medium=web2x&context=3



Ref. 43 – <http://www.doctorsbroadsheet.org/bma-uk-council-elections-2022/>

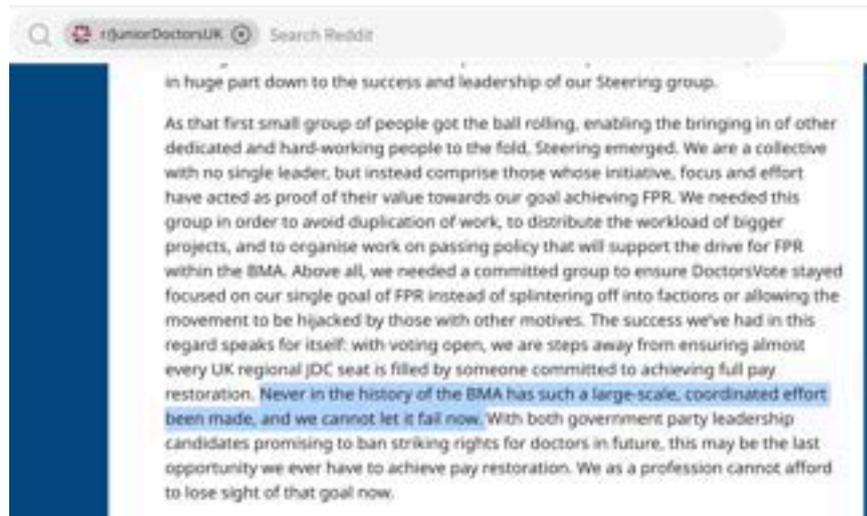


Ref. 44 – https://twitter.com/jo_may_sk/status/1517785922439462913



Ref. 46 -

https://www.reddit.com/r/JuniorDoctorsUK/comments/wxnwcy/doctorsvote_statement/



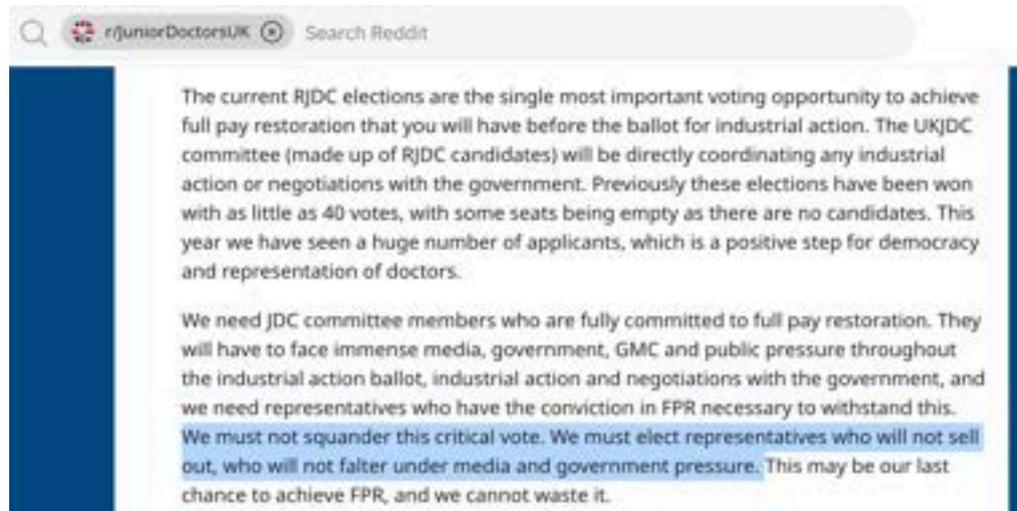
Ref. 50 -

https://www.reddit.com/r/JuniorDoctorsUK/comments/t4ml54/doctors_vote_for_full_pay_restoration_update/?sort=new



Ref. 51 –

https://www.reddit.com/r/JuniorDoctorsUK/comments/wxnwcy/doctorsvote_statement/



Ref. 52 – <https://doctorsvote.substack.com/p/doctors-vote-update-and-call-to-arms>



Ref. 53 – <https://doctorsvote.substack.com/p/doctors-vote-update-and-call-to-arms>

Doctors Vote Newsletter

BMA policy:

- You got 25 Doctors Vote candidates elected to Council.
- You voted for pay restoration to be debated at conference.
- You pushed through conference by far the most significant change in BMA industrial strategy for a decade.
- You secured a ballot for industrial action by early next year.
- You won the argument for resources to be diverted towards winning it. You achieved far more than any of us believed possible.

We are doing well. But we need to be honest with you - we aren't doing that well. We aren't yet on track to win full pay restoration. Doctors Vote received 1600 votes at council. That's about 3% of junior doctors. It's not enough.

Ref. 56 – https://www.reddit.com/r/JuniorDoctorsUK/comments/wxnwcy/doctorsvote_statement/

r/JuniorDoctorsUK Search Reddit

Emma Runswick, who has recently taken a step back to conduct Council deputy chair duties.

The question of why some members remain anonymous has been asked. We are aware that some people will not be happy until every member is public. We, on the other hand, do not believe it is right to pressure those who have given so much to the movement into being named if they choose not to. Their work can be seen in every step DoctorsVote has made so far, and we are proud to have them on board. It is easy to forget that we are still a grassroots core without the media training and protection of bigger organisations. Attacks within national media and on social media against those working towards FPR are commonplace, as are vexatious complaints within the BMA, where the code of conduct may be weaponised in order to tie people up and prevent them moving forwards with the work of FPR. Others among us have concerns about government reprisal, particularly those who may be IMGs, working on visas, or have family with an immigration status that is dependent on obtaining a visa. Finally, there are valid concerns about GMC censorship and professional victimisation in what is likely

Ref. 57 –

https://twitter.com/malinga_r/status/1611993439742361602?s=20&t=-F0pL3yiQB2bDQVkpZLD2A

 **Malinga Ratwatte #BMABallotReady**
@malinga_r

Replying to @sanchit_turaga @DailyMailUK and 2 others

Doctors Vote has explicitly been non partisan since day 1. Our members include those across the whole political spectrum. To suggest otherwise is simply false.

7:49 AM · Jan 8, 2023 · 872 Views

Ref. 58 –

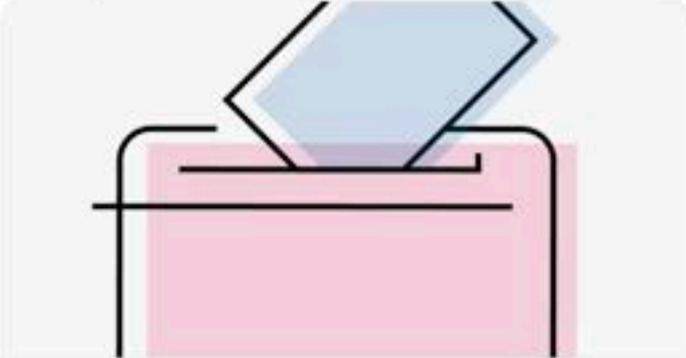
<https://twitter.com/ERunswickBMA/status/1562182155245076481>

 **Emma Runswick**
@ERunswickBMA

Replying to @SalfordMH and @NWIDC

Thanks Michael!
Full Council results are here bma.org.uk/what-we-do/uk-...
We have 8 Broad Left members of Council and 25 Doctors Vote (though that's a Venn diagram of people).

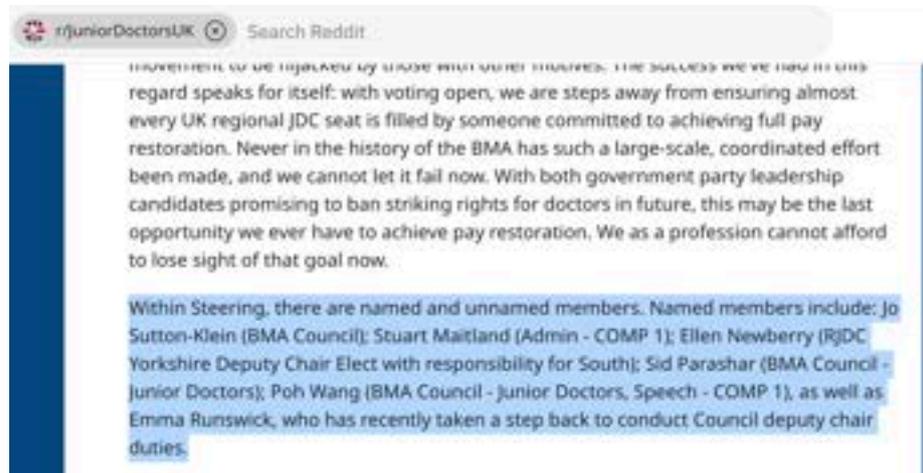
I was elected on 13th July to Deputy Chair of Council
bma.org.uk/news-and-opini...



bma.org.uk
UK council elections
The 2022 council elections have concluded. See the full results of those elected

Ref. 59 –

https://www.reddit.com/r/JuniorDoctorsUK/comments/wxnwcy/doctorsvoite_statement/

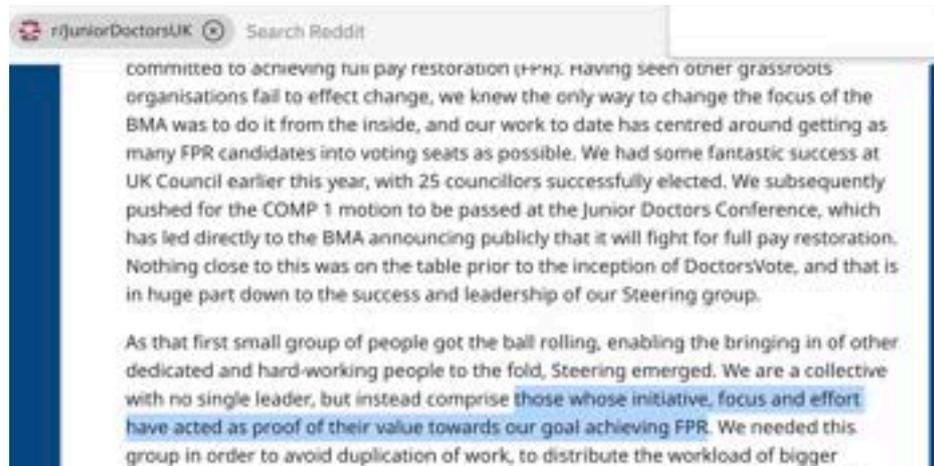


Ref. 60 – <https://twitter.com/StuMaitland/status/1562710163291017217>

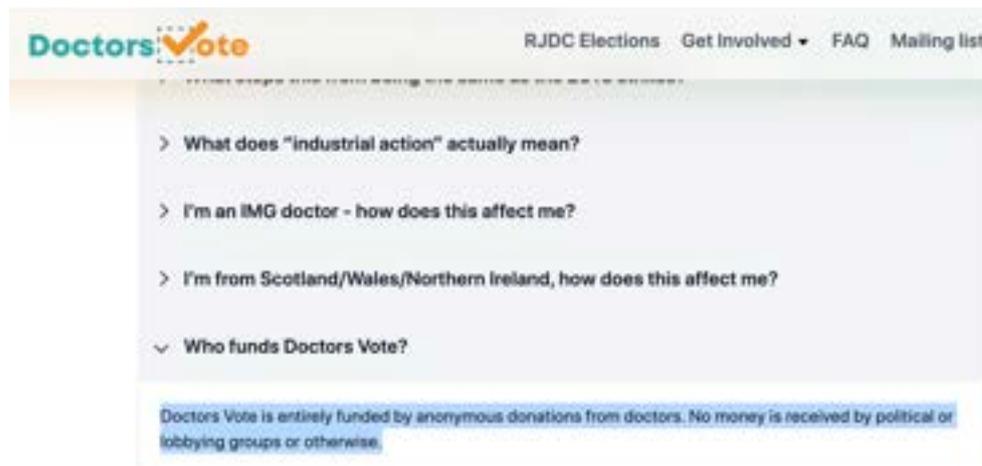


Ref. 61 –

https://www.reddit.com/r/JuniorDoctorsUK/comments/qj2vii/comment/higuvfs/?utm_source=reddit&utm_medium=web2x&context=3

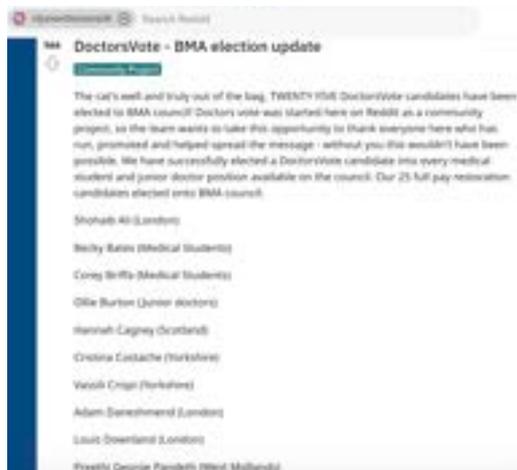


Ref. 62 - <https://www.doctorsvote.org/faq> (Who funds DoctorsVote)



Ref. 63 –

https://www.reddit.com/r/JuniorDoctorsUK/comments/ue3j7d/doctorsvote_bma_election_update/



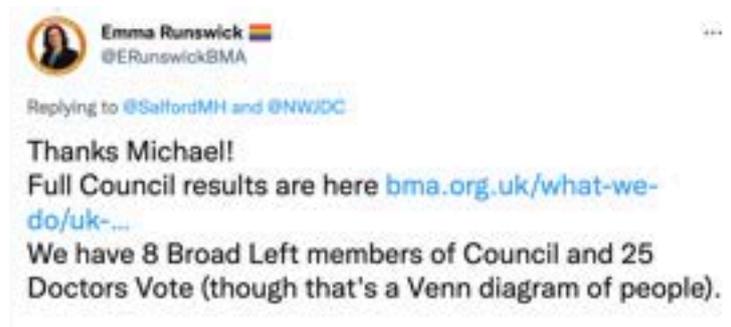
Ref. 65 –

<https://twitter.com/ERunswickBMA/status/1519684183144243200/photo/2>



Ref. 66 –

<https://twitter.com/ERunswickBMA/status/1562182155245076481>

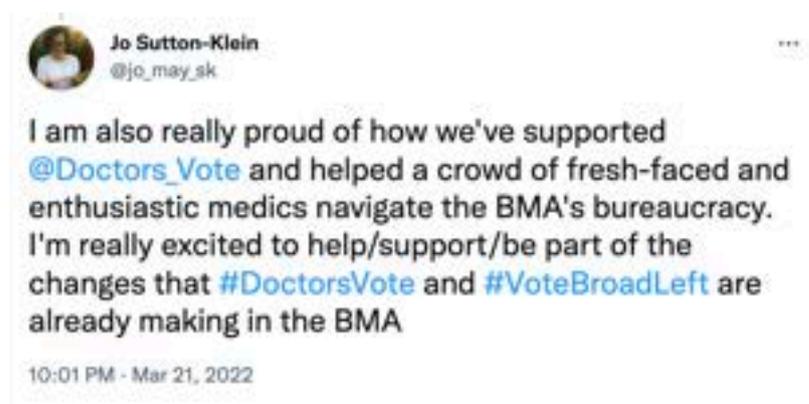


Ref. 67 –

<https://twitter.com/ERunswickBMA/status/1519684183144243200>



Ref. 68 – https://twitter.com/jo_may_sk/status/1506028149565542404



Ref. 69 – <https://www.bma.org.uk/media/4038/bma-junior-doctors-conference-agenda-2021.pdf>

JD1005* 31

Motion by CONFERENCE AGENDA COMMITTEE (To be proposed by YORKSHIRE RJD) This conference recognises that the BMA is a non-partisan organisation. However, it is concerned by the lack of a substantial campaign to appropriately highlight to the public both the real-terms decline in NHS staff pay and the declining health of the UK public due to government policy since 2010.

We call on the BMA to:

- i) Accept that by not appropriately educating stakeholders about these issues the BMA may be inadvertently supporting a pro-Conservative party message
- ii) Initiate a campaign to inform and educate the membership about the true scale of the real-terms pay erosion in doctor wages since the Conservative party gained power in 2010
- iii) Ensure any BMA reports into public health matters are appropriately critical of the relevant government, regardless of how that would affect future pay negotiations.
- iv) Lobby the four UK governments to restore junior doctor pay by implementing a 15% pay uplift to basic pay, and flexible pay premia where present
- v) Work with other NHS trade unions and campaign groups who make similar demands and co-ordinate with them
- vi) Lay groundwork for industrial action over pay if the demand in iv) is not met by the end of 2021, including mapping members, running indicative ballots, mobilising local representative structures and releasing communications about pay and our demands

Ref. 74 - <https://twitter.com/RobLaurensonD4P/status/1580590604882321408>

 **Robert Laurenson #BMADoctorsVoteYes**
@RobLaurensonD4P

Doctors are being coerced into the managed decline of our healthcare system by this government.

We will not participate in their failed plans and we will be voting to withdraw our labour on 9th January.

Sort out the pension crisis and sort out [#PayRestoration! twitter.com/andrewgregory/...](https://twitter.com/andrewgregory/)

This Tweet was deleted by the Tweet author. [Learn more](#)

5:05 PM - Oct 13, 2022

Ref. 75 – https://twitter.com/Dr_R_Acres/status/1601851782325755906

 **Dr Rebecca Acres #BMABallotReady**
@Dr_R_Acres

This is shameful.
[@UKLabour](#) had already lost my vote by their use of racist dog-whistles (both Kier and Wes) but this is a whole other low.

It would be unconscionable for any public sector worker to vote for this party in its current form.

Proto-fascist Red Tories

 **Wes Streeting MP** @wesstreeting · Dec 10, 2022

Not the headline I expected...

The BMA needs to accept that Labour's plans to train 7,500 more doctors a year must be met with higher standards for patients.

In contrast, other health unions are being reasonable - it's the government who are stubbornly refusing to negotiate. twitter.com/sgfmann/status...

8:10 AM · Dec 11, 2022

Ref. 76 – https://twitter.com/Dr_R_Acres/status/1588462033389117442

 **Dr Rebecca Acres #BMABallotReady**
@Dr_R_Acres

The [@Conservatives](#) DO NOT HAVE TO do the almost genocidal thing that they are about to do to us as a country.
Austerity is the wrong choice right now; increased government spending is the right choice.

The Guardian Opinions article cover features a photograph of a large industrial machine, possibly a conveyor belt or a piece of heavy machinery, with a red and black color scheme. The text 'The Guardian Opinions' is prominently displayed in a bold, white font on a dark background.

theguardian.com

The UK economy is about to be thrown into a black hole - by its own governme...
It fits the definition of madness to propose more austerity. But that, along with higher interest rates, is what's coming, says Guardian economics editor Larry ...

Ref. 77 – https://twitter.com/Dr_R_Acres/status/1584499316332191744



Ref. 78 – <https://jillsmomentumblog.wordpress.com/2016/07/04/unitystatement/>



Ref. 79 – <https://theclarionmag.org/2017/06/21/minipurge/>



Ref. 80 – <https://theclarionmag.org/2016/11/21/mls/>

The tactics employed by the right in the first term continued throughout the year, with extensive attempts to refuse to let members have a say in the group's direction following demands for regular, democratic meetings. This had a demobilising effect on a number of new members who have since told us that they were appalled by the cynical behaviour of those on the committee. Despite the difficulties, we used our left caucus as a battering ram to open up an insular Labour club. Progress was made in overcoming attempts to prevent democratic elections, and in allowing all members to meet monthly to discuss and vote on their own agenda. In this context,

Ref. 81 – <https://www.workersliberty.org/story/2019-04-11/doctors-ideas-have-changed-theyve-realised-they-are-workers>

What opening does all this create for socialist politics?

Doctors' ideas have changed; they've realised that they are workers as well as professionals, and therefore that they are open to attacks by the Tories, and just as easily lied about. Seeing the way the media lies has had a really dramatic effect, as people clock that other groups of workers must also have been lied about. Obviously this hasn't been so for everyone, but it has been for many. I think that's where the opening for socialist politics is — the realisation that we are workers and that we can be open and proud about organising in a trade union, not just an apolitical professional association.

Ref. 84 – <https://twitter.com/ERunswickBMA/status/1350464753114746890>



The #ZeroCovid campaign makes my heart sing.

So many people are organising for a strategy that prioritises lives and livelihoods. This struggle is the antidote to horrible days at work, to conspiracies and idiot pundits.

Join us @ZeroCovid_UK

3:27 PM · Jan 16, 2021

The image shows a screenshot of a tweet from Emma Runswick (@ERunswickBMA). The tweet text is: "The #ZeroCovid campaign makes my heart sing. So many people are organising for a strategy that prioritises lives and livelihoods. This struggle is the antidote to horrible days at work, to conspiracies and idiot pundits. Join us @ZeroCovid_UK". The tweet is dated 3:27 PM on Jan 16, 2021.

Ref. 86 –

<https://twitter.com/ERunswickBMA/status/1412551009575047172>



Ref. 87 -

<https://twitter.com/ERunswickBMA/status/1429935870598160384>



Ref . 88 -

<https://twitter.com/ERunswickBMA/status/1429591185006501889>



Emma Runswick 
@ERunswickBMA

...

Replying to @ERunswickBMA @labour4decrim and @TheBMA

Being moralistic about this shows that you don't get it.

If you want people out of sex work, you need to make them not need money.

Pushing them out of med school deprives you of excellent clinicians.

Support your members at ARM, folks - at least some of them will be sex workers.

12:47 AM · Aug 23, 2021

Ref. 89 -

<https://twitter.com/ERunswickBMA/status/1523339250875338752>



Emma Runswick 
@ERunswickBMA

...

I've taken time out of training to locum, so I can do a PGCert, BSL qualification and still have money to enjoy life a little. But I *do* want to train. I think we deserve to be able to afford to develop as doctors AND enjoy art/sport/culture/life.

 +📌 twitter.com/sumitriptan/st...

This Tweet was deleted by the Tweet author. [Learn more](#)

5:29 PM · May 8, 2022

Ref. 90 -

https://www.reddit.com/r/JuniorDoctorsUK/comments/xt1dr6/bma_vote_to_strike_ballot_planned_for_9th_of/?sort=top

 thatsycamoretree 🍌 +1 · 3 mo. ago · edited 3 mo. ago 🗨️
doctorsstrike21

I think they've made the right call.

Winning full pay restoration is possible, but it will be extremely hard work.

Winning will be very difficult

Truss is militantly anti union and Kwarteng is pursuing a small state strategy at all costs - if he's prepared to crash the pound to see out his ideology then I have no doubt he wouldn't bat an eyelid about letting the NHS become non functioning for many months.. The criminal barristers had been on indefinite strike for weeks before they got an offer that they seem vaguely positive about.

This isn't just about doctors or NHS workers. We've already seen that trade unionism has an infectious nature - as workers in one trade union win, workers in other trade unions become inspired and organise and win. If we win full pay restoration that will have a huge knock on affect for all other workers in the country and the whole economy. This isn't just about our pay (as much as it would be nice and simple if it was) - **this is a hugely important ideological political moment** and the government has huge political, financial and ideological pressure to do everything they can to stop us from winning.

Ref. 93 - https://twitter.com/jo_may_sk/status/1517784117982674944)



Jo Sutton-Klein
@jo_may_sk

...

Replying to @techpriest @mina_el_naguib and 3 others

Yes, there is definitely a sense that by being well-dressed and well-spoken and not asking for too much or by making too much of a fuss the BMA thinks it can achieve more. Not only is it classist, it's also proven ineffective and wrong

9:35 AM · Apr 23, 2022

Ref. 94 -

<https://twitter.com/RobLaurensonD4P/status/1561315284027310082>



Robert Laurenson #BMADoctorsVoteYes
@RobLaurensonD4P

...

The government has been pursuing a Starve The Beast strategy in healthcare.

I think we're about to see what Starving Beasts do.

Fight back or we risk losing everything!

[#PayRestoration](#) [#EnoughIsEnough](#)

12:32 PM · Aug 21, 2022

Ref. 95 -

<https://twitter.com/RobLaurensonD4P/status/1601267950983729158>



Robert Laurenson #BMADoctorsVoteYes
@RobLaurensonD4P

...

There are so many issues with our profession and it all stems from the deliberate devaluation and erosion by the government.

A profession on its knees given the opportunity to stand.

No longer do we beg.

United we bargain!



Junior Doctors @BMA_JuniorDocs · Dec 9, 2022

In exactly one month, the ballot of junior doctors in England opens.

Are you #BMABallotReady? If you aren't a member yet, there's still plenty of time to join the fight for #PayRestoration

bma.org.uk/pay-and-contra...

6:30 PM · Dec 9, 2022

Ref. 96 -

https://www.reddit.com/r/JuniorDoctorsUK/comments/qj2vii/comment/higuvfs/?utm_source=reddit&utm_medium=web2x&context=3



thatsycamoretree OP +1 · 1 yr. ago

doctorsstrike21

I don't think that trade union negotiations are similar to the negotiations when buying a house or international trade relations etc.

The ability for a trade union to win, comes from one thing - which is their ability and readiness to withdraw their labour for as long as it takes to win. That's an important distinction, because things like 'professionalism', 'looking respectable', and tactical secrecy are not relevant for trade unions - but a lot of people in the BMA are trying to say that they are, and using that as an excuse to keep survey results secret, and to not campaign properly - because it might make them look unrespectable. They are also using that idea to justify keeping our negotiations secret - but we would be stronger if they were open

Whatever our demand is, we should be prepared to go on strike until we get it. If we demand 30% then I would not be happy with any leader who calls off the strikes at 10%.



3



Reply

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Ref. 97 -

https://www.reddit.com/r/JuniorDoctorsUK/comments/yx6kio/comment/ix5hear/?utm_source=reddit&utm_medium=web2x&context=3



BMA_JDC_Chairs OP 🏆 · 2 mo. ago

Verified User

The BMA commissioned a review into the 2016 strikes which resulted in the changing of several internal processes which will make the institution more effective during a strike.

Having gone through the process of striking in 2016 and seeing what did (and did not) work, it is clear there is appetite for more definitive action now. **Days of action were staggered and made little impact. The answer must be consecutive days of real impact.**

Infrastructure of membership views was poor in 2016. At the time, it was felt by JDC, that the membership didn't have the appetite to continue strike action. This however, did not seem to reflect the opinions of a large cohort of doctors. This time we've been building a lasting grassroots infrastructure as well as developing the ability of the union to manage the media and corporate responsiveness. Not only will this allow better dissemination of information and collating of information/ views from the membership, but will help us increase the transparency between JDC and our membership.

This year the JDC is united behind the single issue of FPR.

↑ 5 ↓ 🗨 Reply Share Report Save Follow

Ref. 99 -

https://www.reddit.com/r/JuniorDoctorsUK/comments/yx6kio/comment/ix54wbi/?utm_source=reddit&utm_medium=web2x&context=3



BMA_JDC_Chairs OP · 2 mo. ago

Verified User

December 12th is our next JDC meeting and will be an opportunity to narrow down our strategy. This is the time for you, and all members, to have your voice heard. Please speak to your elected regional/ national JDC reps and give them your thoughts on forms of strike action in advance of our meeting.

It is our (Rob + Vivek) preference that we announce our strategy in the form of action before the ballot opens. Our preference is giving employers the legally required notice of days of action and nothing more. Our preference is a full walkout.

The benefit of the hospital strike WhatsApp groups is that we can rapidly share information like this to doctors, if colleagues in your department are not part of the groups share the link with them. If there are any specific questions a member of your local regional junior doctor committee can help answer them or escalate it within the BMA.

We have nothing to fear here. We are exercising our democratic rights and giving the Government the necessary notification.

12 Reply Share Report Save Follow

Ref. 100 -

https://www.reddit.com/r/JuniorDoctorsUK/comments/tjngxx/comment/i1panhx/?utm_source=reddit&utm_medium=web2x&context=3



RedRunswick OP · 10 mo. ago

Verified BMA

Personal view - Yes, however leaving emergency care (or some emergency care) does give us a helpful place to put people who don't want to go on strike at all. Industrial action tactics and maximising turnout are going to be important. I'm not sure I would lead with a full walk out including emergency care, if I could have coordination of anaesthetists, cleaners, surgeons, nurses, ODPs, ward doctors, porters, etc shutting down elective surgery for some time for example.

10 Reply Share Report Save Follow

Ref. 101 -

https://www.reddit.com/r/JuniorDoctorsUK/comments/tjngxx/comment/i1p6r7a/?utm_source=reddit&utm_medium=web2x&context=3

 AcutelyMedic · 10 mo. ago
BMA

Personal View: I am not enthusiastic about the idea of a full walkout (including emergency care) but totally supportive of it if necessary to achieve industrial objectives.

The last junior doctor strikes prior to 2016 were in 1975 (info here: <https://www.bmj.com/content/351/bmj.h6155>) and did not include emergency care so the emergency care elements of the April 2016 strikes were unprecedented.

The 2016 strikes didn't worsen in-hospital mortality figures but may have affected other figures which are more difficult to attribute.

 8   Reply Share Report Save Follow

Ref. 102 -

https://www.reddit.com/r/JuniorDoctorsUK/comments/tjngxx/comment/i1pbuoz/?utm_source=reddit&utm_medium=web2x&context=3

 thatsycamoretree 🍷 +1 · 10 mo. ago
doctorsstrike21

If it was necessary to win then yes - but it's not a decision that I'd make enthusiastically. Having said that - patients are missing out urgent and emergency care as it is, and the situation is only getting worse. So I still believe that a full walk out be less harmful for patients in the long term than letting the status quo continue.

If there are medics who can't strike for whatever reasons (upcoming parental leave/visa etc) then it could be a good strategy for them to staff the emergency cover

 10   Reply Share Report Save Follow

Ref. 104 -

https://www.reddit.com/r/JuniorDoctorsUK/comments/tjngxx/comment/i1p5bu4/?utm_source=reddit&utm_medium=web2x&context=3

 AcutelyMedic · 10 mo. ago
BMA

"How much do you think patient safety can be compromised during industrial action?"

The answer to this is of course that patient safety could be compromised to varying degrees by any industrial action. Kenya has in recent years had an all-out doctors strike lasting 100 days and hospitals did shut down with patients dying as a direct result. The evidence from recent strikes of UK/European juniors is actually that patient safety isn't compromised by these actions. **Personally my preference is for strike coordination to ensure maximum irritation value for least harm. Unfortunately a strike has to be disruptive in order to work.**

 11   Reply Share Report Save Follow

Ref. 105 -

https://www.reddit.com/r/JuniorDoctorsUK/comments/tjngxx/comment/i1pbuoz/?utm_source=reddit&utm_medium=web2x&context=3

 thatsycamoretree 🍷 +1 · 10 mo. ago
doctorsstrike21

If it was necessary to win then yes - but it's not a decision that I'd make enthusiastically. Having said that - **patients are missing out urgent and emergency care as it is, and the situation is only getting worse. So I still believe that a full walk out be less harmful for patients in the long term than letting the status quo continue.**

If there are medics who can't strike for whatever reasons (upcoming parental leave/visa etc) then it could be a good strategy for them to staff the emergency cover

 8   Reply Share Report Save Follow

Ref. 116 - <https://bma-mail.org.uk/JVX-81JL0-31C0A470E44088497T0BHL51CFEC3D459113B3/cr.aspx>

Update on ballot for industrial action

The JDC has decided to **ballot junior doctor members for industrial action** beginning in early January 2023. This decision was not made lightly, and we know some of our members will be frustrated at even the slightest delay to a ballot. We are not blinded by rage. We have our eyes fully on the prize and are maximising our leverage with the timing. Full pay restoration benefits us all and so we ask those of you who are ready as individuals to strengthen our ranks by convincing as many doctors as possible in our united approach to fight back against this Government. We will be using the time between now and then to educate, inform, organise, and mobilise our members in the fight for full pay restoration.



To this end, the BMA has begun to train over 300 junior doctors in industrial organising and campaigning (the Jane McAlevey principles). Furthermore, we are developing local campaigns in all trusts in England with **regional JDCs** and IROs helping to coordinate. Keep an eye out for meetings in your trust that will be taking place over the next few weeks. You can play your part by encouraging your colleagues to **join the BMA** so they can join the campaign for full pay restoration and have their say in the ballot.

Ref. 117 - https://www.reddit.com/r/JuniorDoctorsUK/comments/tjngxx/we_are_part_of_the_broad_left_slate_running_for/?sort=top



AcutelyMedic · 10 mo. ago

BMA

"What are your expectations of how the public will react and respond to industrial action?"

My expectation is that the public would ultimately respond negatively to any industrial action and that we should build that into our industrial plan, warning members about it and inoculating them against it as best we can. Industrial Action (think Tube drivers strike) is meant to be disruptive and that is irritating to users of the service which is on strike; that's the whole point. If no one noticed that we were on strike there would be no impetus for the government to negotiate with us.

Ref. 122 - video 11 of

https://drive.google.com/drive/folders/1mKxF9h9wX14J1m5w3MJYjtDlqWl_Wsbj

0:23 mins – 0:27 mins

Ref. 123 –

<https://www.reddit.com/r/JuniorDoctorsUK/comments/yx6kio/comment/ix510cw/>

The hospital Strike WhatsApp groups gives us almost real time dialogue between grassroots and us. We can now be very agile in our reactive approaches. What we need to improve though is turning mobilised doctors into activist doctors who will get us that supermajority. This was the birthplace of the DV movement where everyday doctors took up arms to fight for FPR. That task didn't end at the elections, it ends when the government meet our demands. If you want to join

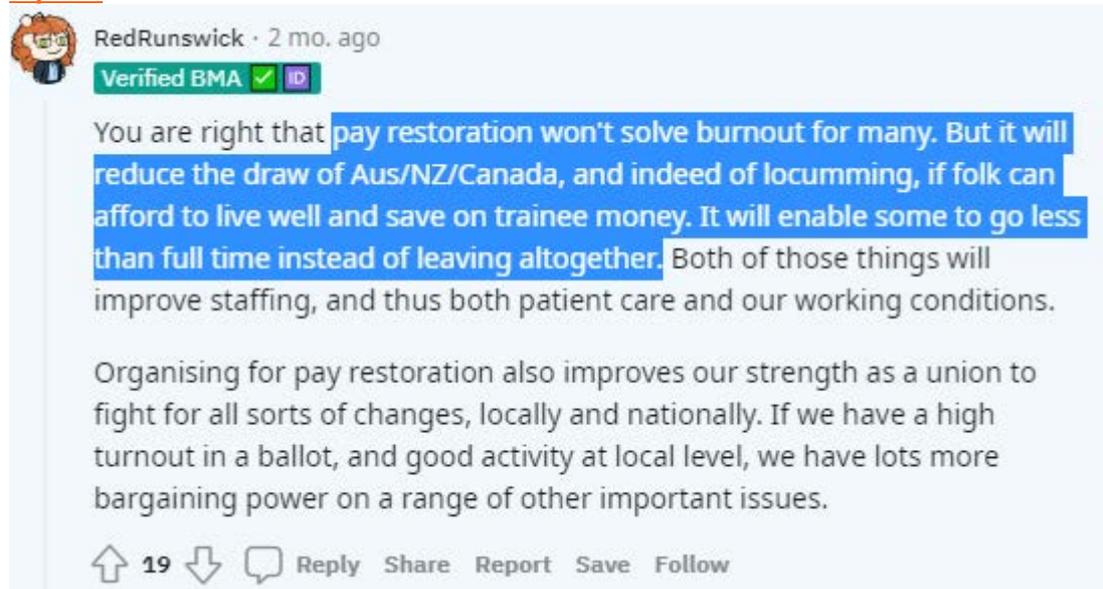
The RCN started publicising their ballot immediately before it opened, not 8-12 weeks before a there is good reason for that. Our work needs to be done face to face first, and then we will spread into the public arena. We don't want the public getting Doctor strike fatigue and acclimatising. We want the Gov to know what we're doing, and they do, and we want our docto to know. The public needs to know around the time of the ballot and action. The hit pieces bein

Ref. 126 - <https://www.youtube.com/watch?v=Fs0PMZUrVyQ>

- 4:59 mins – 5:08 mins
- 33:00 mins – 33:05 mins

Ref. 143 -

<https://www.reddit.com/r/JuniorDoctorsUK/comments/z5io5n/comment/ixwpslt/>



RedRunswick · 2 mo. ago
Verified BMA ✓ ID

You are right that pay restoration won't solve burnout for many. But it will reduce the draw of Aus/NZ/Canada, and indeed of locumming, if folk can afford to live well and save on trainee money. It will enable some to go less than full time instead of leaving altogether. Both of those things will improve staffing, and thus both patient care and our working conditions.

Organising for pay restoration also improves our strength as a union to fight for all sorts of changes, locally and nationally. If we have a high turnout in a ballot, and good activity at local level, we have lots more bargaining power on a range of other important issues.

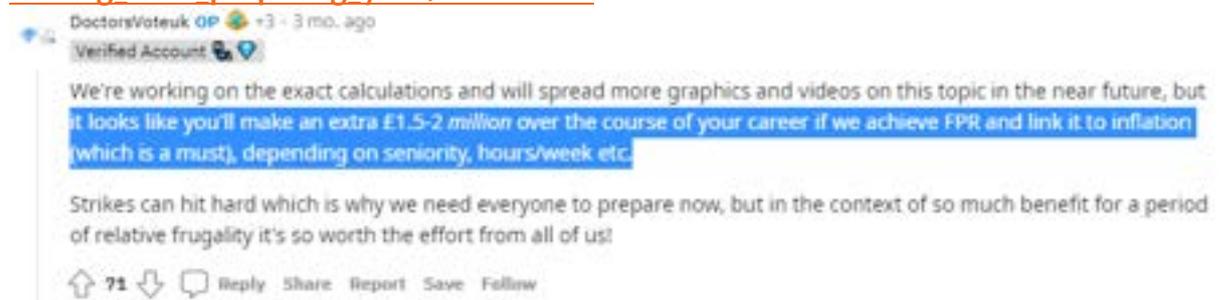
19 ↓ Reply Share Report Save Follow

Ref. 144 - <https://www.youtube.com/watch?v=0tm-qCS30ts>

1:02 mins - 1:08 mins

Ref. 145 -

https://www.reddit.com/r/JuniorDoctorsUK/comments/xyrvs3/a_strike_is_coming_start_preparing_your/?sort=new



DoctorsVoteuk OP +3 · 3 mo. ago
Verified Account

We're working on the exact calculations and will spread more graphics and videos on this topic in the near future, but it looks like you'll make an extra £1.5-2 million over the course of your career if we achieve FPR and link it to inflation (which is a must), depending on seniority, hours/week etc.

Strikes can hit hard which is why we need everyone to prepare now, but in the context of so much benefit for a period of relative frugality it's so worth the effort from all of us!

71 ↓ Reply Share Report Save Follow

Ref. 147 -

https://www.reddit.com/r/JuniorDoctorsUK/comments/tjngxx/comment/i1p4bab/?utm_source=reddit&utm_medium=web2x&context=3



RedRunswick OP · 10 mo. ago · edited 5 days ago

Verified BMA ✓ IO

I'm going to reply separately to these, sorry.

How much will pay restoration cost?

Actual answer: I don't know exactly, but we can estimate.

In January 2021, independent analysis by London Economics estimated £3.4bn to raise Agenda for Change pay by 10%, with the treasury getting back 81% of that (due to increased tax revenues and spending in the economy). The same paper found a 12.5% pay rise for all Agenda for Change staff working in NHS trusts and support organisations in England would cost the Exchequer approximately £4.25 billion extra per year, net cost £0.66bn. This "represents approximately 0.075% of total government expenditure in 2019-20 – equivalent to 7½ pence per £100 of government expenditure." <https://londoneconomics.co.uk/blog/publication/the-net-exchequer-impact-of-increasing-pay-for-agenda-for-change-staff/>

So full pay restoration would be in the order of 10s of Billions per year. These choices are affordable to governments if chosen, partially because they improve staff retention etc, but partially because it comes back to them.

Importantly: it is our view that currently the NHS is being subsidised by under-paying its workers at every level and that cannot continue. The cost of providing healthcare includes the pay of staff (the largest single cost) and the value of the labour is just "the cost of doing business". Our job is to advocate for doctors and medical students, and argue for the political changes needed for that to happen.

Edit: deleted repeat sentence



15



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Ref. 148 - <https://www.youtube.com/watch?v=ivIGAVDdEHs>

- 0:53 seconds

Ref. 157 -

<https://twitter.com/RobLaurensonD4P/status/1601941103950839812>



Robert Laurenson #BMADoctorsVoteYes
@RobLaurensonD4P

...

If our demands are steep then it goes to show that the cuts to our wages have been too.

This is [#PayRestoration](#).

It is the fair and right thing to do. Our jobs are more challenging than 15 years ago. More patients, sicker patients.

[@wesstreeing](#) [@SteveBarclay](#)

 Junior Doctors @BMA_JuniorDocs · Dec 11, 2022

Deputy chair of BMA council @ERunswickBMA responded to questions on the #PayRestoration ballot on @SkyNews today - watch the clip here and make sure you're #BMABallotready before 9 January 2023 bma.org.uk/pay-and-contra...



2:04 PM · Dec 11, 2022

Ref. 158 -

<https://twitter.com/ERunswickBMA/status/1523391396732076032>



Emma Runswick 
@ERunswickBMA



Would your friends have wanted you to get a 22.4% pay cut? That's what's happened to junior doctors. We're likely to get an 8% cut THIS YEAR alone, equivalent to working a whole month for free.

If that's what your friends want, you might want new friends.

[#PayRestoration](#) [twitter.com/MStott88/statu...](https://twitter.com/MStott88/status/1523391396732076032)

This Tweet was deleted by the Tweet author. [Learn more](#)

8:56 PM · May 8, 2022

Ref. 164 -

<https://twitter.com/ERunswickBMA/status/1523929253150081025>



Emma Runswick 
@ERunswickBMA

...

Replying to [@tweediatrics](#)

We want [#PayRestoration](#) ASAP, but a plan to restore in 3 pay rounds would do. These are the motion parts from [#JDCConf22](#)

- i. Recognise and apologise for its failure to protect junior doctors' pay over this period
- ii. Publish for the membership the actions that have taken place in the 12 months since the initial motion for a significant pay uplift was passed at this conference in May 2021 and approved by JDC in June 2021.
- iii. Create an easy to use resource for Junior Doctors to understand their pay and any expenses that they are entitled to as a trainee.
- iv. Allocate financial and staff resources for campaign materials, a pay-loss calculator, and member-informed and developed social media output to raise awareness of the real-terms pay cut amongst junior doctors
- v. Demand and campaign for a commitment from government by the end of 2022 at the latest to full restoration of junior doctors' pay to 2008 RPI-adjusted equivalence, either immediately or by incremental increases over a maximum period of three further annual pay review rounds, and to a mechanism by which future pay awards are linked to and do not fall behind inflation
- vi. Provide organising training for reps and activists, comparable to the McAlevey-based Royal College of Nursing programme
- vii. Immediately commence a campaign to prepare, educate and organise rank and file junior doctors with a view to balloting by Q1 2023 at the latest for industrial action including withdrawal of labour, on the demand for immediate and full restoration of pay to 2008 RPI-adjusted equivalence, in the event that a commitment to pay restoration within three pay rounds from government has not been formalised by the end of 2022

8:33 AM · May 10, 2022

Annex 2

<https://docs.google.com/document/d/1BJ2E5jZOaqLkgOOKX4xrvVFRRZ6RtWB3LE1y7h8ZFMI/edit>

How to get involved in Doctors Vote Campaigning

We need as many doctors and medical students to get involved as possible! This is a loose collection of ideas, but please feel free to take initiative and try out new ideas - make suggestions etc. The campaign is decentralised and autonomous - you don't need to wait for people to tell you what to do!

The order of this document is to put the tasks at the beginning, and explanation and overall strategy at the end.

Tasks 1

Overall strategy 1

Tasks

Please put your name next to it when it is in progress, delete it when it is completed

Medical students:

- Write a short guide (e.g. script) for doing lecture shout-outs (plan to do 2 or 3 for each year group) -> Script for lecture shout-outs
- Do lecture shout outs
- Recruit people at other medical schools and years to do lecture shout-outs
- Keep track of this here:
- Consider make 'medical students for doctors vote' specific graphics

Graphics:

- Create posters to print which explain the voting process, and encourage people to join the BMA
- Create posters to print which have the order of candidates
- Create social media graphics for the above

Writing:

- Write posts for reddit explaining the voting process
- A few people to write opinion pieces/blogs about why they are standing or why they support the campaign
- Write copy for the posters and social media graphics

Local workplaces:

- Print up posters and put in messes and offices
- Message colleagues individually
- Talk to people one-to-one about the campaign
- Ask people to become local campaigners
- Ask colleagues in hospitals where you don't work to become DV campaigners

Campaign coordination:

- Join discord for the campaign
- Add to this document
- Coordinate local groups and specific taskgroups
- Organise a protest in london

Overall strategy

Doctors Vote BMA Council elections campaigning strategy

Aim:

To get as many pro-full pay restoration (FPR) candidates elected onto the national council as possible

Objectives:

1. Maximise the number of candidates

- a. So far we have 34 candidates on the list.
- b. I have asked broad left candidates to confirm they are happy to be individually included in the DV campaign
- c. Once the overall candidate list is announced we will need to go through the manifestos and see if there are any other candidates who have mentioned FPR, and then we should invite them to be on our slate
- d. We will need to put the candidates in an order. This could be done through a self-selection process where people state how much time they have to commit to the role on a scale of 1 to 5?

2. Maximise the number of votes

- a. *Entryism:* We should encourage people to join the BMA for the purpose of voting in this election. This is particularly worth asking first year medical students to do as they have free/low cost BMA membership

- b. **Anti-apathication:** BMA elections have painfully low turn-out, so most of our work will be on persuading people that it is worth voting at all
- c. **Persuading current voters:** This shouldn't be a big focus - we probably aren't going to be able to persuade people who think that the BMA is great to vote for us.
- d. **Making voting easy:** The voting process is complicated - a paper ballot will be sent to peoples' addresses, and then they'll have to rank as many candidates as they can be bothered to, and then walk to a postbox and post it. Can we demystify it a bit?

3. **Build widespread support for full pay restoration while we are campaigning**

How:

1. **Every vote counts**
 2. **Emphasise that if people want to win full pay restoration they must vote and get as many of their colleagues to vote as possible**
 3. **Ask people to confirm when they have sent off their vote, and to tell you their plan for when they are going to send the ballot**
-
2. **Decentralise the campaign**
 - a. **Make this strategy public - let people input into it, and adapt it as new ideas come to light**
 - b. **Encourage medics to develop their own ideas/posters/campaigning strategies and go and try them out**
 - c. **Maintain the discord as a place for coordination and communication**
-
3. **Online publicity**
 - a. **Regular clearly written and persuasive posts on reddit**
 - b. **Utilise DV mail list**
 - c. **Do med students still have facebook groups? What are their equivalents?**
 - d. **Create social media images to share on all social media platforms**
 - e. **Send out press releases to relevant media: BMA, Health Services Journal, national newspapers**
 - f. **Search out tweets/social media posts where people complain about peoples' pay and reply to them/PM them about the campaign**
-
4. **In-person publicity**
 - a. **Encourage face-to-face conversations/individually messages to friends/colleagues**

b. Create posters and leaflets than can be put up at work - get people to photograph the posters in their workplace to create a buzz around the campaign

c. Medical students to give lecture shout-outs (Do they still have lectures or is it all on zoom?)

5. Recruiting new campaigners

a. Once people have agreed to vote, ask them to help campaign

b. Feel free to add supporters to the listserver

c. Anyone can create graphics which can be stored in a common drive

d. We particularly need campaigners at hospitals where we don't have reps

6. The message

a. Doctors have faced a huge pay cut since 2008 and the BMA has absolutely failed to fight back

b. A bunch of junior doctors and medical students are standing to be on the BMA national council and they are determined to win full pay restoration

c. These elections only happen once every 4 years - this is the chance to get BMA council accountable, transparent and support a proactive and radical industrial strategy to win full pay restoration

d. We need you to vote and then we need you to campaign

e. Winning the election is the start, we will then need you to come out on strike