

National Health Service body in Dorset, England calls on workers to resign to balance books

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The NHS Dorset Integrated Care Board (ICB), currently facing a financial deficit, is undertaking a programme to cut jobs among National Health Service (NHS) employees, regardless of the impact this may have on patient care and treatment.

NHS workers across all organisations in Dorset have received emails about a “Mutually Agreed Resignation Scheme” (MARS). All employees with more than one year of service have been invited to apply. These job losses will impact several trusts—University Hospital Dorset (UHD), the Dorset Health Care University NHS Trust, and Dorset County Hospital NHS Trust—between them running three major hospitals and several small community hospitals.

NHS workers in Dorset were only told about the job loss plan in December, with an email claiming, “This is a resignation scheme, not a voluntary or compulsory redundancy scheme.” The fact is anyone applying to the scheme faces the outcome of losing their job.

The MARS application process opened on January 6 and will close on January 24. NHS organisations have stated that the purpose of the scheme is to “support a reduction in our non-patient-facing workforce” and to help “achieve our financial plan.” None of the NHS trade unions, Unison, Unite, GMB, the BMA, and the Royal College of Nursing, have uttered a word in opposition.

Just in the University Hospitals Dorset NHS Trust alone, around 9,000 staff received the email calling for them to consider resigning and taking redundancy.

Many workers with years of experience will be dismissed, receiving a relative pittance as severance payments, which are capped at a maximum of £80,000. A worker with more than 24 years of continuous

service will receive just 12 months’ basic salary, while those with 10 years and six years of uninterrupted service will receive five months and three months’ basic salary, respectively.

It appears that the Dorset NHS organisations are currently targeting ward clerks, clerical staff, IT and logistics staff, housekeeping staff, secretaries, personal assistants, education and training officials, and HR workers. The email sent out to staff states that the scheme “will be open to all employees who have 12 months continuous service with UHD [University Hospitals Dorset]. However, applications are unlikely to be supported for colleagues in a patient facing role”.

However, regardless of which staff are laid off, the already stretched and overwhelmed clinical and patient-facing teams will inevitably bear the costs of these cuts.

Smooth and risk-free delivery of patient care and treatment relies heavily on the support provided by non-patient-facing staff, including those in IT, logistics, clerical roles, and health and safety, who operate behind the scenes. Consultants and clinicians are burdened with an excessive amount of non-clinical paperwork due to a shortage of support staff, exacerbating the strain on frontline services.

There is already a significant recruitment and retention crisis in the NHS, driven by unbearable workloads and the erosion of pay, terms, and conditions. In England alone, there are 100,000 vacancies, including 32,000 unfilled posts for nurses.

NHS organisations in Dorset are grappling with these shortages. For example, University Hospitals Dorset (UHD) is heavily reliant on agency and locum staff to fill gaps for nurses and doctors. At the Royal Bournemouth Hospital, only five out of the nine

required phlebotomists and three out of the eight needed histopathology consultants are in place.

The plan to slash staff also comes at a time when its hospitals are under enormous pressure due to the burden of COVID-19, norovirus, flu, and RSV cases. Bed occupancy in Dorset hospitals has reached dangerously high levels.

Many patients are languishing in hospital for weeks, if not months, despite being clinically ready for discharge, due to a lack of social care.

According to NHS Dorset ICB's latest annual report and accounts, its submitted plans for the 2024/25 financial year indicate a deficit of £21.3 million. ICBs were established in 2022 under the Health and Social Care Act—introduced by the Conservative government of Boris Johnson—to accelerate the privatisation process within the NHS. They often allocate substantial amounts of money to purchase care from “any qualified provider,” often in the private sector, undermining NHS-operated services.

Cash-strapped NHS trusts and ICBs across the country have been running MARS programmes to cut staff and save money since early 2024. The full impact of these harmful policies remains to be seen but will play out in the next months and years.

The financial deficits faced by NHS organisations nationally are a direct result of years of underfunding by successive governments. The Labour government's allocation of £22 billion in additional funding for the NHS this year, for already overstretched services, falls significantly short of what is needed and a large portion of this money will be raked in by private sector groups.

According to NHS England's Financial Performance Update in December 2024, the organisation's combined overspend for the first seven months of the 2024/25 financial year stands at £725 million. The update notes that “to support the overall financial position, NHS England is making further cuts to offset system overspends, and we are continuing to bear down on system spending.”

The Financial Performance Update also notes that “tighter cash-borrowing controls have been introduced since the start of the year to help ensure that spending remains in line with the plan.”

To meet the financial targets set by NHS England, all NHS systems are required to deliver cost improvement plans totalling £9.3 billion—equivalent to 6.9 percent of

their total allocation.

NHS Dorset's attacks on jobs are part of this broader, ongoing dismantling of care and treatment services in the county. The planned job losses will have a severe impact on the local population of around 800,000 which relies on the services the Trusts provide, and which have already been affected by cuts.

The predecessor to the Dorset ICB—the Dorset Clinical Commissioning Group—unveiled a Clinical Services Review (CSR) in 2017 aimed at slashing services to address a financial deficit projected to reach £158 million by 2021.

The CSR, implemented after a flawed consultation process and in the face of massive public opposition, led to the closure of three community hospitals. It also resulted in Poole Hospital losing its maternity, stroke, and emergency units, and the controversial merger of Poole Hospital with the Royal Bournemouth and Christchurch Hospitals to form the UHD.

For further information contact NHS FightBack, established by the Socialist Equality Party and affiliated to the International Workers Alliance of Rank-and-File Committees.



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