

RESOLUTIONS - 2022 ANNUAL REPRESENTATIVE MEETING

ARM agenda No.	Resolutions
M 7	<p>UK Motion by THE AGENDA COMMITTEE (TO BE PROPOSED BY LAMBETH, SOUTHWARK & LEWISHAM DIVISION): That this meeting believes that Covid-19 has not gone away and calls on the BMA to lobby for:-</p> <ul style="list-style-type: none"> i) free high quality appropriate PPE for NHS workers, including in primary care; ii) free lateral flow testing for NHS and social care staff; iii) free PCR testing for people with symptoms; iv) full funding for ongoing comprehensive Office for National Statistics household surveillance; v) support for self-isolation including raising statutory sick pay. vi) regular Covid-19 vaccine boosters available for all health and social care staff particularly those who are in direct patient contact situations. <p>CARRIED</p>
M 8	<p>UK Motion by WORCESTERSHIRE AND HEREFORDSHIRE DIVISION: That this meeting calls on the UK Secretary of State for Health and those of the devolved nations to act via regulation and funding to ensure the safety of staff and patients from continuing Covid risk and future local outbreaks. Specifically, we call for:-</p> <ul style="list-style-type: none"> i) regulation and funding for mandatory rapid and reliable Covid 19 testing for all Emergency Department patients likely to be admitted; ii) institution and funding of additional staffed bed capacity to isolate Covid positive patients, reducing and preventing iatrogenic Covid-19 outbreaks; iii) continued funding of asymptomatic staff testing and rapid symptomatic testing in both Primary and Secondary care to enable maintenance of services to patients, Covid recovery and alleviation of NHS waiting lists. v) all consultants in Public Health to be employed on contracts equivalent to those of NHS Consultants, with adequate guarantees of freedom to make professional advice public. <p>CARRIED</p>
M 9	<p>UK - 9 Motion by THE AGENDA COMMITTEE (TO BE PROPOSED BY NORTH WEST REGIONAL COUNCIL): That this meeting:-</p>

	<p>i) demands that the Covid inquiry by Baroness Hallett takes evidence from a wide range of stakeholders, that all the evidence is made public, and that the final report is truly independent without any interference from government;</p> <p>ii) expects that the Covid inquiry by Baroness Hallett, will address the issues of deaths of BAME healthcare workers as well as BAME individuals in the general population and asks the BMA to highlight these matters in its own submission.</p> <p>CARRIED</p>
M 10	<p>UK - 10 Motion by MEDICAL STUDENTS CONFERENCE: That this meeting recognises that there exists a mistrust of the medical establishment among certain religious and racial minorities, demonstrated by high rates of vaccine hesitancy among Black, Black British and Muslim-identifying adults. In light of the increased burden of Covid-19 among the aforementioned communities, we call upon the BMA to:-</p> <p>i) acknowledge that the basis for this mistrust cannot solely be attributed to misinformation or lack of education;</p> <p>ii) take accountability for the contribution the UK medical establishment has played in creating this mistrust, by acknowledging the history of unethical healthcare research in Black populations, the under-representation of minorities in clinical trials, and experience of discrimination in the NHS;</p> <p>iii) implore NHS trusts and health boards to focus specifically on building trust with these communities, through engaging with culturally relevant public health outreach, forging partnerships with local religious and community leaders, and working with policymakers and researchers to support development of community trust-building practices.</p> <p>CARRIED I) & III), FALLEN II)</p>
M 11	<p>UK - 11 Motion by WEST MIDLANDS REGIONAL COUNCIL: That this meeting is concerned by reports of NHS managers telling some staff to adopt a work name that is more easily pronounceable, asserts that any such request is totally unacceptable, and mandates the BMA to object robustly if such practices are ever repeated.</p> <p>CARRIED</p>
M 12	<p>UK - 12 Motion by ISLINGTON DIVISION: That this meeting notes that the NHS faces the biggest backlog of cases since records began but at the same time has no workforce plan to deal with them. We demand that the governments:-</p> <p>i) urgently puts in place a workforce plan to help stabilise the NHS and deal with the accumulated backlog;</p> <p>ii) drops unrealistic targets that put impossible pressures on existing NHS staff;</p> <p>iii) take the money that is destined to pay the private sector to do NHS work and invests it in expanding the capacity of the NHS;</p> <p>iv) invest money in recruiting and training NHS staff;</p> <p>v) invest money to help retain the NHS staff we already have.</p>

	CARRIED
M 13	<p>UK - 13 Motion by SOUTH CENTRAL REGIONAL COUNCIL: That this meeting is extremely concerned by the unacceptably high levels of doctor burnout in GMC and BMA surveys and demands that UK Governments must require all NHS employers to:-</p> <ul style="list-style-type: none"> i) conduct exit interviews using an evidence-based tool that has been specifically designed to identify stressors in junior doctors and can help pinpoint drivers for resignations (e.g. the DEStress instrument); ii) take immediate action to alleviate the stressors that are driving junior doctor burnout and resignations; iii) publish the anonymised results of exit interviews via an open access national database, to allow the analysis of the drivers for burnout and resignation, and to enable job applicants to compare employment conditions at different NHS employers; iv) create and subscribe to new national NHS platforms that share employees' views on their employing organisations' management and culture (similar to the Glassdoor's "Best Places to Work" UK webpage), to further incentivise employers to respond to concerns." <p>CARRIED</p>
M14	<p>ENG - 14 Motion by NORTH EAST REGIONAL COUNCIL: That this meeting is seriously concerned that in the 'Delivery plan for tackling the COVID-19 backlog of elective care' there is no plan to increase NHS workforce members and demands:-</p> <ul style="list-style-type: none"> i) the government now urgently recognises this serious omission and stops neglecting calls for independent workforce assessments as also advocated by the Health and Social Care Select Committee; ii) council enters into discussion with the Secretary of State for Health and Social Care and ensures the government urgently now recognises and enacts urgently on this parlous workforce situation. <p>CARRIED</p>
M15	<p>UK - 15 Motion by SASC CONFERENCE AGENDA COMMITTEE: That this meeting demands that the BMA ensures that the remedial measures following the McCloud judgement should be expedited and that all senior doctors be able to assess their tax liability with the recalculated annual benefit statements for the remedy period (2015-2022).</p> <p>CARRIED</p>
M16	<p>UK - 16 Motion by EAST OF ENGLAND REGIONAL COUNCIL: That this meeting notes the significant number of senior doctors who are coming off the pension scheme and still working for the NHS to deliver high quality care to the UK population due to punitive pension taxation and insists all NHS employers offer pension recycling.</p>

	CARRIED
M17	<p>UK - 17 Motion by MANCHESTER & SALFORD DIVISION: That this meeting notes with horror that all doctors' pay has fallen against RPI since 2008 to the tune of up to 30%. This represents a career earnings loss amounting to millions of pounds for each of us. We mandate the BMA to achieve pay restoration to 2007 value for its members within the next 5 years and to evidence its progress against this aim at every ARM until restoration is achieved.</p> <p>CARRIED</p>
M18	<p>UK - 18 Motion by SOUTH EAST COAST REGIONAL COUNCIL: That this meeting deplores the poor working conditions faced by many Resident Medical Officers and similar postholders, welcomes initial work by the member relations team to address this and calls on the BMA to deepen its work to improve the treatment of these doctors by:-</p> <ul style="list-style-type: none"> i) launching a co-ordinated campaign which aims to improve their terms and conditions and recruit them into membership; ii) opening dialogue with the main employing organisations and their main customers to press for improvements; iii) encouraging employers to use only agencies that provide fair terms and safe conditions; iv) persuading employers to convert these roles to more suitable national or locally standardised contracts where required for longer term use; v) continuing to call for proper regulation of the ethical international recruitment of doctors by these agencies. <p>CARRIED</p>
M19	<p>EN - 19 Motion by SOUTH EAST COAST REGIONAL COUNCIL: That this meeting welcomes proposals in the People Plan, noted in NHS Employers' advice that employers and unions should work together to develop options for flexible working, but is concerned that flexible working is still not sufficiently supported at local level to make this a viable option for many doctors and calls for:-</p> <ul style="list-style-type: none"> i) urgent work to be undertaken with NHS Employers and Health Education England to produce guidance on shift patterns, multi-site working and contracts for medical staff with additional caring responsibilities, supported by a national campaign; ii) LNCs to work with Guardians of Safe Working Hours and Trusts to identify medical staff who have additional caring responsibilities and proactively support this cohort with reasonable adjustments to include job offers with reasonable working patterns and working locations, to be agreed in advance with individuals. <p>CARRIED</p>
M20	<p>UK - 20 Motion by NORTH WEST REGIONAL COUNCIL: That this meeting notes the significant challenges faced by the parents of premature babies and calls for the BMA to actively lobby for:</p>

	<p>i) urgent implementation to the proposed changes to statutory parental pay for the parents of premature babies announced in March 2020;</p> <p>ii) access to paid statutory parental leave for the full duration of the inpatient neonatal admission for both parents;</p> <p>iii) change to legislation so that non-compulsory maternity leave does not have to start until the point of the baby's discharge from the neonatal admission;</p> <p>iv) occupational parental leave for prematurity for NHS staff to be paid at the level of full pay for the duration of the inpatient neonatal admission;</p> <p>v) paternity leave not to be consumed in the provision of any parental leave for prematurity for the inpatient stay, to allow the other parent to take this on or after discharge.</p> <p>CARRIED I), II) & IV),</p> <p>CARRIED AS A REFERENCE III) & V)</p>
M21	<p>UK - 21 Motion by NORTH EAST REGIONAL COUNCIL: That this meeting acknowledges the Levelling Up agenda but is seriously concerned there has been no reduction over the last five years in the number of years people in the UK live in poor health and believes:-</p> <p>i) it is vital the UK governments make a fundamental change in direction to achieve the pledge of increasing healthy life expectancy;</p> <p>ii) the UK governments must now urgently create social and economic conditions to enable healthier lives through assured jobs, satisfactory, acceptable housing, first class education and adequate incomes;</p> <p>iii) health considerations must now be factored into all UK governments department policies.</p> <p>CARRIED</p>
M22	<p>UK - 22 Motion by NORTH EAST REGIONAL COUNCIL: That this meeting recognises the damage inflicted on healthcare workers by abusive patients and relatives, and malicious complaints, and calls for:-</p> <p>i) greater awareness of the prevalence of abuse towards healthcare staff;</p> <p>ii) greater support should be offered to clinicians who are victim of abuse and malicious complaints;</p> <p>iii) routine provision of self-defence training should be available for all clinical staff;</p> <p>iv) stiffer sentences for those who attack healthcare workers;</p> <p>v) support for healthcare workers who are victim of slanderous / malicious complaints.</p> <p>CARRIED I), II), VI) & V)</p> <p>FALLEN III)</p>
M23	<p>UK - 23 Motion by EAST MIDLANDS REGIONAL COUNCIL: That this meeting is extremely concerned at the current psychological health and wellbeing of doctors, many of whom</p>

	<p>have sustained moral injury, and mandates the BMA to negotiate for a “right to be disconnected” giving doctors proper downtime to recover and recuperate.</p> <p>CARRIED</p>
M24	<p>UK - 24 Motion by TOWER HAMLETS DIVISION: That this meeting:-</p> <ul style="list-style-type: none"> i) believes that all health and social care workers should be vaccinated against common serious and communicable diseases unless medically contraindicated; ii) calls on the BMA to lobby for a targeted approach addressing vaccine hesitancy in different groups of health and social care workers; iii) believes that all principles of informed consent apply to the offer of vaccination to health and social care workers; iv) opposes the legally mandated vaccination of healthcare workers; v) does not believe vaccination should be a blanket condition of employment for health and social care workers; vi) calls on employers to work with unvaccinated staff to minimise risk to patients and other staff whilst maintaining as far as possible individuals' terms and conditions of employment. <p>CARRIED</p>
M25	<p>EN - 25 Motion by LONDON REGIONAL COUNCIL: That this meeting reiterates our opposition to the Health & Care Act as the wrong legislation at the wrong time. In particular, we call on BMA Council to continue to lobby for:-</p> <ul style="list-style-type: none"> i) the instigation of a duty on the Secretary of State for Health to have transparent regular independent workforce planning; ii) removal of the Secretary of State's new executive powers vis a vis service reconfigurations and tendering and awarding of contracts; iii) the extension of transparency rules to ensure corporate providers cannot unduly influence key priorities & commissioning decisions; iv) the re-instatement of a universal, comprehensive, publicly funded, publicly provided NHS. <p>CARRIED</p>
M26	<p>EN/WA - 26 Motion by LONDON REGIONAL COUNCIL: That this meeting believes that there is a dwindling availability of pathologists to carry out post-mortem examinations at the request of Her Majesty's Coroners in England and Wales. The vast majority of these autopsies are carried out by histopathologists (coroners' pathologists). Most of the work for coroners is not usually conducted under their formal contracts or job plans, but independently. In order to avoid a complete collapse of the service and given that the fee for autopsy work, paid by the relevant authority, has not increased in line with inflation over decades this meeting:-</p> <ul style="list-style-type: none"> i) demands that the UK Government names the government department to take responsibility for this part of the service;

	<p>ii) calls for the BMA to negotiate a substantial rise in the fees associated with coroners post-mortems in England and Wales;</p> <p>iii) calls on the government to adequately fund this through the relevant authorities in England and Wales.</p> <p>CARRIED</p>
Article – M27	<p>Articles - 27 Motion by THE ORGANISATION COMMITTEE CHAIR ON BEHALF OF COUNCIL: That the Representative Body approve the recommended changes to articles 14 (3) (a) & (b) of the association as set out in appendix II of document ARM 1A/AGM3 and recommends the changes to the article to the Annual General Meeting for approval.</p> <p>CARRIED</p>
M28	<p>28 Motion by THE ORGANISATION COMMITTEE CHAIR ON BEHALF OF COUNCIL: That the Representative Body approve the recommended changes to article 72 of the association as set out in appendix II of document ARM 1A/AGM3 and recommends the changes to the article to the Annual General Meeting for approval.</p> <p>CARRIED</p>
M29	<p>29 Motion by THE ORGANISATION COMMITTEE CHAIR ON BEHALF OF COUNCIL: That the Representative Body approve the recommended changes to article 79 (1) of the association as set out in appendix II of document ARM 1A/AGM3 and recommends the changes to the article to the Annual General Meeting for approval</p> <p>FALLEN</p>
M30	<p>30 Motion by THE ORGANISATION COMMITTEE CHAIR ON BEHALF OF COUNCIL: That the Representative Body approve the recommended changes to article 85 (1) of the association as set out in appendix II of document ARM 1A/AGM3 and recommends the changes to the article to the Annual General Meeting for approval.</p> <p>CARRIED</p>
M31	<p>31 Motion by THE ORGANISATION COMMITTEE CHAIR ON BEHALF OF COUNCIL: That the Representative Body approve the recommended changes to article 85 (2) of the association as set out in appendix II of document ARM 1A/AGM3 and recommends the changes to the article to the Annual General Meeting for approval.</p> <p>CARRIED</p>
Bye-laws – M32	<p>32 Motion by THE ORGANISATION COMMITTEE CHAIR ON BEHALF OF COUNCIL:</p> <p>That the bye-laws of the association be amended as follows:-</p>

	<p>i) changes to bye-laws part 5 committees and other bodies of the association in the manner shown in appendix III of document ARM1A;</p> <p>ii) changes to the bye-law schedules in the manner shown in appendix III of document ARM1A.</p> <p>(NB: This motion is the usual ARM bye-law proposals regarding the 'standard' or 'routine' changes to the bye-laws (such as changes of names of committees and councils, membership thereof, terms of reference etc.) that have been proposed by those committees or officers; and have been scrutinised and ultimately approved as part of the routine business of the organisation committee and subsequently approved by council).</p> <p>CARRIED</p>