Joint statement on the BMA ballot for junior doctor strike action in England

The BMA ballot for junior doctor strike action in England opened on Monday 9 January. As organisations representing surgeons at all stages of their careers, we are aware that many of our members are eligible to vote.

Our members represent a critical part of the NHS and we understand why, in the current climate, they may choose to strike. Alongside other NHS staff, they have worked on the frontline of the NHS throughout the pandemic, and still work in challenging conditions. Workforce and recruitment problems, combined with the unprecedented pressures of rising clinical demand, are leaving many doctors in training demoralised, burnt out and struggling to work in an overstretched and underfunded service. Their access to training opportunities is also compromised in many hospitals. We are deeply concerned that these challenges, coupled with increased personal financial pressures, have naturally left them feeling undervalued.

We want to make it clear to our members that we continue to make their views heard. We have pushed hard for the Government to publish its workforce plan for the NHS, and tackle vacancies affecting surgical teams, as soon as possible. We are pleased that there has now been a commitment from the Chancellor to do so. We have also recommended that trusts offer a better work-life balance through measures to accommodate flexible working policies, including less than full-time working. We have made clear that the increased use of the independent sector to deal with the backlog of patients waiting for surgery must not reduce surgical training.

We know that our members will not take any decisions over strike action lightly and that the best interests of the patients they care for will be a central consideration. Whatever decision is made, we will continue to support our members, for their well-being, the sustainability of services and ultimately, for the benefit of patients.

The Government and the BMA's UK Junior Doctors Committee must come to a swift agreement, which recognises the great value that trainees bring to the NHS, minimises the impact on services and reassures patients that they will continue to receive the high level of care they rightly expect.

Royal College of Surgeons of England
Royal College of Surgeons of Edinburgh
Royal College of Physicians and Surgeons of Glasgow
Federation of Specialty Surgical Associations
Association of Surgeons of Great Britain and Ireland (ASGBI)
British Association of Oral & Maxillofacial Surgeons (BAOMS)
British Association of Otorhinolaryngology – Head & Neck Surgery (ENTUK)
British Association of Paediatric Surgeons (BAPS)
British Association of Plastic Reconstructive & Aesthetic Surgeons (BAPRAS)
British Association of Urological Surgeons (BAUS)
British Orthopaedic Association (BOA)

Society for Cardiothoracic Surgery in Great Britain and Ireland (SCTS)

Society of British Neurological Surgeons (SBNS)

The Vascular Society of Great Britain and Ireland (Vascular Society)

Association of Surgeons in Training (ASiT)

ASGBI Moynihan Academy (ASGBI MA)

Association of Otolaryngologists in Training (AOT)

BAUS Section of Trainees (BSoT)

British Orthopaedic Trainees Association (BOTA)

British Neurosurgical Trainees' Association (BNTA)

Duke's Club

Herrick Society

Mammary Fold

Oral and Maxillofacial Surgery Fellows in Training (OMFS FiT)

Plastic Surgery Trainees Association (PLASTA)

Rouleaux Club

Roux Group

Society for Cardiothoracic Surgery in Great Britain and Ireland Trainees

Trainees in Paediatric Surgery (TriPS)