

# **Response to the Migration Advisory Committee's (MAC's) Call for Evidence on European Economic Area (EEA) and non-EEA migration**

## **Introduction**

### **1.1 The Royal College of Nursing (RCN)**

July 2016 and July 2017 there has been a 180% fall in the number of new EEA nurses coming to the UK.<sup>ii</sup>

- 3.3 This decline is putting existing nursing workforce under even more pressure than it was previously, as evidenced by over 40,000 nursing vacancies in England (more than double what it was three years ago)<sup>iii</sup> and a rising vacancy rate in Scotland.<sup>iv</sup> Insufficient staffing levels for safe and effective care are compounded by the absence of credible workforce strategy in every country of the UK and piecemeal efforts by policymakers to improve retention of current staff through obvious levers such as pay.
- 3.4 To help the UK move towards a stronger focus on developing its domestic nursing workforce, we believe that a transition period immediately after Brexit of up to four years is needed. During this time the UK health and care sectors should be able to continue to recruit internationally educated nurses as they currently are, to maintain service levels while simultaneously shifting its focus and investment to this area.
- 3.5 Achieving this transition will require the Government, employers and all parts of the sector to act on the observed offered by the MAC in 2016 which added nursing to the Shortage Occupations List (SOL).<sup>v</sup> The MAC was clear that the present nursing shortage is mostly down to factors that could, and should, have been anticipated by policymakers.
- 3.6 Reporting in 2016 the MAC said that: *“The restraint on nurses’ pay instituted by the government was presented to us, and in the evidence to the pay review bodies, as an immutable fact. It is not. It is a choice.”*
- 3.7 We agree that addressing pay has, to date, been ignored by the Government as a viable lever to improve recruitment and retention. The Government therefore needs to make a conscious political decision to change its position, lift the public sector pay cap and give the nursing community an-above inflation pay rise to begin to close the gap. This should be funded further to the existing financial envelope.
- 3.8 On the use of overseas nurses, the MAC said: *“There seems to be an automatic presumption that non-EEA skilled migration provides the sector with a ‘Get Out Of Jail, Free’ card and that there is a historic pattern of peaks and troughs to the supply of migrant nurses. This pattern offers, at least highly suggestive indications that migrant nurses have been used to save costs.”*
- 3.9 The UK currently trains 42 nursing graduates for every 100,000 people in the UK which is substantially lower than the average of 47 across the Organisation for Economic Co-operation & Development (OECD).<sup>vi</sup> We agree that while the UK has benefitted enormously from the contribution and commitment of overseas nurses, international recruitment has often been used as a substitute for Government investing adequately

in growing the domestic workforce. This is essential for enabling employers to recruit from within the UK.

- 3.10 The ability of employers to incentivise more UK-trained nationals into the health and care sector is dependent on the funding envelope given by Government. To that end, Government holds primary responsibility for giving employers the resources they need to help change this situation. This is particularly crucial in light of the accountability







5.2 In 2013, EEA nationals comprised 2.4% of the NMC register (16,798 individuals). By 2015 this had risen to 3.9% (27,012 individuals) and the latest data for 2017 now shows this to be 5.5% of the register (38,024 individuals).<sup>xvi</sup> The below graph shows how this change has developed since 1999/2000.

**NMC register broken down by EEA (excluding UK) and non-EEA new joiners  
1999-2017**

5.3 NMC data also







- 5.14 All of this is happening at a time when the existing nursing workforce is already under severe pressure. Analysis has shown that in the last three years vacancy rates have increased across the UK, and doubled in England to over 40,000.<sup>xxvi</sup> Data from other UK countries is not as consistently collected but for the NHS in Scotland the evidence also shows an increasing vacancy rate for nursing and midwifery, rising from 4.2% in June 2016 to 5.2% in June 2017.<sup>xxvii</sup>
- 5.15 In addition, 76% of senior nurse leaders say that they are concerned about ensuring safe staffing levels. 90% said they are concerned about recruiting new staff, whilst 84% were concerned about retaining current staff. Four in five (82%) said that their organisations run on the goodwill of their staff to keep services running.<sup>xxviii</sup> Taking this into account, a continued significant reduction in EEA migration would have severe implications for the sustainability of service provision and for safe patient care.
- 5.16 It has been reported that the Government in England is looking into the possible impacts of falling numbers of EEA nurses. A leaked Department of Health workforce model concluded that in the worst-42,000 individuals by 2020 in light of Brexit<sup>xxix</sup> adding yet more pressure to the already existing 40,000 vacancy gap in England alone. It is not clear what approaches each country of the UK is taking to assess and respond to potential scenarios following departure from the EU.
- 5.17 To help the Government and health and social care sector put in place the systems and investm

5.20 In terms of focusing migration reduction policies to non-EEA immigrants, the RCN has not yet undertaken any new research. However, as part of the Cavendish Coalition we have commissioned independent economic analysis which will set out a range of scenarios for policymakers on what the likely impacts of restricting immigration too early will be, as well as the correlating requirements to adequately grow the domestic workforce response to this Call for Evidence.

**6. Views on future reform of the UK's immigration system for non-EEA workers. This covers the following questions asked by the MAC**

*How well aware are you of current UK migration policies for non-EEA migrants? If new immigration policies restrict the numbers of low-skilled migrants who can come to work in the UK, which forms of migration into low-skilled work should be prioritised? For example, the current shortage occupation list applies to high skilled occupations; do you think this should be expanded to cover lower skill levels?*

**Our answer and evidence:**

6.1 We are aware of current migration policies. The RCN has a dedicated immigration advisory service for nursing staff <sup>xxxiii</sup> function has made previous evidence submissions to the MAC regarding reform of the Tier 2 visa salary thresholds<sup>xxxiv</sup> and the Partial Review of the Shortage Occupations List (nursing), <sup>xxxv</sup> both of which occurred in 2015/16.

6.2 In terms of future immigration reform, we have previously expressed concern about aspects of the Tier 2 visa system, particularly the overemphasis on salary levels for prioritising visas, rather than wider benefits of some highly skilled professionals such as nurses, in terms of the economy, society and health of the whole population<sup>xxxvi</sup>.

6.3 We would not recommend any radical changes to the non-EEA immigration system is clear particularly in relation to free movement of workers.

6.4 In relation to the Shortage Occupation List we argued strongly for the inclusion of adult nursing in 2015. We hope that in the long term nursing will be able to come off the list, on the proviso that that the Government invests more in developing our domestic supply. We agree with the

-term planning and investment in developing the UK nursing workforce. In order to encourage a sustainable transition away from this situation it is necessary to keep existing immigration routes open for



## References and endnotes

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<https://www.nmc.org.uk/globalassets/sitedocuments/.../nmc-register-2013-2017.pdf> (2017)

<https://www.rcn.org.uk/professional-development/publications/pub-006195> (2017)

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<http://www.isdscotland.org/Health-Topics/Workforce/Publications/index.asp#1984> (September 2017)

[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/510630/Partial\\_review\\_of\\_the\\_shortage\\_occupation\\_list\\_-\\_review\\_of\\_nursing.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/510630/Partial_review_of_the_shortage_occupation_list_-_review_of_nursing.pdf) (2016)

vi [http://www.keepeek.com/Digital-Asset-Management/ocd/social-issues-migration-health/health-at-a-glance-2015\\_health\\_glance-2015-en#page94](http://www.keepeek.com/Digital-Asset-Management/ocd/social-issues-migration-health/health-at-a-glance-2015_health_glance-2015-en#page94) (2015)

vii <https://www.gov.uk/what-different-qualification-levels-mean> (2017)

viii <http://researchbriefings.parliament.uk/ResearchBriefing/Summary/CBP-7783> (2017)

ix Ibid.

x Ibid.

xi <https://www.nmc.org.uk/registration/joining-the-register/trained-in-the-eu-or-eea/> (2017)

xii <http://revalidation.nmc.org.uk/> (2017)

xiii Ibid.

xiv Provisional Statistics: Nurses & health visitors and Midwives and Support to doctors, nurses & midwives by Staff Groups, Area and Level - <https://digital.nhs.uk/catalogue/PUB30042> (2017)

xv Evidence on Partial Review of the Shortage Occupations List for Nurses at: <https://www.rcn.org.uk/-/media/royal-college-of-nursing/documents/.../conr-6915.pdf> (2015)

xvi <https://www.nmc.org.uk/globalassets/sitedocuments/.../nmc-register-2013-2017.pdf> (2017)

xvii Ibid.

xviii Ibid.

xix the English NHS Nursing staff group that have an EU nationality partitioned to NHS Trusts and CCGs

t:

<https://digital.nhs.uk/catalogue/PUB30059> (2017)

xx

<https://www.nmc.org.uk/globalassets/sitedocuments/.../nmc-register-2013-2017.pdf> (2017)

xxi National Audit Office (ADD), available at: <https://www.nao.org.uk/wp-content/uploads/2016/02/Managing-the-supply-of-NHS-clinical-staff-in-England.pdf> (2016)

xxii Department of Health, Healthca

<https://www.gov.uk/government/news/healthcare-student-funding-consultation-launched> (2016)

Health Education England, Clinical placement funding  
[events/hee-news/clinical-placement-funding](https://hee.nhs.uk/news-blogs-events/hee-news/clinical-placement-funding) (2016)

[https://hee.nhs.uk/news-blogs-](https://hee.nhs.uk/news-blogs-events/hee-news/clinical-placement-funding)

xxiii

<https://rcni.com/nursing-standard/newsroom/analysis/exclusive-nursing-degree-apprenticeships-stalled-education-changes-and-funding-92256> (2017)

xxiv

<http://www.nhsemployers.org/your-workforce/plan/nursing-workforce/nursing-associate> (2017) 92256

