

## Scottish Government debate: Migration and care workers

### Briefing from RCN Scotland

#### Key messages

- International nursing staff have always played a vital part in sustaining our health and care services. The pandemic has brought to the fore the expertise and value that all nursing staff make; they are all key workers.
- While international recruitment cannot be used as a substitute for appropriate domestic training and supply, given current workforce shortages, it is clear that international recruitment must continue so that patients can receive safe and effective care.
- The UK government's proposals for the immigration system will exclude many health and care workers from entering the UK, primarily social care staff, which will have a devastating impact. The Home Office must urgently review the current proposals, which provide no migratory route for care workers.
- Introduction of the new Health and Care Visa was a prime opportunity for government to acknowledge the value and contribution of all international health and care staff. The exclusion of social care staff is wrong. We expect the visa to be inclusive and apply to all health and care staff, regardless of pay or qualification level.
- We expect the government to ensure that internationally educated registered nurses are supported to work in the UK and therefore the profession must continue to be exempt from the salary threshold and stay on any shortage or priority occupation list.
- The Immigration Health Surcharge (IHS) was an unfair and unjust financial burden on health and care staff. We welcomed the announcement to exempt health and care workers, however, we are concerned that those not eligible for the Tier 2 visa route will still be required to pay the fee upfront in full and to claim retrospective refunds in six-month increments. We expect the exemption to apply to all staff, and for those not eligible for the automatic exemption to be reimbursed in full.

#### *Freedom of movement*

- Freedom of movement and the Mutual Recognition of Professional Qualifications (MRPQ) has enabled the mobility of health and care workers across Europe and played a key part in bolstering the UK's nursing workforce. The end of freedom of movement will exacerbate current workforce shortages with significant implications for the provision of care. We already know that since the Brexit referendum over 12,000 EU nurses left the UK workforce.
- The MRPQ has enabled the free movement of nurses and other health professionals by converging the standards of competency required to practice. It includes language checks and a duty on all EU member states to inform one another about suspended or banned professionals, both of which are important for patient safety. Clarity is required on how the MRPQ will be retained and used following the end of free movement. We expect assurances that the UK will continue to align professional standards with the Directive should it no longer apply.

#### *Future immigration system*

- The government's plans for the UK's future immigration system fall short of what is required to meet the workforce needs of the health and social care sectors, now and in the future. The current proposals will exclude many health and care workers from

entering the UK, primarily social care staff, which will have a devastating impact on the health and social care sector.

- By expanding the Tier 2 visa route to include medium skilled jobs (occupations of RQF3+), the current salary threshold of £30,000 to enter the UK will be lowered to £25,600. Individuals may also be able to enter the UK on a lower salary (no less than £20,480) should their occupation be listed on the Shortage Occupation List (SOL). Whilst we acknowledge that these measures provide a necessary level of flexibility, these changes do not go far enough. The lower salary threshold will still be unrealistic and unattainable for many health and social care assistants, who would likely be ineligible due to the qualification specification.
- The current emergency has highlighted that low wage is in no way synonymous to the skill or value of a professional. For example, a healthcare support worker working with a registered nurse to provide end of life care in a care home, is carrying out a skilled and fundamentally important role which must be better valued. The future immigration system must not use arbitrary salary levels as the primary determinant of a person's ability to work in the UK.
- Introduction of the new Health and Care Visa was a prime opportunity for the UK government to acknowledge the value and contribution of all international health and care staff. The exclusion of social care staff is wrong. We expect the visa to be inclusive and apply to all health and care staff, regardless of pay or qualification level.
- The pandemic has revealed how reliant the NHS is on good social care and vice versa – they cannot be viewed as separate services. The care system has been heavily reliant on international staff, and the proposals continue to ignore the significant risk to this sector, and therefore the entire health and care system across the UK.

#### *Immigration Health Surcharge (IHS)*

- The RCN had been calling for the government to exempt health and care workers from this charge immediately and on a permanent basis for over two years. We welcomed the announcement to exempt health and care workers from the IHS; an unjust additional financial burden placed on staff and their dependents, as they already contribute through their taxes and by virtue of their work.
- Following the RCN's open letter to the Prime Minister calling for the exemption to be fair and inclusive for all staff, the government announced that the exemption will automatically apply to Tier 2 registered nurses as well as their spouses and dependants. However, we are concerned that health and care workers not eligible for the Tier 2 route will be required to pay the fee upfront. This will disproportionately affect lower-paid staff, particularly in the social care sector and plans to reimburse staff in six-month increments simply do not go far enough to compensate for the initial unjust financial burden faced. We expect that all health and care workers and their dependents will be exempt, not just those working in our NHS and that families who have already paid the IHS be appropriately refunded in full.

#### *Shortage occupation list*

- We have submitted evidence to the Migratory Advisory Committee calling for Nursing Support Workers within the RQF3-5 bracket to be included on the shortage occupation list.
- There are significant workforce shortages for nursing support roles across the health and care sector. While shortages are more acute in certain sectors and staff groups, due to the significant limitations and gaps in the available data, we believe there is a strong reason for all nursing and care support roles to be listed on the SOL.
- In NHS Scotland, vacancy rates for healthcare support workers (band 3-4) were reported at 4.6% - the highest level within this staff group in the last 5 years. Data is not available on vacancy rates for healthcare support workers out-with the NHS.