

Scottish Parliament Health and Sport Committee

Inquiry into the impact of leaving the EU on health and social care in Scotland

January 2018

Background

European Union (EU) policies and legislation influence policy that directly impact nurses' working lives, such as employment rights; equal opportunities; health and safety at work; and environmental and consumer protection. The RCN is, therefore, committed to ensuring that the nursing voice continues to be heard on a wide range of national and international nursing issues.

Furthermore, health and social care services in Scotland and across the UK depend on the contribution of nurses from the European Union. In order to make the UK's exit from the EU a success it is essential that the UK and Scottish governments are appropriately addressing the needs of our population through health and social care.

How could the potential risks of Brexit for health and social care in Scotland be mitigated?

The UK's exit will have a profound impact on the existing and future nursing community in a wide range of areas, ranging from workforce strategy and planning, regulation, standards, public health, research, employment and social law and cross-border exchange. The RCN believes that the Scottish Government must uphold high levels of patient safety standards, quality of care, as well as ensuring that the workforce supply chain is not adversely affected by this process of change or resulting outcomes.

Nursing staff, and the wider health and care community, are central to a successful health service within Scotland. This includes EEA nurses currently working in our health and care services who need to be valued and given assurances about their right to remain and settled status. Their needs as well as future recruits should be considered carefully. To mitigate potential risks to health and social care in Scotland, the Government should:

- Develop a coherent workforce strategy and planning for implementation that maintains and grows the domestic health and social care workforce, as well as preserving the rights of European Economic Area (EEA) nationals currently working in the sector. The National Health and Social Care Workforce Plan provides the Scottish Government with

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a key opportunity to address the impact of Brexit across the current workforce and to set appropriate strategy for the future;

- Address public health issues collaboratively where appropriate, including communicable diseases crossing borders;
- Safeguard decent working conditions, health and safety at work and employment rights for those working in the sector and including through the EU withdrawal bill;
- Maintain opportunities for collaboration and shared learning across borders.¹

Further to the above points, it is important to recognise that the nursing workforce in Scotland and across the UK is facing a protracted workforce crisis - both in terms of supply and retention. NHS workforce data published by ISD in December 2017 revealed that the nursing and midwifery vacancy rate stands at 4.5%, with nearly one in twenty posts being vacant. It is also worth noting that the vacancy shortage extends beyond hospitals and NHS staff. The 2016 Care Inspectorate report on staff vacancies in care services highlighted the following staffing pressures:

- Care homes for older people had a particularly high proportion of reported problems filling vacancies;
- Private care homes for older people had the highest proportion of services with nursing vacancies (58% of services).²

One step that will assist with this vacancy crisis is to ensure that pay and conditions are appropriate for staff working in the health and social care sector. The RCN welcomes the Scottish Government's recent commitment to lift the 1 per cent cap on public sector pay. However, it is vital that this is an above inflation pay rise to restore earnings to ensure that this is a just pay reward. The pay increase must also be fully funded, over and above existing health and social care budgets. By doing this, NHS Boards will be able to pay staff fairly without impacting budgets for service provision or being forced to cut staff numbers for reasons of affordability.

How could the potential benefits of Brexit for health and social care in Scotland be realised?

Brexit provides the opportunity for the Scottish Government to work in partnership with the UK and devolved administrations as well as industry leaders, such as the RCN, to develop a holistic, long term workforce plan that addresses staffing shortages, recruitment and

¹ See RCN submission to the Health Select Committee inquiry on priorities for health and social care in the negotiations on the UK's withdrawal from the EU, <https://www.rcn.org.uk/-/media/royal-college-of-nursing/documents/policies-and-briefings/consultation-responses/2016/december/conr-6716.pdf>, for further information

² The Care Inspectorate, *Staff vacancies in care services. 2016*

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retention and low morale. This new workforce plan should also promote positions in health and social care as an attractive and rewarding career.

While international nurses play an important role in the health and social care sectors, they can be no substitute for long-term, strategic workforce planning, especially when there is a rising nursing vacancy rate in Scotland. Without this, the workforce remains vulnerable due to tighter immigration restrictions, the impact of Brexit and the impact of the global shortage of nurses will make it more difficult to recruit from abroad.³

The Scottish Government should use this opportunity to work together with key partners to grow the current nursing workforce to ensure there is safe and effective care for both patient safety and public protection. RCN Scotland believes there is an opportunity to deliver such legislation on staffing for safe and effective care in Scotland over the coming year, following on from the Scottish Government's commitment in the current Programme for Government. The RCN is working with Government and partners on the scope and detail of the proposed legislation to ensure it provides a robust platform for the quality of nursing care. We would be happy to discuss further with the committee our specific calls for the Bill, linked to our key response to the proposals⁴.

To help the UK move towards a stronger focus on developing its domestic nursing workforce, we also 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.⁵

In what ways could future trade agreements impact on health and social care in Scotland?

Negotiations on future trade deals need to be open and transparent – including potential future trade relations with the European Union. We believe any future trade in products and services with the EU and wider trading partners must consider not only the potential economic benefits to the UK of these arrangements, but also the wider impacts on the health and wellbeing of the UK population.

³ RCN Employment Survey 2017, <http://www.employment-studies.co.uk/resource/royal-college-nursing-employment-survey-2017>

⁴ For more information see: <https://www.rcn.org.uk/scotland/our-work/influencing-on-your-behalf/safestaffingscotland>

⁵ See RCN response to Migration Advisory Committee's (MAC's) Call for Evidence on EEA and non-EEA immigration, <https://www.rcn.org.uk/-/media/royal-college-of-nursing/documents/policies-and-briefings/consultation-responses/2017/october/conr-4017.pdf>

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In relation to future trade arrangements with the EU, we have consistently argued that EU single market considerations need to be balanced with the overriding considerations of health protection, decent work, quality services and patient safety – whether in relation to health professionals, products or services. We believe this should continue to be a guiding principle for any future settlement.⁶ Furthermore, any new trade deals the UK may negotiate outside the EU must exclude health services to avoid detrimental impact on patient care and health workers' employment conditions. The RCN have been very clear about this during the negotiation of the Transatlantic Trade and Investment Partnership (TTIP) and would be very concerned, were any new UK trade deals considering this.⁷

If you require any further information please contact Gemma Richardson, Parliamentary Officer, at gemma.richardson@rcn.org.uk or 0131 662 6186

⁶ See RCN submission to the House of Commons International Trade Committee inquiry UK's trade options beyond 2019, <https://www.rcn.org.uk/-/media/royal-college-of-nursing/documents/policies-and-briefings/consultation-responses/2017/march/conr-9316.pdf> for further information

⁷ See RCN Position on Transatlantic Trade and Investment Partnership, October 2014, <https://www.rcn.org.uk/about-us/policy-briefings/pol-2114> for further information

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