

**Written evidence submitted by the Royal College of Nursing (HOM0001)**

1. There are currently 84,316 non-EEA internationally educated nurses working in health and care across the UK.<sup>1</sup> Internationally educated nursing staff make a phenomenal contribution to supporting our severely understaffed health and care services. Whilst the latest data of nursing registrants on the Nursing and Midwifery Council register shows an increase in the number of nurses, these are predominantly overseas professionals. We are still far short of the staff needed to provide safe and effective care in our health and care sector. Prior to the pandemic, the NHS in England had a 10% nursing vacancy rate of around 40,000 vacancies and in addition, it is estimated that there are over 100,000 adult social care staff vacancies.

*The future immigration system*

2. The proposed future immigration system will seriously put the social care sector at risk of collapse. The intention from the Government to exclude so-called 'low skilled' workers from coming to the UK is short sighted and will mean that social care settings in particular will not be able to recruit much-needed staff. Cutting off the international supply route will compound the existing and well recognised workforce problems.
3. The Home Office has so far displayed a complete disregard to the issues facing our social care sector and the impact that immigration proposals will have. Understanding the implications of excluding a migratory route for social care staff has not been reviewed in light of COVID-19 – both in terms of how crucial international staff have been to the sector and the way in which they are now being valued by Government for their efforts. The RCN has been calling for the Home Office to urgently review the current proposals and rethink this policy decision.
4. Furthermore, the route for recruiting internationally educated registered nurses is fragile. Whilst the profession is currently expected to remain on the Shortage Occupation List (SOL) and benefits from an exemption from the salary threshold, if these measures were to be revoked, many registered nurses would also be ineligible to work in the UK. It is wrong that our internationally educated staff, who are clearly vital for the safety of our health and care services, must rely on a series of temporary exemptions in order to work in the UK. The salary threshold of £35,000 for permanent residency is also unattainable for the majority of nurses. Starting salaries prevent individuals from reaching the threshold within the five-year timescale. These barriers will disrupt individuals' personal lives and have significant implications for patient care.
5. The Government must ensure that overseas nurses are supported to work in the UK in order to protect patient safety and keep our health and care system operating. We call for a commitment that the nursing profession will continue to be exempt from salary thresholds and to be included on any shortage or priority occupation list.

*Immigration Health Surcharge*

6. The RCN has campaigned for the immigration health surcharge to be abolished for nursing staff and their dependents since 2018. The surcharge exemption – announced for health and care staff in May – has yet to be implemented. Following the announcement, the RCN along with other health unions wrote to the Prime Minister in June 2020 calling for the policy to be fair and inclusive so that all health and care staff and their family members will benefit.
7. The exemption will be automatically applied for Tier 2 registered nurses coming into the UK on sponsorship. However, social care staff and the unregistered health care workforce will still be required to pay the fee in full and will only be paid reimbursements in six-month increments associated with their length of service. This difference in

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<sup>1</sup> Nursing and Midwifery Council, 'Registration Statistics', 2019. Available at: <https://www.nmc.org.uk/about-us/reports-and-accounts/registration-statistics/>

treatment between NHS and social care staff is disappointing. Plans to reimburse staff simply do not go far enough to compensate for the initial, unjust financial burden faced.

#### *Engagement with the Home Office*

8. Despite the health and social care sector being uniquely impacted by the proposed immigration system, there has been no opportunity to meaningfully engage with the Home Office. We expect the Home Office to re-open engagement on how the future immigration system will impact the health and care sector, especially now that COVID-19 has further brought to the fore the value that international staff bring as key workers.

#### **Suggested lines of inquiry:**

##### **9. Lack of engagement with the Home Office**

The Home Office have not responded to repeated concerns raised about how the future immigration system will leave health and care services vulnerable.

- What meaningful engagement has the Home Office achieved with the health and care sector to resolve their concerns around the impact the future immigration system will have on services and patient care?
- What organisations have been engaged with, and how has the Home Office sought their views?
- Has the Home Secretary herself met with nurses and social care staff directly to understand their roles and the value they bring?

##### **10. RQF3-5 professions including nursing associates**

- Nursing support roles – which include nursing associates who are expected to progress along the career pathway to registered nurses - provide a key route to expanding the profession and therefore play an important part in reducing staff shortages over time. Given that the number of Nursing Support Workers across the UK is also inadequate, do the Government believe that it is important to maintain routes for overseas recruitment for these support roles?
- COVID-19 has highlighted the public value and importance of all health and care roles and yet the proposed salary threshold will prevent the majority within the RQF3-5 bracket from entering the UK unless in shortage. How could the Government resolve this evident tension between professions 'in need' and professions 'in shortage'?

##### **11. Future immigration system and the impact on social care**

- What assessment have the Government made about how their proposal to exclude so called 'low skilled' social care workers from coming to the UK will have on care provision? What impact do the Government expect their proposals to have on staffing vacancies in the care sector?
- What assessment have the Government made about how staffing vacancies – potentially exacerbated by the future immigration system – will have on the provision of care homes and social care services?
- Are the Home Office considering granting indefinite leave to remain to all international health care staff who supported our patients throughout the pandemic?

##### **12. Immigration Health Surcharge**

- How many registered nurses will now be exempt from the surcharge?
- What assessment have the Government made about how social care staff will feel valued by the incremental refunds they will be entitled to rather than the automatic exemption applied to their colleagues in the NHS?
- What systems are in place to ensure that no health and care worker who is eligible for the immigration health surcharge exemption falls through the cracks?
- What plans do the Government have to abolish the Immigration Health Surcharge in its entirety?

