The BMA international committee is composed of representatives from each branch of practice committee, the board of science and the medical ethics committee. It considers international and immigration affairs and, through key relationships with international organisations including the World Medical Association, is able to influence at the highest levels.

Our priorities for this session focused on the potential implications of the UK’s decision to leave the European Union for the medical workforce and the health of the public; the changing legislative environment surrounding immigration and the need for immigration concessions in the context of COVID-19; and the role of the medical community in promoting and protecting the health of vulnerable people worldwide.

The committee is supported by the international and immigration team.

**COVID-19: Immigration concessions**

The World Health Organization has declared the pandemic to be the most severe global health emergency it has ever witnessed, and our profession is on the front line. Around the world, doctors put their lives at risk on a daily basis to care for patients.

The international committee recognises that international doctors play a hugely important role in the delivery of our NHS. At this time of national crisis, we have worked tirelessly to lobby the Home Office to take urgent measures to support international medical professionals working in the NHS for the duration of the COVID-19 pandemic and beyond. During this time, we successfully lobbied for:

- An automatic extension for visas due to expire before 1 October 2020 – and further tailored concessions for doctors needing to switch employers, such as GPs finishing their training programme and entering employment.
- Flexibility to work at a different NHS site because of COVID-19 (as long as their sponsor can maintain their sponsorship duties) without having to wait for a decision on a new visa application, allowing doctors to be redeployed to hospitals with acute staff shortages.
- A mechanism to support international doctors to remain in the UK, to enable them to take their postponed PLAB 2 examination.
- The dependants of international doctors and other healthcare professionals who sadly die in service during the pandemic to be granted automatic indefinite leave to remain in the UK.

We are also asking for international doctors and their dependants, currently on a path to settlement in the UK, to be granted automatic indefinite leave to remain.
Cost and complexities in the current immigration system

The international committee has repeatedly raised concerns about the cost and complexities of the current immigration system for non-EU workers and employers.

This is why we have been lobbying the Government since 2015 to remove healthcare professionals from the health surcharge. As a result of our work, the Government announced in May 2020 that employees in the health and care sector and their dependants would be exempt from the charge and eligible for a refund from 31 March 2020. This is especially timely, given that the charge was due to increase to £624 per year from October 2020. The exemption will relieve doctors and their families of this substantial financial burden.

In recognition of this momentous win for the Association, Chaand Nagpaul said: ‘This announcement is long overdue but is testament to the BMA’s persistent lobbying for this surcharge, unfair to so many NHS workers from overseas, to be abolished. This is without a doubt a moral victory and brings huge relief to those facing bills of up to thousands of pounds – as well as the insult of having to pay for the very services they are working so hard to provide.’

In recognition of the shortages across specialties within the medical profession, all medical practitioners were placed on the Shortage Occupation List in October 2019. The international committee has campaigned for a recognition of shortages across the profession and the inclusion of medical practitioners on the list will make it easier for employers to recruit much-needed international doctors.

The future immigration system

At a time when the NHS is under unprecedented strain, it is critical that our immigration system allows us to attract and retain talented healthcare workers from overseas. The international committee has highlighted what needs to change in the future to ensure that any new immigration system meets the needs of the UK health and social care system.

We have used the passage through parliament of the Immigration and Social Security Co-ordination (EU Withdrawal) Bill to engage with MPs both on the implications of ending free movement on the health and social care sector, and on our key asks for the future immigration system.

We submitted evidence to the Migration Advisory Committee relating to the salary threshold and called on the Government to significantly reduce the £30,000 salary threshold to reflect NHS pay scales for all healthcare professionals and welcomed the recommendations to do so. In our response we highlighted our concerns about a lack of a mechanism to facilitate so-called low-skilled labour and the impact this would have on the wider health and care sector. The Cavendish Coalition, of which the BMA is a member, also published a letter on 9 July 2020 setting out these concerns.

Maintaining our influence in Europe

The BMA has worked tirelessly to keep health and the medical profession high on both UK and EU negotiating agendas. Yet despite these efforts, we remain gravely concerned that there will not be sufficient time to secure a future relationship which enables the European medical profession to continue treating its patients to the highest possible standard, and which enables continued access to pan-European programmes such as Horizon Europe and the European Centre for Disease Prevention and Control.
Post-Brexit trade deals

We continue to be a leading voice highlighting concerns about the impact of post-Brexit international trade agreements on health and the healthcare sector. We are calling for the health and social care sectors to be excluded from any future trade deals, and for safeguards to be put in place to ensure that short-term economic benefits are not given priority over health in trade negotiations. Our key asks are focused on:

– parliamentary scrutiny
– procurement and provision of public services
– the threat of investor protection mechanisms, both to procurement and regulation to promote public health
– food and other product safety standards
– UK medicines pricing and intellectual property regime
– trade related aspects of intellectual property rights and global access to essential medicines.

During the passage of the Trade Bill through Parliament, we have consistently briefed MPs, and submitted evidence on a number of trade negotiations and inquiries.

Human rights

The BMA has been vocal in calling on the UK Government and governments globally to take action to protect the safety and human rights of healthcare staff, who are a vital resource during this crisis.

The international and medical ethics committees have jointly written to the foreign secretary denouncing human rights abuses, many of which are medical in nature, suffered by the Uighur minority in northern China. It is reported that more than 1 million Uighurs are being held in overcrowded prison camps, where they are extremely vulnerable to outbreaks of COVID-19 currently raging in the surrounding community.

Dr Terry John, BMA international committee chair