

Immigration and Social Security Co-ordination (EU Withdrawal) Bill

Consideration of Amendments, House of Commons

Monday 19 October

The BMA is a professional association and trade union representing and negotiating on behalf of all doctors and medical students in the UK. It is a leading voice advocating for outstanding health care and a healthy population. It is an association providing members with excellent individual services and support throughout their lives.

Key points:

- The Immigration and Social Security Co-ordination (EU Withdrawal) Bill will end the EU's rules on free movement of persons into the UK, bringing EEA and Swiss nationals and their family members under UK immigration control.
- Around 29% of doctors working in NHS hospitals, and 14% of the overall healthcare workers in the UK, are from overseas. They deliver key public services, conduct vital medical research, and contribute to the overall economy.¹
- Any changes to the UK immigration system, which could deter those who may want to work in the UK, risk having significant implications for the staffing of health and social care services, quality of care and patient safety in the future.
- We welcome measures in the Immigration Rules published in February 2020, and set out in further detail in July, that will help recruit registered health and care professionals, including the fast-track NHS visa.
- **However, any future immigration system must consider the needs of the NHS for both highly skilled and so called low skilled labour and should be based on needs and demands to ensure that gaps in the workforce are filled where they cannot be met by UK nationals in the short to medium term.**
- We welcome the exemption of overseas NHS and care workers from the Immigration Health Surcharge, and the Government's confirmation on 14 July that the exemption will apply to all healthcare workers arriving on the new NHS visa, and their dependents. We also welcome that refunds are now being issued to doctors who paid the fee after 31 March. The Government must ensure that these refunds are given speedily.
- The BMA is concerned, however, that healthcare workers ineligible for the NHS Visa will still have to cover the cost of the charge upfront under a six monthly reimbursement process that only began on 1 October.
- The BMA believes that all health and social care workers provide invaluable services in an incredibly overstretched system, and therefore this policy should apply to all equally.
- The COVID-19 pandemic has highlighted the exceptional contribution and sacrifice our health and social care workforce make every day in protecting and caring for our communities. It has also made clear how much we depend on our international workforce.
- **To truly reflect their value and contribution to our communities, the BMA is calling on the Government to go further and grant all international doctors currently in the UK and on the route to settlement automatic indefinite leave to remain.**
- This would send a clear signal to our international workforce that they are a valued and integral part of our healthcare system and encourage more of the brightest and best medical professionals to practice in the UK.

¹ ONS, [International migration and the healthcare workforce](#), August 2019

The BMA strongly urges MPs to vote in favour of Lords Amendment 1 that would require the Secretary of State to commission and publish an independent report on the impact of ending freedom of movement on the social care sector.

Freedom of movement and the EU directive on mutual recognition of professional qualifications (MRPQ) have played a vital role in enabling thousands of health professionals and researchers from countries within the EEA to work in the UK. EEA doctors and researchers play a key role in staffing vital health services, delivering key public services and conducting medical research across the UK. 29% of doctors working in NHS hospitals, and 14% of the overall healthcare workers in the UK, are from overseas².

Schedule 1 of the Immigration and Social Security Co-ordination (EU Withdrawal) Bill will repeal legislation relating to free movement and other EU laws relating to immigration. We are concerned about the implications of this policy on the NHS and social care workforce at a time when the health and care services are already under immense pressure in the face of rising demand and tight resources.

Reports of almost 90,000 vacancies in NHS trusts across England between October 2019 and December 2019 demonstrate the difficulty of recruiting and retaining staff within the current immigration framework³. This is leading to rota gaps across the medical profession and real concerns about the ability to adequately staff services. COVID-19 has placed an already stretched workforce under even further pressure.

The BMA's latest COVID-19 tracker survey of nearly 4,000 doctors reveals a workforce exhausted and with little confidence that the NHS is coping with the huge backlog of missed, cancelled and postponed care⁴:

- 60% of doctors said they were not very, or not at all, confident in their local economy managing demand as normal NHS services resume
- 50% said they were not very, or at all confident, in being able to manage a second wave of COVID-19.
- 26% of doctors said that in the last two weeks non-Covid demand had increased to pre-pandemic levels, with 17% saying that demand is now even higher than it was before.

These survey findings demonstrate the scale of the challenge for the NHS in the coming months, and the anxiety and concern felt by frontline doctors.

Whilst we welcome the inclusion of measures to help recruit doctors to the NHS, including the fast-track NHS visa, we are extremely concerned over the lack of an entry route into the UK for social care professionals.

Not only does this impact social care and the vital role that sector plays in our communities, but it has a knock-on impact on other areas of our healthcare system, by placing increased pressure on A&E, primary and community care and making it more difficult to discharge patients who have been treated in hospital back into the community.

As our country deals with a second wave of Covid-19, this impact will be felt even more acutely by our doctors at a time when they are already facing unparalleled pressures.

International workers account for approximately one sixth of care workers in England, yet the social care system remains understaffed with 122,000 vacancies.⁵ The average salary for care workers in England is

² ONS, [International migration and the healthcare workforce](#)

³ NHS Digital: [NHS Vacancy Rates](#)

⁴ BMA [COVID-19 tracker Survey](#), August 2020

⁵ Skills for Care, 'The state of the adult social care sector and workforce in England', October 2019. Available at: <https://digital.nhs.uk/data-and-information/publications/statistical/nhs-workforce-statistics>

between £16,400 and £18,400 which means that individuals would fail to meet even the lower salary threshold of £20,480 to enable them to trade points to be eligible to work in the UK.

The BMA shares concerns with the nursing and social care sectors that the current proposals for the new immigration controls will exacerbate the current social care workforce shortages and put some of the most vulnerable members of our society at risk.

It is of course important to grow our domestic workforce to help meet workforce challenges, and to improve working conditions, pay and training as part of that, but we must also provide an entry route for overseas staff who want to join such a vital part of a health care system which would struggle to cope without them.

It is vital that any future immigration system considers the needs of the NHS for both highly skilled and so called lower-skilled labour and should be based on need and demand to ensure gaps in the workforce are filled where they cannot be met by UK nationals in the short to medium term.

The BMA encourages MPs to vote in favour of the new clause that would require the Government to report on the impact of the end of freedom of movement on social care. Whilst this does not commit the Government to ensuring there is a migratory route for social care professionals into the UK, it would ensure the impact of the end of freedom of movement is monitored and enable any issues that arise to be addressed. It offers a level of accountability that would help reassure health and care professionals working under particularly difficult circumstances.

Indefinite Leave to Remain

The BMA remains concerned that EU and non-EU nationals will continue to be subject to unnecessary bureaucracy, costs and inflexibilities, which could compound recruitment problems in the NHS. The COVID-19 epidemic has highlighted how much we depend upon our international healthcare workforce. At a time when skilled international doctors, nurses and other healthcare workers are risking their lives in the fight against COVID-19 – and most tragically, in some cases dying on the frontline – it is right that the Government should take action to demonstrate our appreciation for the sacrifice and vital service of these individuals.

We welcome immigration concessions the Government has made, including automatically extending visas for a year, granting the dependents of international doctors who die of COVID-19 indefinite leave to remain and the abolishment of the immigration health surcharge for NHS health workers. **However, to truly reflect the sacrifice they are making, we are calling on the Government to go further by granting all doctors currently working on Tier 1 and Tier 2 visas, and their dependents, automatic Indefinite Leave to Remain free of charge.** These doctors who are already on the route to settlement in the UK, deserve to be rewarded for their service during the COVID-19 pandemic by removing the financial bureaucratic barriers to applying for residency – currently £2,389 for the main applicant. We set out this call in a letter to the Prime Minister on 13 July.

Ensuring healthcare workers have certainty over their immigration status would truly reflect their value, contribution and sacrifices to our communities, not only during COVID-19 but throughout their careers.

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