

Professor Brian Bell  
Migration Advisory Committee  
1<sup>st</sup> Floor Peel Building  
2 Marsham Street  
London  
SW1P 4DF

Dear Professor Bell,

**BMA Response to ‘The impact of the ending of freedom of movement on the adult social care sector: call for evidence’**

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 healthcare and a healthy population. The association welcomes the opportunity to respond to the Migration Advisory Committee call for evidence on the impact of the ending of freedom of movement on the adult social care sector.

The Cavendish Coalition is also submitting a response to this call for evidence, of which the BMA is a member. The Coalition, a group of 37 health and social care organisations, is working to ensure that the system is properly staffed following the UK’s exit of the EU. The Cavendish Coalition believes it is critical that the Government takes all possible measures to safeguard the future supply of health and social care workers needed to continue delivering safe, high-quality care.

The BMA and the Cavendish Coalition are committed to helping the UK Government to design and deliver post-Brexit policies which have a positive impact on the UK’s health and social care system.

## **1. Workforce, pay, and conditions**

Following the passage of the Immigration and Social Security Coordination (EU Withdrawal) Bill, freedom of movement ended on 31 December 2020. The new points-based immigration system was introduced on 1 January 2021. We consistently [briefed](#) parliamentarians during the passage of the Bill on our concerns over the impact of the ending of free movement for the adult social care sector. Please note the following key points:

- i. The ending of freedom of movement is having a significant detrimental impact on the staffing of health and social care services, the quality of care, and patient safety. To ensure the sustainability of the social care sector, it is vitally important that social care workers from overseas are supported to work and live in the UK.



- ii. EU and non-EU workers make up a large proportion of the adult social care workforce. One in five of the adult social care workforce in England were born outside of the UK (approximately 250,000 people), about 113,000 of whom are from EU countries.<sup>1</sup>
- iii. Data collected since March 2021 shows a sharp drop in the number of people arriving in the UK to take up adult social care jobs (1.8% of new starters in January-April 2021 compared to 5.2% during the same period in 2019).<sup>2</sup> While the ongoing impacts of the COVID-19 pandemic may have exacerbated the situation, it is likely that the ending of freedom of movement has contributed to this decline.
- iv. The current vacancy rate in adult social care is 105,000 (with around 6.3% of roles vacant and the staff turnover rate at over 34%).<sup>2</sup> Projections indicate that vacancies in adult social care could rise to almost 500,000<sup>3</sup> by the end of 2030, due to rising demands from an ageing population.
- v. Currently gaps in the care available to people mean that the most vulnerable patients – often elderly and living with multiple long-term conditions – are more at risk of their health worsening and requiring care in the NHS. These gaps also cause delays in discharging patients back into their communities, while poor care standards increase the likelihood of patients ending back up in hospital and further health problems.
- vi. The mandatory vaccination policy for care home staff will add to the sector’s recruitment and retention issues. According to the latest estimates, between 17,000 and 70,000 staff may choose to not take up the vaccine before the policy comes into place in November 2021 and would therefore be unable to work in care homes.<sup>2</sup> If these staff were to leave and replacements were not found it would push the staff vacancy rate up to its highest level on record.
- vii. Staff shortages are often a result of care workers being low paid, offered minimum training, and the sector suffering from a lack of workforce planning and enforcement of employment rights. For example, there is a 7% gap between pay for nurses in adult social care and those in the NHS in England.<sup>4</sup> There is no indication of the situation improving. Significant funding is required to enable the sector to meet rising demand and to improve the working conditions for social care workers.<sup>5</sup>
- viii. While it is important to grow our domestic workforce to help meet workforce challenges, we must also provide an entry route for overseas staff, without whom the health and social care system would be unable to cope. The success of domestic recruitment initiatives into social care, such as those coordinated by the Princes Trust and the Department of Work and Pensions are unclear. The high rate of vacancies within the

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<sup>1</sup> Skills for Care, 2021. [The state of the adult social care sector and workforce in England.](#)

<sup>2</sup> Skills for Care, 2021. [The state of the adult social care sector and workforce in England.](#)

<sup>3</sup> King’s Fund, 2018. [Staffing shortfall of almost 250,000 by 2030 is a major risk to NHS long-term plan.](#)

<sup>4</sup> Health Foundation, 2019. [What should be done to fix the crisis in social care?](#)

<sup>5</sup> British Medical Association, 2020. [Calling for action for social care in England.](#)

sector indicates that the shortfall of recruitment into social care following the end of freedom of movement has been not been filled by domestic recruitment.<sup>6</sup>

- ix. The average salary for care workers in England is between just £16,400 and £18,400, which means that individuals fail to meet even the lower salary threshold of £20,480 to enable them to be eligible to work in the UK. Any change to the current immigration system for social care workers should not be used to justify the current low wages for social care workers, or to attempt to secure cheap labour from overseas. Working conditions, pay, and training opportunities must also be improved to encourage workers from both the UK and from overseas to work in the social care sector, as well as to retain those currently working in the sector. Ensuring social care employment terms and conditions mirror those of the NHS would help to improve the situation.
- x. Social care staff play an integral role in the efficient and safe running of health and social care services, and we owe our health and social care staff from overseas a huge debt of gratitude and should do all we can to keep these dedicated workers and ensure there aren't barriers to future recruitment.

## 2. Immigration policy and social care

As detailed in our previous response to the call for evidence on the review of the shortage occupation list, there are thousands of health and social care workers from Europe and the rest of the world who provide vital public services to the residents of the UK and contribute to the overall domestic economy. They make up a substantial portion of the UK workforce and the health and social care sector relies on them to deliver safe and reliable services. Key points to note:

- i. The BMA has repeatedly raised concerns about the lack of a mechanism in the immigration system to facilitate recruitment into social care. Many occupations within social care are not eligible to apply under the immigration system because they do not meet the qualification threshold or the salary threshold of £25,600 or even the lower threshold of £20,480. It is imperative that the government introduces a mechanism to attract workers from within and outside Europe to the UK.
- ii. Although the recent extension of the seasonal worker scheme and the Government's decision to grant 5,000 temporary visas for HGV drivers shows the need for sector specific schemes to meet workforce shortages, these schemes are usually time-limited. They fail to recognise the significant shortages faced by organisations and are unlikely to be an attractive offer to potential applicants who are seeking to build a life in the UK and want certainty that they and their families will be able to stay here and build a life before uprooting them. We urge the Government to introduce a longer-term visa similar to the Health and Care Worker visa for social care workers from the EU.

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<sup>6</sup> Brancroft, 2021. [Care sector job vacancies soar as post-Brexit immigration rules start to bite](#). The Telegraph.

iii. As a minimum we would recommend the Government take the following actions immediately:

- Develop a long-term workforce and funding plan to improve the recruitment, training, pay, and employee terms and conditions of domestic and international social care workers
- Introduce a long-term visa which provides a path to settlement for social care workers
- Abolish the salary threshold for health and social care workers from overseas
- Ensure individual social care providers are exempt from paying the immigration skills charge
- Ensure that all social care workers are exempt from paying the Immigration Health Surcharge

### **Conclusion**

Any reduction in the number of social care staff migrating to the UK will inevitably exacerbate current workforce shortages. The pandemic has placed incredible strain on social care workers and the health and social care sector more widely. Recent policy changes, such as the introduction of mandatory vaccination, are now exacerbating this situation further. Amid a growing workforce crisis, the quality of patient care will suffer and patient safety may be put at risk if an immigration policy restricts the flow of vital workers.