

EXTRACT FROM BRIEFINGS ON IMPACT ON HEALTH AND SOCIAL CARE WORKFORCE – 23 FEBRUARY 2017

Key Facts and Issues

- EU 27 nationals make up 4.5% of the Scottish workforce in employment across sectors, and account for 3.0% of the workforce in the Health and Social Care Sector (Annual Population Survey 2015, Office for National Statistics)
- Just over 1,159 non-UK EEA-qualified doctors in Scotland (as at 27 October 2016), from a total of 20,028 – 5.8%. (GMC 2016)
- Around 4% of nurses and midwives and 2% of dentists in training are from the EU. (Office for National Statistics data – 29 June 2016).
- The free movement of people and the mutual recognition of qualifications allows skilled and experienced health professionals from the EU/EEA to work in our NHS. Without this, our ability to continue to provide high-quality health and social care services for the people of Scotland will suffer particularly in Scotland's remote and rural communities.
- The impact of Brexit on the Health and Social Care workforce will depend on the precise form of withdrawal from the EU. Existing professional registrations will remain in place, with immigration arrangements likely to become the primary barrier to access. Continued uncertainty will have an impact on our ability to continue to attract non-UK EU nationals to work and live in Scotland
- Continuing access to the free market is likely to be important to ensure the NHS remains able to provide the services we expect.
- The free movement of people within the EU has also enabled Scotland's medical schools to attract students to study medicine and dentistry. At present, EU students enjoy free tuition fees, which has made Scottish medical and dental schools more attractive to EU students.
- On the 8th November, Shona Robison, Cabinet Secretary for Health and Sport, led a debate on the Implications of the EU Referendum on health and social care, covering issues on recruitment and retention, workforce planning, education and training and regulation of professionals, as well social and employment protections.

BACKGROUND

Workforce planning: The Scottish Government will introduce a national and regional workforce planning system across the NHS in Scotland, which will help to deliver the vision set out in the National Clinical Strategy. This will form part of a National Health and Social Care Workforce Plan which will take full account of the many demographic and other influences on our health and social care workforce, enabling us to continue to deliver sustainable health and social care services. Development of a national workforce planning approach for health and social care will be an ongoing process with a consultation currently underway until 28 March, and publication of the first National Plan in spring 2017.

We are considering options to establish systems which allow us to improve our information on the country of origin of the workforce in Scotland. This will provide data to assess the potential impact for NHSScotland and social care services being unable to recruit non-UK EU nationals.

Benefits of EU membership:

- The EU provides us with an established and effective regulatory approval drugs system, ensuring that UK patients benefit from medicines more quickly and that

medicines that are researched and manufactured in the UK can be made available in the EU quickly.

- EU Membership gives Scots access to medically necessary state healthcare (on the same basis as residents of the country they are visiting) via the European Health Insurance Card (EHIC).
- Membership also affords Scots access to state healthcare in the longer term, should they choose to work or study in another EU country and become “ordinarily” resident there. The same arrangements apply to EU nationals residing in Scotland.
- The research sector in Scotland has benefited greatly from EU membership, including access to substantial research funding, international research collaborations and attraction of talent to Scottish universities.

STAKEHOLDER QUOTES

Unison: “UNISON Scotland is concerned that without free movement of labour, Scotland will face immense workforce planning challenges in the growing health and care sector. We are already unable to recruit and retain enough care workers to fill vacancies and the loss of EU nationals will exacerbate this, particularly in the private residential and home care sectors.”