How can the NHS recruit and retain migrant nurses after Brexit?

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Non-British nurses working for the National Health Service (NHS) face a number of challenges, which must be addressed in the context of ongoing Brexit negotiations. Since the 2016 Referendum result to leave the European Union (EU), the number of EU nurses registering with the Nursing and Midwifery Council (NMC) plummeted in 2017 by 96% – from 1,304 EU nurses registering with the NMC in July 2016 to just 46 in April 2017 (Siddique, 2017). This drop in numbers is also linked with the number of EU nurses leaving the UK (Matthews-King, 2017).

A recent NMC report (2019) published a 1% increase, for the first time in three years, in the number of new nurse registrants, for the period between April 2018 and March 2019. This increase translates into 6,000 nurses from the UK, EU and overseas. These numbers, while encouraging, reflect the changes in international recruitment from EU and non-EU countries, and importantly the impact of Brexit on the retention of both EU and non-EU nurses. This paper recommends measures to support the retention of these nurses.

Recommendations

■ The NHS needs to provide opportunities for continuing career development through available training schemes and also to offer flexible working patterns to EU and overseas nursing staff. Additionally, it is of paramount importance to support migrant nursing staff in their effort for career progression by offering relevant information in advance.

■ The NHS needs to continue to protect migrant staff not only from discrimination experienced by the general public and their co-workers but also from management. Bias from management can delay or prevent career progression for EU and non-EU nursing staff and can lead to lack of retention.

■ The NHS Trusts need to increase their collaboration in order to support newly hired migrant nursing staff. Such increased collaboration would also allow for more consistency between Trusts in offering visas for more than two years.

■ Hospital wards and NHS hospital management need to implement more efficient mechanisms in recognising nursing competencies and supporting their ongoing training towards professional accreditation. Additionally, NHS hospital management need to recognise and value migrant staff’s previous nursing experience which can often be at a higher level in comparison to newly graduated British nursing staff. Such experience can be an asset to hospital wards.

■ NHS Trusts/employers and recruitment agencies need to be consistent in the information offered on job vacancies and especially for positions in specialised wards.
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Context
Since its founding in 1948, the NHS has relied on hiring nursing staff from outside the UK. Trends in recruiting nursing staff from overseas have changed over the past few decades. Political and financial factors have influenced policy-making towards the entrance of migrant staff to the UK and especially the recruitment of migrant healthcare staff. Factors such as opportunities for career development and also discrimination on the grounds of class, ethnicity and others are connected to the retention of migrant nursing staff.

The 2016 UK Referendum result to leave the European Union (EU) and the uncertain status of EU citizens living and working in the UK translated into a dramatic drop in the number of new EU nurse applicants.

From July 2016 to July 2017, the Nursing and Midwifery Council (NMC) saw the number of new EU nurse registrants drop by 96%.

Between October 2016 and September 2017, more than 4,000 EU nurses who were working for the NHS chose to leave the UK (Matthews-King, 2017).

Moreover, an increase in the number of incidents of discrimination and abuse towards immigrants, including non-British NHS staff following the 2016 Referendum, have added to the feelings of uncertainty and insecurity migrant nursing staff have.

The need for non-British nursing staff is illustrated in the Home Office publication of shortages of staff in occupations such as nursing, where nurses are needed in all areas of specialisation (Home Office, 2019).

Despite an increase in new nurse registrants between April 2018 and March 2019, numbers of EU nurses are continuing to decline, with Brexit figuring as one of the factors leading EU nurses to leave the UK.

Low nurse staffing levels have been linked to poorer outcomes for nurse retention and for patient care and patient mortality. The findings showcase the problems facing the retention of nursing staff by focusing on the experiences of migrant nursing staff and the impact of Brexit.

Such findings are consistent with reports by the NMC and the Royal College of Nursing and are conducive to offering tailor-made support for migrant nursing staff who are more vulnerable due to ongoing Brexit negotiations and rising incidents of discrimination against immigrants.

The participants of this study offered examples of the support they received to develop their careers but also incidents where they had experienced discrimination and bias by members of the public, their colleagues and hospital management. The two NHS Trusts studied here provide examples of good practices and also areas where improvement could be made in supporting migrant nursing staff and contributing to the retention of overseas nurses within the NHS.
Methodology
We interviewed 11 EU and non-EU NHS nurses over a period of three weeks in January and February 2019. The NHS nurses were working for two NHS Trusts, in the Midlands and in Southwest England.

Our sample is representative in terms of gender ratio (two male and nine female nurses) and in terms of nationality (Spain, Italy, Philippines and more recently, Greece).

Participants had between two months and four and a half years working experience for the NHS and are considered highly mobile because of being in an early stage of career progression.

Results and conclusions
- Changes to the language competencies and the 2016 Referendum decision to leave the EU has led to significant numbers of EU nurses leaving the NHS (Matthews-King, 2017). NHS Trusts are now seeking to recruit from outside the EU. However, migrant NHS nurses are taking on a heavier workload because of low nurse staffing numbers, without additional financial or other recognition.

- EU and non-EU NHS nurses are increasingly facing discrimination in their workplaces and in public spaces since the 2016 Referendum decision to leave the EU. Migrant nurses feel supported through implementation of protocols and by hospital senior staff, but there are inconsistencies in practice between NHS Trusts and hospital wards.

- Migrant nurses face bias from NHS management staff when seeking to develop their careers. Bias is expressed in lack of sufficient information on job opportunities, little time to prepare for interviews and little diversity in terms of ethnicity, nationality and race in more senior nursing and managing positions within NHS Trusts.

- Inconsistencies between NHS Trusts in offering visas and renewing contracts leads to migrant nurses ‘shopping around’ and moving to different Trusts. Such practices are costly for the NHS Trusts in terms of hiring and training new staff.

- Delays in recognising the competencies of migrant nurses because of low numbers of trained staff and limited budgets lead to frustration by migrant staff and to overall mismanagement of resources.
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Further reading

- Home Office (nd), Stay in the UK after it leaves the EU (‘settled status’): step by step: gov.uk/eusettledstatus
- Nursing and Midwifery Council (NMC) (ndb), Register as a nurse or midwife if you trained outside the EU/EEA: nmc.org.uk/registration/joining-the-register/register-nurse-midwife/trained-outside-the-eueea/
- Royal College of Nursing: rcn.org.uk

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