The Royal College of Nursing Wales gave evidence to the National Assembly for Wales Health, Wellbeing & Local Government Committee on the 14th November 2007. At this session Committee members requested further evidence on international recruitment, on the Scottish NHS scheme *Flying Start* and also on the operation of the Scottish NHS assurance that every newly qualified nurse who wishes to work in NHS Scotland receives an offer of employment. This paper is intended to provide this information.

It should be read in conjunction with our earlier written submission to the Committee. For ease of reference the Executive Summary of this evidence is reproduced at the end of this paper.

**Section Two - One Year Job Guarantee for Nurses and Midwives from NHS Scotland**

In Scotland a system has been developed to ensure that every newly qualifies nurse or midwife who wishes to work in NHS Scotland receives an offer of employment. This system has the support of the RCN, RCM and Unison.

The newly qualified nurses (defined as within 3 months of joining the NMC register) are firstly expected to seek employment in the normal way (and may be required to demonstrate they have done so). If they have been unable to secure employment they are eligible for the national scheme (there is no obligation to seek this assistance). NHS Education for Scotland will issue them with a list of contacts for operating division vacancies in Scotland. These vacancies will offer at least a one-year contract of employment. Once employed the nurses are subject to the standard employment terms and conditions of that place of work.

The text of a leaflet explaining the scheme further is attached as an appendix to this paper. Further information can be found at [www.nes.scot.nhs.uk](http://www.nes.scot.nhs.uk).

**Section Three – NHS Scotland Flying Start scheme**

The Flying Start scheme of NHS Scotland is deigned to support the transition from student to newly qualified health professional by providing access to a
range of learning activities and, crucially, support from work-based mentors. It assists them to navigate to the Foundation gateway of the NHS Knowledge and Skills Framework ‘Agenda for Change’.

Paul Martin, the Chief Nursing Officer of Scotland and Jacqui Lunday, the Allied Health Professions Officer of Scotland have jointly commented on Flying Start NHS:

“The programme will provide the ongoing education and support to increase the confidence and competence of our newly qualified practitioners. Investing in our staff as they set out on their career in NHS Scotland will bring real dividends not only to staff but to patients and service delivery”.1

More information on the Flying Start Scheme can be found at www.flyingstart.scot.nhs.uk

Section Four - International Recruitment and Migration

There is currently no organised effort to recruit international nurses to the NHS in Wales. However the Royal College of Nursing is concerned that no central data is available from the NHS or the independent sector on either individual international appointments or appointments of those qualified overseas. It is important both for workforce planning and the sustainability of our international policy that relevant data is identified, collated and analysed by the Welsh Assembly Government.

Data on migrant workers from the EU is also required. There is anecdotal evidence that increasing numbers of nurses from eastern EU countries are taking employment within the UK in the independent sector as healthcare support workers. If this is corroborated by investigation it represents a potential source of UK nursing labour but it may also represents a threat to the healthcare within the source country.

Some years ago a project operated involving several NHS Trusts to record expressions of interest in by international nurses. The project then provided support on the process of recruitment to interested Trusts. This project also enabled some analysis of international migration.

Hopefully the Electronic Staff Record should eventually be able to provide this information and allow analysis.

The UK is a major player in international nursing labour market. We compete with other developed countries such as the USA, Australia, Ireland and Canada, which are also facing demographic-related nursing shortages. The limited international data that is available suggests that the overall trend in international flows of nurses is increasing.

1 www.flyingstart.scot.nhs.uk
NMC statistics highlight the reliance on India, the Philippines and Australia for overseas admission to the register. India alone accounted for 11% of all initial NMC entrants in 2007.

92 Seven in ten (69%) of IRNs work 12 hour shifts, compared to 59% of UK qualified BME respondents and 43% of all white respondents.

93 IRNs are much less likely to be offered time off in lieu (10% to 28%) and more likely to be offered higher (19% to 14%) or normal (39% to 29%) rate pay. This difference is in addition to pay band differences.

<table>
<thead>
<tr>
<th>Country/area</th>
<th>Initial entrants</th>
</tr>
</thead>
<tbody>
<tr>
<td>England</td>
<td>18,948</td>
</tr>
<tr>
<td>Scotland</td>
<td>2,404</td>
</tr>
<tr>
<td>Wales</td>
<td>962</td>
</tr>
<tr>
<td>Northern Ireland</td>
<td>696</td>
</tr>
<tr>
<td>European Economic Area</td>
<td>1,753</td>
</tr>
<tr>
<td>Overseas</td>
<td>8,709</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>31,402</strong></td>
</tr>
</tbody>
</table>

Source: NMC

It is noticeable, that corroborating the 2005 RCN findings; IRNs work longer hours than all other groups of nurses. Even when we adjust for the mode of work, by only looking at those working fulltime (most IRNs work fulltime) the total average hours worked by IRNs is 47.7 hours, while for UK qualified BME nurses it is 46.6 hours and for UK trained white nurses it is 42.9.

The RCN has focused particularly on encouraging good practice in recruitment and retention in the UK and ensuring that international nurses are aware of their rights. The NMC has also worked to warn potential recruits.

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We Need Respect – Experiences of Internationally Recruited Nurses in the UK RCN
Here to Stay – International Nurses in the UK RCN
about dubious practices of some recruitment agencies, which charge inflated prices and provide misleading information. Such practices occur disproportionately in the independent sector. We believe that statutory guidance should ensure that poor employers should not be able to continue to obtain work permits to employ international nurses.

Using international recruitment as a means of meeting NHS nurse staffing targets has not been without controversy. Many commentators have raised the issue of the detrimental impact of the international recruitment of nurses on the developing healthcare systems of some countries.

To combat some of these criticisms, the UK Department of Health introduced a code for international recruitment in 2001 (on this issue the DoH acts as the lead for the Welsh Assembly Government). This code requires NHS employers not to recruit actively from a list of developing countries published in 2003, unless there is a country-to-country agreement such as with the Philippines, India and Indonesia. Also, they must use recruitment agencies from a preferred provider list. The code emphasises that international recruitment is “a sound and legitimate contribution to the development of the NHS workforce”.

The RCN would like to see a strengthening of the UK Code to provide a framework which addresses the whole journey of a migrant health professional, underpinned by ethical principles, and covering all those involved in recruiting and employing health professionals. This would include better information to prospective migrants in source countries and enforcement of employment rights. It also needs to be part of a wider strategy for workforce planning in this country and international policies to tackle health worker shortages.

The major limitation of the code is that it does not cover the independent sector, which continues to recruit from countries on the proscribed list. The RCN has lobbied for the principles to cover all recruiters to protect vulnerable health professionals and ensure that inappropriate international recruitment did not just shift from the public to the private sector.

The RCN continues to support the principle in the Code that employers should not engage in mass recruitment from countries and regions where there are shortages. However the use of banned countries lists now needs to be reconsidered in terms of who is consulted when compiling the list, any unintended consequences (e.g. lack of incentive to improve working conditions for health workers in source countries), lack of flexibility (given in-country maldistribution of health professionals), and what is likely to happen within the UK and wider labour markets over the next five to ten years.

Migrant workers cannot and should not be excluded from any safeguards on employment rights that are reflected in UK legislation.

It should be noted that 16% of new overseas registrants to the NMC in 2005/2006 came from Sub-Saharan Africa.
Finally, neither Wales nor the UK can ignore that they are part of a broader international labour market for nurses. English speaking nurses have a range of career opportunities in OECD countries in North America and Australasia.

The USA has quantified its nursing recruitment need as being in excess of 1 million registered nurses between now and 2012, including 623,000 to fill newly created jobs. The Canadian situation has been quantified as a shortfall of around 78,000 nurses by 2011. Australia projects a shortage of 40,000 nurses by 2010. Most countries are now looking for policy solutions to address these shortage problems.

The UK has exploited its market advantage in recruiting English speaking nurses from Africa and Asia, but it will be the target for increased recruitment activity from OECD countries attempting to solve their own nursing shortages. There are already signs that recruitment of nurses from the UK to the USA is becoming more significant.

Table 12: Number of NMC verifications issued to destination countries 1980/90 – 2005/06

Source: NMC/UKCC
### Executive Summary of RCN Evidence – 12 Key Policy Actions

1. The RCN believes that the increase in overall nursing numbers is to be welcomed. However, this figure must be set against the decline in specialist community nursing numbers and the far lower rate of increase in the number of whole-time-equivalent registered nurses. The goal of the Welsh Assembly Government should be to build a sustainable nursing workforce.

2. The RCN believes that investment is needed to increase the numbers of and update the skills of the community nursing workforce.

3. The RCN believes that the Welsh Assembly Government should publish an annual Workforce Plan for the NHS. A transparent and inclusive Workforce Planning Framework, which has the capacity to generate this annual Plan, also needs to be established.

4. The RCN believes that a statutory responsibility should be laid upon NHS health organisations in Wales who directly provide patients services to establish a staffing system that provides the right number of registered nurses to ensure appropriate staffing levels for patient care.

5. The RCN believes that the workforce planning process should take account of the estimated ideal workforce need. This can be assessed both through local information from health organisations and information from national strategic policy.

6. The RCN believes that workforce planning capacity needs to be expanded both at the Welsh Assembly Government level and in NHS organisations across Wales.
7. The RCN believes that every newly qualified nurse should be guaranteed an offer of employment from NHS Wales and that an offer of support and mentorship similar to that offered by the Scottish Flying Start scheme should be considered.

8. The RCN believes that the Welsh Assembly Government, in conjunction with higher education institutions, should begin succession planning for the nurse educator workforce.

9. The RCN believes that the number of excess hours nurses are working should be monitored and targets should be established to reduce these. The working of unpaid and unrecognised excess hours should be stopped immediately.

10. The RCN believes that an annual analysis of the nursing workforce should be published by the Welsh Assembly Government showing nursing retention rates, turnover, retirement, agency and bank use and transfers (including cross border transfers) to other NHS and non-NHS employment.

11. The RCN believes that there should be a national strategy for the development of nursing and other healthcare provision in the Welsh language.

12. The RCN believes it essential to gather data about the nursing workforce in the independent sector. Accurate information on the number of healthcare support workers employed across the health and social care spectrum in Wales should also be collated.
Appendix 1 – Leaflet from NHS Scotland

One Year Job Guarantee for Nurses and Midwives
GUIDANCE FOR 2007-2008

Introduction

This leaflet describes the procedure that has been put in place to implement an arrangement to ensure that every newly qualified nurse and midwife who wishes to work in NHSScotland receives an offer of employment. The intention is that every exiting student nurse or midwife who fulfils the eligibility criteria set out below, receives the offer of a job either through their own means or with assistance. The Scottish Executive has developed this guidance in full partnership with the representatives of NHS operating divisions and Boards, Universities, and the professional organisations of the RCN, RCM and UNISON. The guarantee is one of the recommendations in the Facing the Future report.

The guarantee is based on the normal recruitment process, whereby the majority of newly qualified nurses and midwives secure a job through their own efforts informed by their career aspirations and their choice of location. The guarantee is designed to ensure that all newly qualified nurses and midwives have the opportunity to build on the clinical experience gained during their pre registration programme.

If, after trying to obtain suitable employment, the nurse or midwife has been unable to secure a job in their part of the register or geographical location, and if they wish to take advantage of the national scheme, they should contact NHS Education for Scotland, who will issue them with a list of contacts for operating division vacancies in Scotland. These vacancies will offer at least a one year contract of employment.

Of course, neither Scottish Ministers nor NHS Education for Scotland will be employing the newly qualified staff. On taking up one of these jobs, they will be employed by NHS Boards/operating divisions in NHSScotland the same as they would be if they had secured a job independently. The Scottish Ministers will be ensuring that NHSScotland does its best to offer them suitable posts.

The posts will be offered under Whitley Council Terms and Conditions of Service, subject to the usual checks which will be made regarding suitability for employment for both permanent and fixed-term contracts. Post holders will also be subject to the same professional Codes of Conduct and behaviour that apply to all nurses and midwives who work in NHSScotland. Where the individual chooses to resign from their post or where there is a breach of contract which results in termination of employment in accordance with employment law, the one year guarantee will no longer apply.

Eligibility

All newly qualified nurses and midwives who are registering to practice for the first time with a date of registration between 1 September 2007 until 31 August 2008 are eligible to join the national scheme. However, newly qualified nurses and midwives will be expected to be applying for jobs whilst awaiting registration and may be asked to provide written evidence of this. Before they can take up employment as a staff nurse or midwife they must be registered with the Nursing and Midwifery Council (NMC). A nurse or midwife can defer joining the national scheme for up to 3 months after they become registered with the NMC. Only in exceptional circumstances will this period be extended.
What is expected of students/newly qualified nurse or midwife?

During the last 3 months as a student, they are expected to explore all employment opportunities. Thus, before contacting NHS Education for Scotland for a list of contacts they will be expected to have pursued posts of their choice through the normal recruitment process and be able to demonstrate this before choosing to join the one year job guarantee arrangement. They may be asked to provide written evidence such as copies of application forms.

To join the national scheme

To join the national scheme they should contact NHS Education for Scotland

by post 66 Rose Street
Edinburgh EH2 2NN

by telephone 0131 220 8661

by email careers@nes.scot.nhs.uk

And quote the one year guarantee arrangement. They will be required to provide the following information:

a) Full name
b) Date of birth
c) Date of Registration if available
d) PIN number
e) Course completed and date
f) Institution attended
g) Address for correspondence, including email address and fax if available
h) List of posts unsuccessfully applied for

The national scheme will provide contact information for operating divisions’ vacancies. They will need to follow up these vacancies with the employing operating divisions through the normal application process.

It may not always be possible for the newly qualified nurse or midwife to find a post that exactly meets their preference and they may have to adapt their expectations in light of employment availability.

What is expected of the Scottish Executive?

The Scottish Executive will enable this guarantee to be met in partnership with the representatives of NHS operating divisions and Boards, NHS Education for Scotland, Universities, and the professional organisations of the RCN, RCM and UNISON. The effectiveness of the arrangement will be evaluated through the Facing the Future Implementation Group. Once a written offer of employment, which will last for at least one year has been received, the Scottish Executive will consider the guarantee to have been met, unless there are exceptional circumstances where assistance will continue until such time as an offer is made.

What is expected of Higher Education Institutions?

Universities should encourage students to begin seeking employment at the earliest opportunity and should provide support in application form technique and interview skills in the latter stages of their training. Many Higher Education Institutions (HEI) invite local NHS
operating divisions and NHS Boards to attend recruitment fairs timed during the students' last 3 months of training, and this is to be welcomed and encouraged. Staff in HEIs should be familiar with the one year job guarantee arrangement and work in partnership with NHS Education for Scotland in the exchange of information on the newly qualifying nurses and midwives in their establishment.

**What is expected of employers?**

NHS Boards are expected as much as possible, to take appropriate steps to fill suitable vacancies with newly qualified nurses and midwives. They should be familiar with the one year job guarantee arrangement and work in partnership with NHS Education for Scotland in the exchange of information on vacancies.

NHS operating divisions are expected to adopt best practice in the support and mentorship arrangements available in their operating divisions for all newly qualified nurses and midwives. NHS operating divisions should ensure that all fixed-term contracts have a start and end date and contain the same core contractual terms and conditions of employment as permanent staff in line with the legislative framework.

It is anticipated that most students will want full-time employment, however, some may prefer part time options to suit their particular circumstances.

Employers should take reasonable steps to help the nurse or midwife to find a permanent post during the one year period of employment.

**Employment Model for newly Qualified Nurses & Midwives**

Students registering to practice for the first time from September 2007 - August 2008

- Explore employment opportunities

- Want to apply for the one year job guarantee
  - **NO**
  - **YES**

  National Scheme for one year guarantee

  Job secured
**Frequently asked questions**

1. **Do I have to join the one year guarantee?**
   No, the choice is entirely yours. If you find a post through the normal recruitment process or if you choose not to work in the NHS following registration, then there is no need to apply to join.

2. **When do I join the one year guarantee?**
   Once you have completed your pre registration training and are registering with the NMC, you can apply to join the national scheme. You will be expected to demonstrate that you have already taken reasonable steps to secure a permanent post.

3. **How will I be asked to demonstrate that I have taken reasonable steps to secure a permanent post?**
   You may be asked to provide written evidence such as copies of application forms, letters and/or details of other contacts.

4. **Can I delay joining the one year guarantee?**
   You must join within 3 months of becoming registered with the NMC. Only in exceptional circumstances will this period be extended. Remember, if the period is extended, you will still have been expected to have taken reasonable steps to secure a permanent post through your own efforts.

5. **What if I can't find a job that fits my needs?**
   NHS operating division will continue offering you up-to-date lists of vacancies until you are successful in finding a job. Remember, that there may be a need to reconsider particular preferences as time goes on.

6. **When does the one year guarantee start?**
   The year starts as soon as you have accepted and taken up the post being offered to you.

7. **Will I have the same terms and conditions as any other employee?**
   Yes. You will be employed under Whitley Council Terms and Conditions of Service on the grade that is commensurate with the post and your experience. You will be subject to the same professional Codes of Conduct and behaviour that apply to all nurses and midwives who work in NHSScotland. You will have the same opportunities for Continuous Professional Development including any existing preceptorship/mentorship programmes for newly qualified members of staff. If you choose to resign from your post or where there is a breach of contract which results in termination of employment in accordance with employment law, the one year guarantee will no longer apply.

8. **Do I have to complete the one year employment period?**
   No. Although there is no requirement for you to complete the whole year, for it to be a period of consolidation for you and to get most benefit, it may be helpful to do so. It is not intended that the guarantee is transferable across employers, which means that if you move elsewhere the one year term only applies to the first and not to the new job.

9. **What happens at the end of the year?**
   It is anticipated that by the end of the year you will have secured a permanent post of your choice although this cannot be guaranteed.
Support for Newly Qualified Nurses and Midwives

NHS Education for Scotland is introducing a one-year national development programme for all newly qualified nurses and midwives employed in NHS Scotland. The programme aims to help newly qualified staff make the transition from student to full member of the health care team by supporting their learning and building their confidence during the first 12 months of employment.

Using new technology, as appropriate, the programme will help nurses and midwives develop skills for lifelong learning and by offering the option of rotational placement experience, will help these new health care professionals plan a rewarding career in NHS Scotland.

Extra Support for Newly Qualified Nurses Employed Directly into Primary Care

In the autumn of 2007, newly qualified nurses will be employed directly into primary care posts around Scotland and take part in a NES Development Initiative. These nurses will undertake the Newly Qualified Development Programme described above but will also be supported in their first year by a specially tailored mentorship programme which aims to consolidate skills and provide opportunities to experience exciting new ways of working as the NHS responds to current health care needs.

Building on the experience of this initiative, it is anticipated that there will be increasing opportunities for new nurses to find employment in primary care organisations over the next few years.