

Migration Advisory Committee (MAC): Partial review of the Shortage Occupation List: nurses; Call for Evidence

This response is from the Scottish Social Services Council (SSSC). We are the regulator for the social services workforce in Scotland. Our work means the people of Scotland can count on social services being provided by a trusted, skilled and confident workforce. We protect the public by registering social service workers, setting standards for their practice, conduct, training and education and by supporting their professional development. Where people fall below the standards of practice and conduct we can investigate and take action.

We:

- publish the national codes of practice for people working in social services and their employers
- register people working in social services and make sure they adhere to our codes of practice
- promote and regulate the learning and development of the social service workforce
- are the national lead for workforce development and planning for social services in Scotland.

The MAC's call for evidence stems from a request by the Home Secretary to examine whether there is a shortage of nurses or specific nursing job titles which it would be sensible to fill through non-European Economic Area (EEA) migration. Our response focuses on nurses working in care homes for adults (CHA) services in Scotland. For the reasons set out in our detailed response below we recommend that nurses (SOC 2231) should be placed on the Shortage Occupation List for Scotland so that employers of nurses in care homes CHA services are able to recruit from outwith the EEA if necessary.

Introduction

The information presented in this paper unless otherwise stated is drawn from the data underpinning the annual official statistics reports published by the SSSC on the social service workforce in Scotland. The most recently published was in August 2015. A copy of the report, the Scottish Social Service Sector: Report on 2014 Workforce Data (SSSC, 2015)¹, is available at,

¹ NB the data underpinning the annual report does not include data on the nationality or migration status of workers.

<http://data.sssc.uk.com/data-publications/22-workforce-data-report/99-scottish-social-service-sector-report-on-2014-workforce-data>.

The Job Function variable (see p.31 SSSC, 2015) was used to identify all staff classified as “registered nurses” (pp43-44, SSSC, 2015). This category should be coterminous with SOC code 2231, which is the focus of this call for evidence.

The majority (80%) of nurses employed in the social service sector in Scotland work in care homes for adults (CHAs) and it is this group of nurses for whom data is presented below. These nurses will play a critical role in the delivery of health and adult social care services in Scotland.

Demand for nurses

The total number of staff employed in CHAs in December 2014 was the highest since records began in 2008. During the period 2008 to 2014 the numbers employed fluctuated with a low of 52,430 in 2013 and a high of 54,520 in December 2014. This means that between 2013 and 2014 the number of staff employed in CHAs increased by 4.0%.

During the same period (2013-14) the total numbers of people employed as nurses in CHA services increased by 2.2% to 5,220. These figures indicate that while there was a growth in the numbers of nurses employed in CHAs that the growth did not keep pace with the overall growth in CHA staff during the same period.

At the same time as the growth in the numbers of staff there was a decrease in the numbers of actual CHA services, which is the continuation of a trend ongoing since at least 2008. In 2013 the total number of CHA services was 1250 and in 2014 it was 1224. As not all CHA services employ nurses we looked at the numbers that did and found under half (44%) employed nurses in 2013 and in 2014 it was 46%. While this is a slight rise it is possible that some of this is due to better reporting of individual staff records between the two years. In 2013 96.3% of services provided data on staff and that rose to 97.8% in 2014.

The data on the expansion of the CHA workforce does seem to point to an increased demand for nurses to work in care homes for adults in Scotland. The fact that the increase in the numbers of nurses didn't keep pace with the growth in the workforce at a time when there appears to have been a slight increase in the proportion of services employing nurses (or at the very least it has stayed constant) does suggest that the supply of nurses to the sector in 2014 was not what demand required.

In order to look further at whether there is evidence of a shortage we turn now to look at data on the retention of nurses in CHA services.

Stability Index

The stability index is a measure of the retention of staff. Like data on turnover the stability index can be calculated in various ways. For example as retention within a certain type of post, or by employer, or by the sub-sector or sector they work within.

Given the particular focus of this work the stability index has been calculated at the level of nursing posts in CHAs. This was done by identifying the length of time in post for all those identified as registered nurses in these services. All such staff who had been in post for one year or more were identified and then that total was expressed as a percentage of all those in CHA nursing posts one year earlier (i.e. December 2013). A similar calculation was undertaken for all staff in CHAs in order to benchmark the nurses' data.

Table 1 below presents that data for public, private and voluntary sector providers and does so both for those working as nurses and for the whole CHA workforce (including nurses).

Table 1: Stability index for nurses and all staff working in care homes for adults (CHAs) by employer type 2013-2014

	Public	Private	Voluntary	Total
Nurses (CHAs)	79.2	75.3	77.6	75.4
All staff (CHAs)	87.8	78.9	80.8	80.4

As can be seen from table 1 the stability index is lower for people employed in nursing than it is for all staff employed in CHAs (table 2 below further contextualises this data by showing the respective headcounts for staff as at 2014). This indicates that the rate of retention of nurses in CHAs is below the average rate for retaining staff within these services. As the table shows, this is the case whether the service is run by a public body, private provider or voluntary organisation. However, the table also shows that there are differences in rates of retention across the types of employers for staff in nursing posts and for all staff.

Table 2: Headcount of nurses and all staff working in CHAs by employer type 2014

	Public	Private	Voluntary	Total
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Nurses (CHAs)	40	4860	320	5220
All staff (CHAs)	7240	37830	9440	54520

The lower rate of retention of registered nurses relative to other CHA staff does seem to add to rather than undermine the picture of increasing demand for, and also possible shortage of, nurses. Having looked at data on retention of staff we turn now to look at data on vacancies and the ability of employers to recruit staff.

Vacancy data

This vacancy data is based on discussions with two of our main stakeholders, namely Scottish Care who represent independent providers of CHAs, and the Scottish Government's Health Workforce Directorate (SGHWD). Due to the timescales involved to produce this submission we have not been able to share full details of relevant evidence with them or they with us and we therefore ask that you consider these comments in the light of those stakeholders' final submissions.

Scottish Care have advised us of a survey they undertook of their members in September following an earlier consultation by the MAC this year. The timescale for that earlier consultation meant that this information was not able to be submitted for it. That survey found that 33% of the services surveyed had at least one current nursing vacancy. That is a high proportion of services to have a vacancy. For example the UK Commission for Employment and Skills (UKCES) report on the 2013 UK employer skills survey noted that just 15% of all establishments surveyed in Scotland had a vacancy (see table 2.1, UKCES, 2014).

We understand from the SGHWD that they have anecdotal evidence of bidding wars between providers of CHA services in relation to obtaining nurses from Nurse Agencies with in one instance a fee of £600 being paid for covering a single shift.

This further data, albeit limited in form, does appear to support the evidence of shortage. We think that it, combined with the evidence on CHA expansion and that on the retention of nurses does present evidence of a shortage of supply of nurses to care homes for adults. The extent to which this is related to actual numbers of nurses seeking employment or terms and conditions available in CHA services is unknown. However, in terms of the latter the scope for private or voluntary sector providers to make significant changes to pay is limited given the contractual agreements negotiated between representatives of private and voluntary organisations and the Convention of Scottish Local Authorities (COSLA). Given this evidence we turn now to the question of whether non-EEA migrants may provide a solution to the shortage of nurses.

Need for non-EEA nurses

The SSSC provides data on nurses employed in the social service sector each July to Scottish Government. This data supports the Scottish Government's annual workforce planning exercise for nurses. The workforce planning exercise is partly about identifying nurse training levels. Responsibility for workforce planning for nurses lies primarily with the NHS and Scottish Government. The numbers of nurses working in social services is approximately one-tenth the numbers working in the NHS in Scotland. The SSSC's latest workforce data report (published in December 2014) highlights a number of challenges in relation to employment of nurses in our sector. We intend to raise these issues as part of the next workforce planning exercise.

Given the nature of social services and care homes for adults in particular the option of reducing or curtailing services due to shortages of nurses is not realistic. As already mentioned, the flexibility that individual employers have to make significant changes to terms and conditions, in order to make the sector more attractive to prospective or existing employees is limited. Furthermore, it is not clear to us to what extent such changes would attract more staff as the problem does not simply appear to be one of terms and conditions as we understand that the NHS, which pays at a higher rate, also experiences difficulties in the recruitment and retention of nurses.

Conclusion

The demand for nurses to work in CHAs is not expected to decrease in the coming years. An ageing population in Scotland is anticipated to require increased levels of support from social services. In addition, as people are enabled to live at home as long as possible those who do enter a CHA service are likely to have greater needs for care and nursing than previously. In view of this and the current difficulties in the supply of nurses we are of the opinion that allowing employers to recruit from outwith the EEA provides an important avenue of support to the sector and therefore ultimately for those people who need its services. We therefore recommend that nurses (SOC 2231) should be placed on the Shortage Occupation List for Scotland so that employers of them in CHA services are able to recruit from outwith the EEA if necessary.

Bibliography

SSSC (2015) *Scottish Social Service Sector: Report on 2014 Workforce Data*, SSSC, Dundee

UKCES (2014) *UK Commission's Employer Skills Survey 2013: UK Results*, UKCES, London

Scottish Social Services Council
December 2015