

## BJN pre-print version

### Nurse migration and the EU – how are UK nurses prepared?

In June, voters of the United Kingdom (UK) will be asked to decide their response to the question: *Should the United Kingdom remain a member of the European Union (EU) or leave the European Union?* The debate has caused me to ponder on the globalisation of healthcare and freedom of movement for the nursing workforce. The Nursing and Midwifery Council (NMC) require education providers to inform nursing students about the 'principles of national and international health policy, including public health' (NMC 2010:73). But does this mean that UK nurses on completion of their registration programme can work anywhere abroad?

There is a shortage of nurses in developed countries such as the UK and increasing care need (Migration Observatory, 2016), resulting in the recruitment of migrant workers from inside and outside the EU. Nurses were added to the Government Shortage Occupation List this year (Migration Advisory Committee, 2016), meaning that nurses outside European Economic Area (EEA) will (in the short term at least) have applications to work in UK prioritised. For those from the EU, freedom of movement already applies.

So what does freedom of movement mean? This is viewed as a cornerstone of EU citizenship, enshrined in EU law (European Parliament 2016). In essence, it allows EU citizens free movement to seek work in other EU countries. As a nurse, the licencing authority in each country will also require verification of an individual's nurse registration status. In the UK, the NMC provides this for UK nurses wishing to work abroad, subject to a fee. From this year, the European Professional Card (EPC) is also available for nurses responsible for 'general care' (NMC 2016). This is designed to facilitate freedom of movement by simplifying the qualification recognition process for professionals across the EU. For nurses wishing to work outside the EU, verification is still required, but the relevant licensing board of the country or state, may have additional accreditation requirements.

One advantage of being an EU citizen is that EU states automatically recognise professional qualifications from EU members, providing their education programme meets an agreed minimum standard (NMC 2016). For nurses, this is the standard laid down in the EU directive 2005/36/EC (European Parliament, 2005). Adult-field nursing students will be familiar with this, as unlike colleagues undertaking programmes in the other fields (children, mental health and learning disabilities nursing), they are obliged to show compliance with this directive prior to registration. Across the EU and in many other countries, a specialist qualification (that is in a nursing field or specialism as opposed to general nursing) at first level registration is unusual. Some exceptions include Germany and Canada (Robinson and Griffiths, 2007). Consequently adult-field nurses *only* are recognised *automatically* as 'general nurses' in the EU. This programme includes studies and experience related to children's, mental health and learning disabilities nursing, although the interpretation of the directive is at the discretion of the education provider. This means that some countries may not recognise non-adult field registered nurses.

In a review of nurse education and regulation across countries from the Organisation for Economic Co-operation and Development (OECD), Robinson and Griffiths (2007) pondered the benefits and problems associated with first level generalist versus specialist nurse education. They considered how nurse education in the UK should be developed to facilitate the mutual recognition of qualifications in the light of an increased trend of international nurse mobility, as well as preparation of nurses to

meet future healthcare demands. For example it could be questioned whether fulfillment of the EC directive (2005) sufficiently prepares adult-field students for their role with different population groups. This theme was explored in the 'Shape of caring' review (Willis 2015); the key driver was flexibility of the nursing workforce and preparedness of staff to meet the holistic needs of all clients. Willis (2015) recommended a move to a two-year 'whole person' core programme for all nursing students, followed by one-year specialist education prior to registration. After consultation, Health Education England (HEE 2016) reported a mixed desire to move from direct entry specialist education to a more generic programme, recommending the need for further evidence to support such a change.

So in conclusion, UK adult-field nurses at least are able to work abroad in many countries and the process is made relatively easy through UK membership of the EU. However whether or not we stay or leave the EU, do our students have sufficient cross-field experience, compared with their EU colleagues? Is a return to general nursing required? To some the field divide may seem somewhat artificial; people suffering physical illness also have significant mental health issues; those with learning disabilities access all health care services and children and their families access services staffed by adult-field nurses. Food for thought perhaps, regardless of the outcome on June 23<sup>rd</sup> 2016.

## References

European Parliament (2005) Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on the recognition of professional qualifications. *Official Journal of the European Union*, L 255:22–142. Available at: <http://eurlex.europa.eu/LexUriServ/LexUriServ.do?uri=OJ:L:2005:255:0022:0142:EN:PDF> Accessed 13/6/16

European Parliament (2016) Fact sheets on the European Union. Available at: [http://www.europarl.europa.eu/atyourservice/en/displayFtu.html?ftuld=FTU\\_2.1.3.html](http://www.europarl.europa.eu/atyourservice/en/displayFtu.html?ftuld=FTU_2.1.3.html) Accessed 13/6/16

HEE (2016) Raising the Bar. Shape of Caring. : Health Education England's response. Available at: <https://hee.nhs.uk/sites/default/files/documents/Raising%20the%20Bar%20-%20Shape%20of%20Caring%20-%20HEE%27s%20response.pdf> Accessed 13/6/16

Migration Advisory Committee (2016) partial Review of the Shortage Occupation List. Review of Nursing. Available at: [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/510630/Partial\\_review\\_of\\_the\\_shortage\\_occupation\\_list\\_-\\_review\\_of\\_nursing.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/510630/Partial_review_of_the_shortage_occupation_list_-_review_of_nursing.pdf) Accessed 13/6/16

Migration Observatory (2016). Social care for older people and demand for migrant workers. Available at: <http://www.migrationobservatory.ox.ac.uk/policy-primers/social-care-older-people-and-demand-migrant-workers> Accessed 13/6/16

NMC (2010) Standards for Pre-Registration Nursing Education. Available at: <https://www.nmc.org.uk/globalassets/sitedocuments/standards/nmc-standards-for-pre-registration-nursing-education.pdf> Accessed 13/6/16

NMC (2016) Working outside the UK. Available at: <https://www.nmc.org.uk/registration/working-outside-the-uk/> Accessed 13/6/16

Robinson, S. and Griffiths, P. (2007) Nursing Education and Regulation: International Profiles and Perspectives. London: National Nursing Research Unit.

Willis, G. (2015) Raising the Bar. Shape of Caring. A Review of the Future of Education and Training of Registered Nurses and care Assistants. Available at: [https://www.hee.nhs.uk/sites/default/files/documents/2348-Shape-of-caring-review-FINAL\\_0.pdf](https://www.hee.nhs.uk/sites/default/files/documents/2348-Shape-of-caring-review-FINAL_0.pdf) Accessed 13/6/16

**Dr Janet Scammell, Associate Professor (Nursing), Bournemouth University**