

One Scotland Response

Migration Advisory Committee: Review of Tier 2 of the UK PBS

Scotland's Economic Strategy⁷, published in March this year, sets out an overarching framework for a more competitive and fairer Scotland, to create a more successful country, with opportunities for all to flourish, through increasing sustainable economic growth.

In ensuring this ambition is achieved, the Scottish Government is investing in Scotland's people at all stages of life to ensure a well-skilled, healthy and resilient population and an innovative, engaged and productive workforce. Scottish business must be able to develop and the Scottish Government is promoting innovation, skills and training, and international ambition across the Scottish economy. At the same time, it is vital that Scotland can take advantage of international opportunities and participate in a globalised world, which is integral to building a stronger, fairer and more prosperous Scotland. Part of this is being able to attract and retain international talent to help Scottish business develop and grow.

The Strategy sets out the importance of a One Scotland approach to deliver on the Scottish Government's ambitions, with all public sector agencies working together, as well as the private sector, the third sector and our universities and colleges. This response has been prepared with input from Scottish Enterprise and Skills Development Scotland (SDS). Creative Scotland and Visit Scotland have also been consulted in the drafting of this response.

Background: The Scottish Picture

Scottish business and investment receives significant benefits from international talent from outside the UK and European Economic Area (EEA). During 2014, Scotland attracted 80 separate foreign investment projects, with almost half of these coming from the United States. Over the last 10 years, Scotland has secured over 37,000 jobs from Foreign Direct Investment (FDI), a narrow second only to London and well ahead of all other parts of the UK.⁸ In July, the First Minister announced that the last year has been a record year for Inward Investment in Scotland. Scottish Development International (SDI) has directly helped to generate over £433 million of planned inward investment for Scotland creating or safeguarding 9,659 planned jobs (3,192 of these are considered as high value⁹).¹⁰

However, Scotland has demographic challenges. Although the population of Scotland has increased each year since 2000 and is now at its highest ever, this growth is heavily dependent on migration and for the latest year of data, population

⁷ Scotland's Economic Strategy, Scottish Government, March 2015, <http://www.gov.scot/Topics/Economy/EconomicStrategy>

⁸ Another great year – but time to reflect on how the UK can stay ahead of the pack?, Ernst and Young's Attractiveness Survey, UK 2015: <http://www.ey.com/UK/en/issues/Business-environment/2015-UK-attractiveness-survey>

⁹ Over £35,800.

¹⁰ First Minister announces record year for inward investment, Scottish Enterprise media centre, 13 July 2015, <http://www.scottish-enterprise.presscentre.com/Press-releases/First-Minister-announces-record-year-for-inward-investment-78a.aspx#downloads>

growth for Scotland has been lower than that of the EU15 countries. Scotland's demographic needs are different to the rest of the UK's and controlled migration is a vital component of Scotland's population growth. It is important to Scotland's future, both in terms of contributing to sustainable economic growth and mitigating the effects of demographic change.

To prevent adverse impacts on Scotland's economic growth performance it is important that Scotland is able to continue to attract people of working age to Scotland and make the best use of Scotland's potential labour supply through increasing employment.¹¹ Restricting Scottish employers' access to skills from outside of the UK and EEA risks damaging the attraction of Scotland as a place to invest, live and work, and damaging Scotland's ability to address these demographic challenges. As is evidenced by independent research around Scotland's demographic issues, tightening of the labour market has adverse consequences for employment levels, growth and competitiveness in Scotland.¹²

It is therefore vital that Scottish business has access to a pool of talent and skills to enable growth and development and to react timeously to changes and demands of Scotland's regions and sectors. And once in place, business needs to be able to retain this talent and skill.

Those individuals who come to Scotland with leave to remain under Tier 2 of the UK Points Based System (PBS) bring significant value to Scottish business and the Scottish economy. They do not only contribute financially to the economy; they also contribute on a cultural and social level. A UK Government study¹³ published earlier this year found overwhelming evidence of the positive impact that migrant workers have on individual businesses, bringing 'culturally unique and complementary skills and knowledge' and up-skilling colleagues 'leading to improvements in process and innovation and securing new work for their employers'.

Skill Shortages: Scotland's own challenges

The Scottish Government recognises that there are skill shortages in Scotland and is working hard to address these. As highlighted in Scotland's Economic Strategy, the Scottish Government places a strong focus on strengthening and developing the skills of Scotland's people by promoting innovation, skills and training across the Scottish economy. For example, the Scottish Government have supported higher than ever numbers of new Modern Apprenticeship opportunities - this is one way to target predominantly youth employment opportunities and allow employers to grow

¹¹ *Scotland's Purpose, Population, Scottish Government*, <http://www.gov.scot/About/Performance/scotPerforms/purpose/population>

¹² *Scotland the Grey: A Linked Demographic – Computable General Equilibrium (CGE) Analysis of the Impact of Population Ageing and Decline*, K.Lisenkova et al., *Regional Studies*, Vol. 44.10, pp. 1351 – 1368, December 2010.

¹³ Department for Business, Innovation and Skills (2015) *The Impacts of Migrant Workers on UK Businesses*, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/406760/bis-15-153-impacts-of-migrant-workers-on-uk-business.pdf

the skills they need in their workforce. However, as well as the efforts that are being made by the Scottish Government and public agencies to develop the skills of our workforce, it is vital that skills and talent can be attracted and retained to fill vacancies which cannot be filled by resident workers. Restricting access to this pool of talent and skills outside of the UK is potentially damaging to Scotland's businesses, industries and economy.

Skills Development Scotland: Skill Investment Plans

Through the development of SDS's Skills Investment Plans (SIPs) and their continued engagement with employers across Scotland's key sectors, SDS is aware of the use of migrant labour in addressing some of the skills challenges facing employers in these sectors. Therefore, SDS's contribution to the call for evidence focusses largely on the evidence gathered from the SIPs which seeks to show the importance of migrant labour and that, essentially, employers in the various sectors plan to use migrant labour, along with a range of other measures to overcome the recruitment challenges they face.

ICT & Digital Technologies SIP

The ICT & Digital Technologies SIP explains how *"inward investment and indigenous company growth from within the sector is already creating an increased demand for digital technology skills."*¹⁴ The scale of this future demand is significant, with the *"number of people employed in ICT & Digital roles forecast to increase by 15% to 84,000 by 2020."* This becomes even more significant in light of the fact that the *"profile of the current workforce is ageing,"* with the SIP reporting that *"the proportion of 16 to 24 year olds working in Scotland as IT & Telecoms professionals is half that of other occupations."*

In terms of some of the areas of future occupational demand, the SIP states that: *"Looking to the future, job growth is expected to be particularly concentrated in areas such as software development, software engineering, and web development. Demand for graduates is also predicted to increase as businesses continue to look to employ candidates straight from university."* The SIP then also goes on to say that *"despite the health of the sector and the attractive career prospects it offers, many businesses are currently reporting challenges in recruiting enough highly skilled individuals to meet their growth ambition."*

Essentially, in light of the scale of future demand required to meet industry need coupled with the ageing of the existing workforce, the challenge facing this industry is one of ensuring that employers within the sector have access to the *volume* of skilled candidates they need to meet demand in the future. The SIP goes on to explain how this is not only a challenge for Scotland's ICT & Digital sector but also for other countries across the world, including Europe and the USA. In Ireland, *"the under supply of talent is an issue for the Irish economy and more than half of their recent high level ICT and digital technology skills needs have been filled through*

¹⁴ *Skills Investment Plan for the ICT & Digital Technologies Sector*, Skills Development Scotland, 2014, http://www.skillsdevelopmentscotland.co.uk/media/987939/ict_digital_technologies_sector_skills_investment_plan.pdf

inward migration." This highlights the fact that Scotland has to compete with other countries for access to skilled migrant labour.

In addition to this, the Financial Services SIP¹⁵ highlights the importance of digital skills to the sector and identifies an action to ensure the ICT & Digital Technologies SIP is aligned to the requirements of the Financial Services industry. Specific skillsets are identified within the Financial Services SIP, including analytics, software development, financial security, anti-fraud. Therefore, it should be noted that, migrant skills in this area can also support other industries such as Financial Services.

The ICT & Digital Technologies SIP sets out a wide-ranging plan of action to address the skills challenges faced by the industry over the short, medium and long term. As such, some of the measures are concerned with providing immediate short term solutions whilst others are more focussed on ensuring that the correct infrastructure is in place to ensure that supply meets demand in the coming years. There are a wide range of measures which include developing an industry-led talent academy model, supporting the uptake of CPD and workforce development as a means of up-skilling the current workforce as well as raising the attractiveness of the industry and broadening the future talent pipeline for ICT and digital technology skills at school, college and university level.

However, international talent attraction also plays an important role in the mix of measures being put in place to address the challenges faced by the industry. Within the action plan, the ICT & Digital Technologies SIP sets out an intention to work with employers to establish a package of support to support ICT and digital technology businesses to recruit overseas talent. Secondly, there is also an action to work with partners to deliver a targeted marketing strategy including jobs fair events and promotional materials aligned with industry identified skills shortages. The expected outcome from this is that there will be a reduction in the number of ICT and digital technology businesses citing unfilled vacancies.

Energy Skills Investment Plan

Within the Energy sector, the refreshed Energy SIP, launched in 2015, states that the industry can expect an *"ongoing significant demand for new labour and that in Oil & Gas, and grid transmission, this demand is largely to replace people who will retire or leave the sector, while in renewables and Carbon Capture and Storage (CCS) it is to fill new posts in growing industries."* The SIP then goes on to state that there is anticipated to be significant demand for engineering and related disciplines at graduate and technician (apprentice) level.

The first edition of the Energy SIP, launched in 2011, points to the use of skilled migrant labour to address some of the identified skills challenges in the statement *"managed migration may also create a possible supply, especially to meet specialist skills shortages."*¹⁶

¹⁵ *Skills Investment Plan for Scotland's Financial Services Sector*, Skills Development Scotland, 2013, <http://www.skillsdevelopmentscotland.co.uk/resources/skills-investment-plans/>

¹⁶ *Skills Investment Plan for the Energy Sector*, Skills Development Scotland, 2011, http://www.skillsdevelopmentscotland.co.uk/media/1333297/sds_energy_sip_digital.pdf

The refreshed Energy SIP (2015) maintains an element of this within its action plan. The document includes an action area around "*understanding skills gaps in terms of emerging technologies including innovation, product development and internationalisation*" and one of the particular action areas within this is around "*helping employers to overcome the barriers to international talent attraction,*" through the delivery of immigration information workshops and one to one support to employers.

Life Sciences

The Life Science sector is another one of Scotland's key sectors which uses international labour to fill vacancies. The Life Sciences SIP, published in 2014, goes on to say that this is the case particularly for those who are "*looking for candidates with higher level business/commercial and/or scientific/technical skills and experience.*" One of the reasons behind this is that "*some employers report challenges finding candidates with the right blend of skills within the local labour market.*" Another potential reason behind this is that "*many employers in the Life Sciences sector work in specialised or niche areas which demand a multi disciplinary set of skills.*"

As a result of this, there are a number of actions within the Life Sciences SIP which are focussed on widening the talent pool by attracting talent from outside of the country to meet the skills needs of Scottish employers. There are actions specifically relating to "*Promoting Scotland globally as a Life Sciences career location of choice*" which includes promoting Scotland's Life Sciences sector at international recruitment events, delivering short seminars to SMEs to introduce them to the UK immigration system and becoming a sponsor and providing immigration advice and support to life science employers. The actions taken around the use of migrant labour sit within a wider suite of actions targeted at the indigenous (potential and existing) workforce. These include increasing uptake of Modern Apprentices, providing graduates with technical lab skills training and raising the attractiveness of the sector to new recruits.

Food & Drink and Tourism

Although not specifically mentioned in the respective SIPs, the use of migrant labour is also well documented in both the Food & Drink and Tourism sectors in Scotland. In Tourism, a recent report by People 1st¹⁷, reveals that "*without migrant workers, employers [in that sector] would be faced with significantly higher numbers of hard-to-fill vacancies.*"¹⁸ The report goes on to say that as the sector is unable to attract sufficient number of skilled workers, a number of employers hire international workers. The most common roles migrants undertake are kitchen and catering assistants, chefs and waiting staff.

¹⁷ People 1st is the skills and workforce development charity for employers in the hospitality, tourism, leisure, travel, passenger transport and retail industries focusing on transforming skills in the sector through the development of effective recruitment, training and talent management solutions.

¹⁸ Migrants in the Hospitality Industry, People 1st, 2014

In Food & Drink, the use of migrant labour in the Food & Drink manufacturing sector is also fairly commonplace. A report carried out by Improve, the sector skills council for the Food & Drink Manufacturing sector, highlighted that migrant workers play an important role within the Food and Drink Manufacturing workforce and are highly valued by employers across Scotland and the wider United Kingdom.¹⁹ The research highlights that the main reasons why employers in these industries chose to use migrant labour to fill posts included *lack of local labour* (26%); *the roles that migrant apply for* (21%); and *job roles suit migrant workers* (17%). Although many of these posts may be lower skilled, there are a small number which are management or professional roles.

Summary

In summary, the use of migrant labour is one of a range of different measures which is utilised by employers across Scotland's key sectors to address skills challenges. Migrant labour can be used to fill roles which require specialist skills and/or experience and where these skills do not exist in local labour markets. In addition, migrant labour can also be used when there are challenges around attracting a sufficient volume of candidates required to meet employer demands.

Where employers have a particular reliance on migrant labour for specialist/niche skills and experience or supply of candidates into a specific occupation(s), any potential reduction in skilled migrant labour could have an impact on the employers within this sector and ultimately, the sector as a whole. Given that the key sectors have been selected for their role as drivers of growth in Scotland, any policy move which may reduce the ability of employers in these sectors to overcome skills issues could have a detrimental effect.

Scottish Government Experience of the Tier 2 route

The Scottish Government itself relies on Tier 2 to fill particular roles, some of which are particularly specialist. The Scottish Government are concerned that restricting Tier 2 to skill shortages and highly specialist experts would have a negative impact on the capacity and capability of the Scottish Government civil service. The length of advertising to the UK Resident Labour market and salary thresholds are two particular areas of concern.

In relation to advertising to the UK Resident Labour market, Civil Service Commission Recruitment Principles mean that the Scottish Government already externally advertises posts widely to ensure fair and open competition. As there is also already a reasonably lengthy process involving internal and Other Government Departments advertising before external advertisement, the stipulation on 28 days builds in significant additional delay in bringing in essential skills.

Regarding salary threshold levels, Civil Service salary scales are relatively modest and in some parts of the UK labour market they are insufficient to attract suitably highly skilled staff. Restricting access to non-EU migrants would further undermine

¹⁹ The Role of Migrant Workers in the Food & Drink Manufacturing Industry in Scotland, CI Research on behalf of Improve, 2008

our capacity to source key capabilities. For example, Transport Scotland Agency has difficulties in attracting UK residents for their Civil Engineering roles (Higher Executive Officers (HEO)/B2). The current salary threshold for a Civil Engineer is £30,000 but Transport Scotland Agency's starting salary is much lower thereby affecting the ability to recruit roles at the HEO/B2 level. Transport Scotland has also identified that the calibre of candidates via the Tier 2 route is usually quite high.

Focusing on particular skill shortages

Given the closure of Tier 1 (General) for new applications in April 2011 and closure of Tier 1 (Post Study Work) in April 2012, it is perhaps not surprising that since 2011 there has been an increase in entry clearance and visa extension applications, as Tier 2 has become the main route for employers to access the skills that they need from outside the UK and EEA. It is also therefore not surprising that over this period, there has also been a gradual increase in organisations obtaining a sponsorship licence.²⁰ In many cases UK employers will have completed the Resident Labour Market Test (RLMT) before being able to grant a certificate of sponsorship, which illustrates the demand and importance of the route to ensure that employers are able to access the skills that they need from outside the UK and EEA.

It would therefore be concerning if Tier 2 was further reduced to a particularly restrictive route, for only those who are filling occupations that have a 'genuine' skill shortage or who are a highly specialist expert. This would prevent all other UK occupations from being filled by Tier 2 applicants. As can be seen from Home Office Statistical Sponsorship Data, a wide range of industry types make use of and issue sponsorship certificates to those applying under Tier 2²¹. It would be detrimental to those employers looking for skills for occupations that do not experience shortages, as there are very limited opportunities within other Tiers of the UK PBS to recruit from outside of the EEA.

The most recent UK Employer Skills Survey Report published last year in January found that there was a higher level of skill shortages in Scotland than the rest of the UK. It was found that 25% of all vacancies in Scotland were skill shortages in 2013. This was a significant increase since 15% in 2011 and higher than that reported for the rest of the UK; England (22%), Wales (20%) and Northern Ireland (19%).²²

A Scottish Government Social Research Report from 2011 on Skills in Scotland noted that skill shortages as a proportion of all vacancies is higher in smaller establishments than larger ones. The Report noted that it would appear that large establishments are more effective in filling vacancies as larger establishment recruitment methods may be more sophisticated or better resourced than those of smaller establishments. "Larger establishments may also be more attractive to potential candidates, as there may be a perception of increased job security and

²⁰ Home Office National Statistics: *Work, Immigration Statistics April to June 2015*, UK Government, 27 August 2015, Table cs_01_q

²¹ Home Office National Statistics: *Work, Immigration Statistics April to June 2015*, UK Government, 27 August 2015, Table cs_03 and cs_04

²² 'UK Employer Skills Survey Report', UK Commission for Employment and Skills, January 2013, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/303495/ukces-employer-skills-survey-13-executive-summary-81.pdf.

better career prospects and are thus better placed to compete for the best candidates".²³

As at March 2014, Small and Medium-sized Enterprises (SMEs)²⁴ accounted for 99.3% of all private sector enterprises operating in Scotland (332,720 in total) and provided an estimated 1.1 million jobs. There were an estimated 335,015 private sector enterprises. 98.2% of these enterprises were small (0 to 49 employees); 3,780 (1.1%) were medium-sized (50 to 249 employees) and 2,295 (0.7%) were large (250 or more employees). These percentage shares have remained relatively stable since 2000. Small enterprises alone accounted for 42.3% of private sector employment.²⁵ Scotland's private sector is therefore heavily made up of smaller establishments.

In Scotland, SMEs account for a larger share of private sector employment in rural areas, compared to urban areas. SMEs accounted for 80.5% of private sector employment in remote rural areas compared to 69.4% in accessible rural areas and 45.9% in the rest of Scotland. In remote rural areas, the 'Agriculture, Forestry & Fishing' industrial sector had the largest share of private sector employment (18.7%), in accessible rural areas the Manufacturing sector was largest (14.9%) and in the rest of Scotland, the 'Wholesale, Retail and Repair' sector was largest (20.9%).²⁶

Given this picture of the make-up of business in Scotland and the evidence that skill shortages may be more acute in smaller businesses, there is a risk that restricting the Tier 2 route to particular skill shortages may have an acute impact on some businesses in Scotland. The suggestion of restricting Tier 2 to focus on 'genuine' skills shortages is concerning, as it is not clear how this would be defined. If a 'genuine' test fell to be decided by Home Office decision makers, this may be contrary to the intended benefits of the UK PBS; to have an objective application process.

Sunsetting

It would be very concerning if a restriction was placed on how long an occupation could be classed as having a skill shortage. It is questionable whether it is realistic to set a limit on how long an occupation can be classed as a skill shortage. SDS note that in addressing a skill shortage there are numerous steps which must be taken, one of which involves looking at current provision on the supply side and establishing how it can better respond to business demand. Once the supply side is in a position to provide an adequate volume of people with the right skills, or if demand for these occupations begins to fall, then there should no longer be a skills shortage. However, it is difficult to see how a set time for each occupation could take these factors into account.

²³ 'Skills in Scotland 2010', Employability, Skills and Lifelong Learning Analysis and Education Analytical Services Division, Scottish Government Social Research, 2011, page 16, <http://www.gov.scot/Resource/Doc/344028/0114449.pdf>.

²⁴ Have under 250 employees.

²⁵ *Businesses in Scotland 2014*, Scottish Government National Statistics, 2014, <http://www.gov.scot/Resource/0046/00462532.pdf>

²⁶ *Ibid.*

Skill shortages can exist for short or longer periods of time and the UK immigration rules and any list of shortage occupations needs to be adequately flexible to recognise and react timeously to changes as and when they arise within different sectors. It is important that any review system allows for all sectors and industries to be equally represented, so that it is not only the loudest voices who succeed in articulating their needs.

It is noted that the current approach is that the Migration Advisory Committee are asked periodically by the UK Government to review the occupations and job titles for inclusion on the Shortage Occupation List. It is understood that the UK Government chooses the occupations to be reviewed on the basis of information and evidence that it receives. It is not clear however who the UK Government receives the information and evidence from nor how the Government is made aware of this information and evidence. Further, it is not clear what level of information or evidence is needed for the UK Government to decide which occupations and job titles should be reviewed. It would be beneficial to have a system where any list of shortage occupations is regularly reviewed in an open and transparent way, making clear what evidence is required for a review to take place and how that information should be made available to those conducting the review.

It may also be beneficial for any review of what is classed as a shortage occupation to involve organisations and bodies from those sectors, as they will have the knowledge and experience required to determine whether there is a 'genuine' skill shortage.

Financial Thresholds: Regional differences

Further to the Scottish Government's response to the MAC's Call for Evidence on financial thresholds, Scottish Government officials have considered in further detail the impact in Scotland of increasing Tier 2 financial thresholds to higher percentiles.

It has unfortunately not been possible to assess the full impact of proposed changes to the minimum salary thresholds using official sources of information. There are no Scotland specific statistics for current applicants available from the Home Office to enable the likely scale and impact of the changes to be assessed. The Annual Survey of Hours and Earnings (ASHE) is also unfortunately unable to provide statistics on the numbers of jobs at given earnings percentiles to allow an assessment of the number of jobs affected by any proposed changes in Scotland.

However, consideration has been given to the available data from ASHE. Overall, there appears to be little difference in earnings distributions between Scotland and the English regions (London excepted). However, for the top earners, the Scottish and UK earnings distributions appear to be more pronounced, particularly at the 90th percentile (Table 1).

Table 1: Gross Annual pay – full-time employees, Scotland, UK 2014

	70 th percentile	75 th percentile	80 th percentile	90 th percentile
Scotland	£34,542	£36,804	£39,899	£50,000
United Kingdom	£35,609	£38,359	£41,734	£54,082
Difference (Scotland minus UK)	-£1,067	-£1,555	-£1,835	-£4,082

Source: Office for National Statistics, Annual Survey of Hours and Earnings

Any proposed changes at the top-end of the earnings distribution in particular should therefore be carefully considered with regards to the impact in Scotland.

Considering ASHE material from a different angle the difference between Scotland and UK gross annual earnings can be viewed at each of the 25th, 50th and 75th percentiles for different occupations (Table 2 below).

Table 2: Difference in Gross Annual Pay (£'s), Scotland minus UK at 25th, 50th and 75th percentile, 2013

	25 th percentile	50 th percentile	75 th percentile
Scotland, Managers, directors and senior officials	-865	-1,840	-3,836
Scotland, Corporate managers and directors	-439	-1,803	-4,417
Scotland, Other managers and proprietors	-719	-122	-1,844
Scotland, Professional occupations	-494	-1,999	-3,241
Scotland, Science, research, engineering and technology professionals	-989	-1,231	-696
Scotland, Health professionals	-1,047	-830	-1,595
Scotland, Teaching and educational professionals	2,346	-1,915	-1,881
Scotland, Business, media and public service professionals	-1,894	-2,863	-6,739
Scotland, Associate professional and technical occupations	-407	-1,370	-2,566
Scotland, Science, engineering and technology associate professionals	224	253	-790
Scotland, Health and social care associate professionals	-345	-849	246
Scotland, Protective service occupations	n/a	-2,064	-1,082
Scotland, Culture, media and sports occupations	-2,268	-1,544	n/a
Scotland, Business and public service associate professionals	-937	-2,105	-3,512
Scotland, Administrative and secretarial occupations	-273	-939	-1,000
Scotland, Administrative occupations	-227	-859	-1,016
Scotland, Secretarial and related occupations	-584	-1,736	-2,649
Scotland, Skilled trades occupations	130	275	-572
Scotland, Skilled agricultural and related trades	n/a	50	n/a

Scotland, Skilled metal, electrical and electronic trades	1,699	1,052	1,278
Scotland, Skilled construction and building trades	857	-229	-1,864
Scotland, Textiles, printing and other skilled trades	-688	-1,370	n/a
Scotland, Caring, leisure and other service occupations	785	1,262	719
Scotland, Caring personal service occupations	801	1,440	1,039
Scotland, Leisure, travel and related personal service occupations	738	239	-1,840
Scotland, Sales and customer service occupations	-420	-81	-343
Scotland, Sales occupations	-85	-119	-572
Scotland, Customer service occupations	-1,011	64	-502
Scotland, Process, plant and machine operatives	172	22	-118
Scotland, Process, plant and machine operatives	145	937	1,196
Scotland, Transport and mobile machine drivers and operatives	210	-1,070	-1,234
Scotland, Elementary occupations	102	-148	574
Scotland, Elementary trades and related occupations	514	646	369
Scotland, Elementary administration and service occupations	-57	-505	485

For example, at the 50th percentile, 'Managers, directors and senior officials' earned £1,840 more at a UK level than compared to Scotland alone. The striking nature of the table is the variation across occupation types, and that for top earners (75th percentile), the difference between Scotland and the UK is pronounced across many of the occupation types, in particular for 'Corporate managers and directors', 'Science, research, engineering and technology professionals', 'Associate professional and technical occupations', 'Science engineering and technology associate professionals', 'Administrative and secretarial occupations' and 'Skilled trades occupations'.

These differences in salary levels are particularly important when looking at the SIPs published by SDS, which show that particular sectors are facing challenges in accessing the skills needed to fill these types of occupations. For example, the SIP for Scotland's Energy Sector²⁷ states "*Research suggests that many companies in the Oil & Gas sector have experienced difficulties trying to recruit design engineers, mechanical engineers, engineering and professional engineering occupations. This is supported by a recent survey of Oil & Gas firms based in Aberdeen City and Aberdeenshire which found that more than half of all contractors operating in the sector were having difficulties recruiting managerial, professional and technical staff.*" There are also challenges around the recruitment of senior level staff within Life Sciences and Chemical Sciences. In the SIP for Scotland's Chemical Sciences

²⁷ Skills Investment Plan For Scotland's Energy Sector, 2nd Edition, Skills Development Scotland, 23 March 2015, http://www.skillsdevelopmentscotland.co.uk/media/1333297/sds_energy_sip_digital.pdf

Sector²⁸, it is stated that “*technical and professional occupations are the hardest to fill*” and the “*supply of science and engineering skills is problematic due to the highly competitive labour market.*”

Careful consideration would therefore have to be given to any blanket increase in financial thresholds which does not take into account the inherent variation across occupation types.

It is also important that the impact of any increase to salary thresholds on those individuals who are already in the UK with an initial grant of 3 years leave to remain and making an extension application, is considered carefully. During those 3 years, employers will have invested significant time and money in training those individuals and any additional barriers which would prevent employers from retaining those skills and experience would be very concerning. Putting in place new salary thresholds at the renewal stage will cause uncertainty for employers, as if salary thresholds are increased, or indeed if those occupations covered by Tier 2 are restricted to a narrow list of shortage occupations, employers may face losing an important employee if they cannot meet the new requirements. This would be despite the fact that employers will have already invested time and money in completing the sponsorship licence process and recruiting the skilled individual needed for that role.

Financial Thresholds: accessing graduate talent

As well as the need for Scottish businesses to access the international skills that they need, there also needs to be an effective route for international graduate talent. Given the absence of a specific post study work route in the UK, it is vital that Scotland are able to retain the talent that comes out of Scottish Universities and Colleges. Increasing salary thresholds may reduce the ability of employers to employ graduates, whether from within the UK, or from abroad, as they may be on lower graduate salary levels. The Post Study Work Working Group, established by Scottish Ministers in 2014, noted in their Report published earlier this year that the current post study work offer in the UK is not sufficient to meet the needs of employers in Scotland. *‘Instead the reality of the current system is firstly it leads to a ‘brain drain’ of highly skilled talent from Scotland as there is no effective pathway for international graduates to gain the necessary work experience to qualify for a Tier 2 visa’*.²⁹

The Group also noted in their Report that there are a number of barriers which effectively prevent graduates from switching from Tier 4 into Tier 2, one of which is the starting salary requirements. It is therefore vital that restrictions on the Tier 2

²⁸ *Skills Investment Plan For Scotland’s Chemical Sciences Sector*, Skills Development Scotland, 28 October 2014, http://www.skillsdevelopmentscotland.co.uk/media/1266192/chemical_sciences_digital_skills_investment_plan.pdf

²⁹ *Post Study Work Working Group: Report to Scottish Ministers*, March 2015, publication facilitated by Scottish Government, <http://news.scotland.gov.uk/imagelibrary/downloadmedia.ashx?MediaDetailsID=3513&SizeId=-1>

route do not further restrict the pathway for talented graduates who may initially be paid lower salaries to transition from graduation into employment under Tier 2. Putting in place the RLMT for those switching from Tier 4 to Tier 2 and including them in any Tier 2 certificate of sponsorship quota will only add to the barriers for graduates to gain graduate skilled work experience after gaining their qualification.

Skills levy

It would be very concerning if further measures are introduced which make it more difficult for employers to recruit the individuals they need for their business. It is difficult to provide extensive comment on this proposal due to the limited information available. It is not clear at this time if the proposal will apply to public and private employers. In particular however, there is concern about the impact that any skills levy may have on smaller business in Scotland. There is a risk that putting in place a skills levy may discourage businesses in recruiting individuals under Tier 2. A skills levy may be another burden on smaller businesses, who do not have the experience and/or resource to be a sponsor and see the current system as a barrier to accessing international skilled talent.³⁰ Given the nature of Scotland's private sector being heavily made up of smaller establishments, the financial impact of any skills levy on smaller businesses may be felt more acutely in Scotland.

Tier 2 Dependants

Restricting the right to work for dependents of Tier 2 visa holders may be detrimental not only to the individuals concerned, but also to Scottish business, the economy and to the communities in which those individuals live. There is the obvious risk that if the dependent of a Tier 2 visa holder cannot work, the family may be deterred from coming to the UK in the first place, which may reduce the pool of talent available to UK employers and may impact on inward investment. The introduction of further barriers which add to creating a negative perception to working or investing in the UK would be very concerning.

Restricting the right to work for dependents may also have a negative impact on families as it would lower their level of income. At the moment, the minimum salary threshold for those on a Tier 2 (General) visa is £20,800, although the MAC noted in their most recent advice to the UK Government that there is an argument for increasing this minimum threshold. There is a risk that larger families with children would be particularly and unfairly impacted by any removal of this right to work.

It is vital that the highly skilled and talented individuals that the Scottish labour market needs, are encouraged to come to and be welcomed in Scotland. Part of this is enabling those individuals to integrate during their time in Scotland. There is considerable evidence that suggests that employment is a key factor in enabling individuals to integrate into their host communities. There is also evidence to suggest that lack of employment amongst the migrant population can lead to poor health, social isolation and loss of skills.

³⁰ Ibid.

EU policy on the integration of migrants supports employment as 'a key part of the integration process' which is 'central to the participation of immigrants, to the contributions immigrants make to the host society, and to making such contributions visible'³¹. Participation in the labour market is regarded as 'one of the best and most concrete ways to integrate into society'³².

Indeed, the links between employment and positive health are well established. There is considerable evidence to suggest that employment is associated with better physical health, and increased self-esteem and self-confidence while unemployment is associated with poor health and increased anxiety and depression³³. Exclusion from the labour market can lead to de-skilling, a process 'where skills and qualifications gained through earlier training and employment are either not used or recognised after migration, resulting in downward occupational mobility and potential loss of skills'³⁴. Dependents themselves may hold skills and experience that Scottish businesses and employers can access and stimulate the economy further. Not being able to work could result in a loss of their skills, which has been found to not only negatively affect mental health, but also result in a loss of social status and personal and professional identity amongst skilled migrants³⁵.

Tier 2 (Intra-Company Transfers)

The risk with tightening the Tier 2 (ICT) route is that this may cause delays in businesses accessing the skills that they often urgently require.

Those who have had input to this response are not aware of any evidence of abuse under the Tier 2 (ICT) route. The fact that there has been an increase in the number of visas issued under this route does not necessarily mean that the route is being abused. The route is advantageous for business as it enables employers to access the skills that they need without having to complete the RLMT. Tightening of this route may impact negatively on the ability of businesses to respond to particular problems by accessing those best placed to address the issue.

Tier 2 (General) Caps on Certificates of Sponsorship

It is important that various sectors in Scotland, within both the public and private spheres, can attract and retain a sustainable supply of workers to meet Scotland's current and future needs. There is concern that measures, including the monthly cap of restricted certificates of sponsorship, create barriers to achieving this.

³¹ 'Common Basic Principles for Immigrant Integration Policy in the European Union', Justice and Home Affairs Council, November 2004.

http://www.consilium.europa.eu/uedocs/cms_data/docs/pressdata/en/jha/82745.pdf. Reaffirmed by the European Council's conclusions, June 2014

³² European Agenda for the Integration of Third-Country Nationals, European Commission, July 2011. http://ec.europa.eu/dgs/home-affairs/news/intro/docs/110720/1_en_act_part1_v10.pdf

³³ Jennifer Asanin Dean & Kathi Wilson (2009) 'Education? It is irrelevant to my job now. It makes me very depressed ...': exploring the health impacts of under/unemployment among highly skilled recent immigrants in Canada, *Ethnicity & Health*, 14:2, 185-204, DOI: <http://dx.doi.org/10.1080/13557850802227049>

³⁴ Karen Wren and Paul Boyle. "Migration and work-related health in Europe." *National Institute for Working Life, Stockholm* (2001). http://nile.lub.lu.se/arbarch/saltsa/2002/wlr2002_01.pdf

³⁵ Dean & Wilson 2009

With the monthly cap being reached in the last three months, when considering applications, UK officials have considered the salary-based points to determine who falls within the monthly cap³⁶, with preference given to applications with the highest scores. This has resulted in those individuals who are paid the highest salaries being successful in each capped month. There appear to be two impacts in raising the points threshold in this way to determine who falls within the cap. Firstly it creates uncertainty for applicants and also employers, and secondly it can increase the challenges that employers face when trying to access the skilled individuals that they need. Employers who pay the highest salaries are those who are successful in accessing the skilled individuals that their business and service needs.

The cap may in particular affect inward investors who face uncertainty in whether they can bring to Scotland and access these skills in time. It may result in some employers increasing salary levels to ensure that their employee meets any increase in salary threshold that month. This however will mean additional time and delay in establishing the skills in Scotland that the inward investors need at that time. This may present a disincentive for inward investors and may impact on investment in Scotland.

It is vital that within a capped month, Tier 2 restrictions do not create another barrier to Scottish employers accessing the talent and skills they need from outside the UK to fill jobs in key growing sectors.

Conclusion

It is essential that Scotland has an immigration system which enables businesses to attract and access the skills and talent needed to boost Scotland's long-term competitiveness and to support Scotland's Economic Strategy.

As part of this, Scotland's international image must not be damaged by further restricting the UK immigration system. If each of the measures suggested in this Call for Evidence are implemented, the opportunity for international graduates to switch to Tier 2 will be reduced, those individuals with existing leave to remain may be unable to extend despite considerable time and money being invested in their training, dependents' right to work will not be automatic and there will be additional costs to employers. Each of these factors will impact on Scotland's image as a place to work and invest, and barriers that restrict the size of the pool of potential talent and discourage individuals from living and investing in Scotland will be damaging. This response asks the Migration Advisory Committee to fully take into account Scottish interests and to consider responses from Scottish stakeholders carefully.

³⁶ With the exception of PhD level and shortage occupation applications.

From: MacKenzie F (Fiona)(Health-Employee Experience)
Sent: 02 October 2015 11:01
To: 'Earl Stephen'
Subject: MAC Tier 2 - final (tidy) submission

Hi Steve,

Tidy version – changed 'I' to we and this is on behalf of NHSScotland. here is no Annex A – you already have that. Grateful if you don't release the evidence or make it publicly available, while the sickness absence stats are published on an annual basis, the data is not broken down by medical specialist. It may be possible to identify the individuals.

Sorry it's all a bitty document, no need to reply.

Have a great weekend,
Fiona

Scottish Government
On behalf of NHSScotland

SUBMISSION OF EVIDENCE:

Review of Tier 2 of the Points Based System

Director General: Health and Social Care
Director: Health Workforce

September 2015

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6. Scottish Government Workforce Directorate on behalf of NHS Scotland response to MAC call for evidence

Annex A

Evidence submitted

1. Letter from Minister for Europe and Economic Development on the MAC call for evidence: Review of Tier 2 of the UK Points Based System
2. One Scotland Response
3. Copy Scottish Government Health Workforce submission to Migration Advisory Committee in response to call for evidence on revisions to the Shortage Occupation List; December 2014
4. Copy evidence from NHS Scotland Education Scotland (NES)
5. Copy ORCHID NHS Highland Remote and Rural Initiative Discovery Phase Summary Report & Recommendations
6. Copy ORCHID NHS Highland Remote and Rural: Campaign Summary report
7. Copy ORCHID NHS Highland Remote and Rural Initiative final report
8. Copy additional COS/ Grade etc data from NHSScotland Education Scotland.
9. Table of responses by NHS Boards to a media request Freedom of Information (Scotland) Act 2002
10. NHS Lothian Evidence - 24 June 2015 workforce risk assessment
11. NHS Lothian Evidence – 5 August workforce risk assessment
12. Scottish Government Nursing and Midwifery Revalidation Programme Board: Workforce Work stream report 22 September 2015
13. Scottish Government recruitment initiatives
14. Junior doctors contract modelling – power point presentation

1. Purpose

This submission of evidence to the Migration Advisory Committee, (MAC), is in response to the UK Government review of Tier 2 of the Points Based System to address concerns about the rising number of migrants via this route and reliance on this sector to fill shortages in the health sector in Scotland. For the purposes of this submission the Social Care sector is outwith scope but the impact of the integration of health and social care in Scotland resonates in the evidence submitted.

This submission presents evidence that The Scottish Government is working to develop a more consistent and co-ordinated process for the recruitment of overseas doctors, and increase cost effectiveness by NHS Scotland Boards. This submission supports the argument that, once in employment, more should be done to retain foreign trained health workers and that might be achieved by relaxing visa entry restrictions for health sector workers and ensuring they get enhanced support and extra training for their services.¹

2. Important points

This submission recognises and compliments the letter from Mr Yousaf, MSP, Minister for Europe and International Development, plus the accompanying 'One Scotland Response' submission. This letter and submission make important points regarding Scotland and the impact of changes to the migration system. In particular, the points made regarding the nature of the labour market in Scotland and dependence on this migrant sector² are relevant in an NHSScotland context.

The Scottish Government Health Workforce Directorate submitted evidence in December 2014 in response to the earlier call by MAC for evidence on occupation to be included on the Shortage Occupation list (UK and Scotland only)³. The evidence presented is relatively recent and therefore still valid.

This submission takes account of evidence from NHSScotland, Education for Scotland (NES)⁴ which is cited at various points throughout this submission.

It also takes account of oral evidence from Boards either via telephone or face to face meetings. The evidence is anecdotal but points to anxiety amongst some Boards, particularly the larger boards more dependent on migrant doctors and nurses, of restricting entry via Tier 2 of the Points based system.

NHS Lothian provided three pieces of evidence; a direct reply to the four broad issues under question, copied under Section A that I support. In addition, the Board has provided two Board papers dated 24 June and 5 August 2015 that are referenced in this submission and contained in Annex A under papers 11 and 12.

Evidence was received following a Freedom of information (Scotland) Act 2002 trawl of Boards responses to questions on the earlier announcement by the UK Government on the introduction of the salary thresholds. The responses provide a useful data source on the

¹ <http://www.civitas.org.uk/NHS/nhstraining>

² (See Annex A ; Document 1&2)

³ (See Annex A ; Document 3)

⁴ (See Annex A; Document 4 &8)

number of migrant nurses and doctors working within NHSScotland Health Boards and are by Boards.

The recruitment cost to remote and rural NHSScotland Boards is unsustainable and anything to ease paths to recruitment, to retain foreign trained health workers should be examined. That might be achieved by relaxing visa entry restrictions for health sector workers and ensuring they get enhanced support and extra training for their services

Finally, this submission provides new evidence and cites existing sources that highlight an important source of labour for the UK and in particular Scotland comes from migration. The UK Commission for Employment and Skills July 2014 briefing paper; The Labour Market Story: The State of UK Skills that found approximately 16 per cent of people in employment were born outside the UK, and migrants occupy both high skilled and low skilled jobs in the UK. Migrants also tend to be more highly-qualified than the UK-born population. We support the conclusions drawn that migration is an important contributor to the improving qualification profile of the UK workforce, whilst also recognising it may also be masking mismatches in the supply of training and demand for skills.⁵

⁵https://www.google.co.uk/url?sa=t&rct=j&q=&esrc=s&frm=1&source=web&cd=2&cad=rja&uact=8&ved=0CC0QFIABahUKewjLrezP9ZniAhWBhQKHrR3DrY&url=https%3A%2F%2Fwww.gov.uk%2Fgovernment%2Fuploads%2Fsystem%2Fuploads%2Fattachment_data%2Ffile%2F344440%2FThe_Labour_Market_Story_The_State_of_UK_Skills.pdf&usq=AFQjCNHaa5cUG_v0RpxmJAML15jeWELknw

3. Impact of hard to fill vacancies

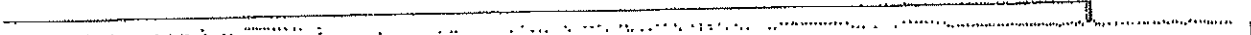
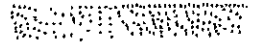
Hard-to-fill vacancies can have significant impacts for businesses, including the health and social care sector. Increased workload is the most commonly reported impact of hard-to-fill vacancies, but this is not merely an inconvenience with a potentially negative and costly impact on staff wellbeing. The UK Government⁶ has found it brings with it opportunity costs for businesses which suffer consequent delays in developing new products and services and more fundamental problems such as difficulty meeting customer needs and lost business in a similar proportion. Aligning the findings in that report to the health sector it is not unreasonable to hypothesise the impact on the health sector is manifest through increased employee to post ratio, increased workload in an often high pressure environment, reduced down time, increased sickness absence rates and a negative patient experience.

This submission stress tested the risk of increased sickness absence against the medical categories on the Scotland only shortage occupation list. To increase the chance of extracting meaningful data only consultant grade was used to test sickness absence rates.

We have also stress tested sickness absence against establishment, comparing two specialist categories; paediatrics and psychotherapy, exposing the fragility of some of the rather more niche specialists where the numbers are relatively small. This would point to the need for a more flexible approach to securing migrant workers.

[REDACTED]

[REDACTED]



[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

3.2 Impact of ageing workforce.

At Annex A, paper 12, we provide evidence on the ageing workforce through a submission supplied by colleagues. The paper concludes that, in the medium term, local workforce planning and the use of the mandatory workload tools will inform Board workforce projections and the Student Intake Process.

The paper identifies potential risks in the age profile of nurses and midwives in Scotland; evidences the increased likelihood of retirements in those nearing retirement. It notes the ageing of midwifery workforce has been dramatic in comparison to other areas such as adult nursing.

Importantly for this MAC submission, the paper draws evidence on the Social Services Sector, the majority of nurses work in Care Homes for Adults where there are already challenges with recruitment and retention.

We would suggest the impact of the ageing workforce evidenced via this paper is also true for doctors.

3.3. Risk ranking by speciality

In addition, data covering consultants was obtained from the Royal Colleges External Advisors co-ordinators who are sponsored by SGHD Workforce Directorate. The data forms part of the annual audit for this group and is reported both annually and monthly to the Scottish Government. A meta data analysis was undertaken and this was then stress tested to determine ranking.

The ranking was aligned to determine any correlation between the categories exhibiting a shortage, and sickness absence. The results are in the table opposite. The results show consultant medical specialist categories where shortages exist (on the UK or Scotland only SOL) generally exhibit higher levels of sickness absence than other specialist areas; and those health occupations on the SOL are generally ranked higher on the risk table opposite.

Weighted Ave	Rank	Specialty	>60	Esizes	Vacs %	Vacs6 M%	EAOR rank	PostC CT	Ave EC	Ave Age
35.75	1	Paediatric Cardiology	High	Low	High	V.High	V.High		High	Medium
34.63	2	Psychotherapy	High	Low	High	V.High	Medium		High	High
32.50	3	Geriatric Medicine	Medium	V.High	High	High	High	High	Medium	Medium
32.04	4	Palliative medicine	High	Low	Medium	High	V.High	High	High	Medium
31.67	5	Neurology	Low	High	High	V.High	Medium		High	Low
30.92	6	Ophthalmology	Medium	V.High	High	High	Low	Medium	High	High
30.75	7	General (Acute) Medicine	High	V.High	High	V.High		High	High	V.Low
30.54	8	Emergency Medicine	Low	V.High	High	V.High	V.High	High	High	V.Low
29.88	9	Medical Oncology	V.Low	Low	High	V.High	V.High	High	High	V.Low
29.25	10	Occupational Medicine	High	Low	High	High	Medium		V.Low	High
28.50	11	Clinical Neurophysiology	V.Low	Low	High	V.High			V.Low	High
28.42	12	Medical Microbiology Virology	High	Medium	High	High	V.High	Medium	V.Low	Medium
27.96	13	Gastroenterology	Medium	High	Medium	V.High	Medium		Medium	Low
27.46	14	Paediatrics	High	V.High	Medium	Medium	Low	High	High	Low
27.38	15	Endocrinology Diabetes	Low	Medium	High	V.Low		High	High	Medium
27.08	16	Clinical Radiology	High	V.High	High	High	Medium	Medium	Medium	Low
27.04	17	Respiratory Medicine	Low	High	Low	High	V.High	High	High	V.Low
26.67	18	Dermatology	High	High	High	High	High	Low	Medium	Low
25.83	19	Cardiology	High	High	Medium	High	V.Low	V.Low	High	High
25.79	20	Histopathology	Medium	High	Low	High	Medium	High	High	Low
25.63	21	OMFS	High	Low	High	Medium		V.Low	High	
24.92	22	General Surgery	V.High	V.High	Medium	Medium	V.Low	Medium	Low	High
24.88	23	Old Age Psychiatry	Low	Medium	High	V.High	Low	V.Low	Medium	Low
24.21	24	Intensive Care Medicine	High	Low	High	V.Low			High	V.Low
24.13	25	Immunology	V.Low	Low	High	V.Low			High	High
24.04	26	Rehabilitation Medicine	High	Low	High	Medium			Low	High
24.00	27	Public Health Medicine	High	High	Medium	Low	V.High	V.Low	V.Low	High
22.96	28	Clinical Pharmacology	High	Low	V.Low	V.Low		High	High	High

		Therape									
22.75	29	Rheumatology	Medium	Medium	Low	Low	High	V Low	High	Medium	
22.42	30	Urology	Low	High	Medium	High	Medium	Low	Low	High	
22.38	31	Clinical Genetics	Medium	Low	Low	High	V Low		High	High	
22.25	32	Child Adolescent Psychiatry	V Low	Medium	High	Medium	Low	High	Low	V Low	
21.88	33	Obstetrics Gynaecology	Medium	V High	Low	Low	Low	High	Medium	High	
20.50	34	General Psychiatry	Medium	V High	Low	Low	Low	V High	Medium	Low	
20.50	34	Infectious Diseases	High	Low	Medium	Medium			V Low	High	
20.33	36	Psychiatry of Learning Disabil	Low	Medium	Medium	Medium	High	High	V Low	Low	
19.88	37	Forensic Psychiatry	Low	Medium	Medium	Low	Medium	High	Low	V Low	
19.75	38	Medical Ophthalmology	V Low	V Low	High	V Low		V Low	V High	V Low	
19.54	39	Otolaryngology	High	High	Low	Low		Low	Low	High	
19.33	40	Clinical Oncology	Medium	High	V Low	Low	V High	High	Low	Low	
19.08	41	Genito - Urinary Medicine	High	Low	Low	V Low		V Low	High	High	
18.54	42	Haematology	High	High	Low	V Low	Low	High	Low	High	
18.42	43	Anaesthetics	Low	V High	V Low	Low	High	Medium	Medium	Medium	
18.21	44	Renal Medicine	Low	Medium	Low	Medium	V Low	High	Low	Medium	
17.17	45	Paediatric Surgery	V Low	Low	High	Medium		V Low	Low	V Low	
17.17	45	Trauma Orthopaedic Surgery	High	V High	Low	Low	V Low	Low	Low	Medium	
15.67	47	Neurosurgery	V Low	Low	Low	Medium		Medium	Medium	V Low	
15.00	48	Plastic Surgery	Low	Medium	Low	V Low		Medium	Medium	Medium	
14.13	49	Nuclear Medicine	V Low	Low	V Low	V Low		High	High	Low	
13.71	50	Chemical Pathology	Medium	Medium	V Low	V Low	V High		V Low	High	
12.17	51	Cardiothoracic Surgery	High	Low	V Low	V Low	V Low		V Low	High	
8.17	52	Audiological Medicine	V Low	Low	V Low	V Low			V Low	High	
7.29	53	Homeopathy	V Low	Low	V Low	V Low			V Low	High	
Weighted ranks			Unweighted Ranks only								

3.4 Nursing workforce

We looked at work carried out by the Scottish Government Chief Nursing Officers Directorate to directly fund initiatives aimed at bringing nurses back into work. They include the following:

- ***Supporting access to careers in nursing and midwifery – Nursing & Midwifery Student Bursary –***

The Scottish Government funds Nursing & Midwifery Student Bursary (circa £59m pa), supporting and enabling access to pre-registration training. The NMSB provides all eligible students with a non-means tested and non-repayable core bursary (£6578) and additional allowances, including means tested dependents allowance, disability, Lone parents and childcare allowances. There are circa 9600 nursing and midwifery students in training in Scotland.

- ***Retraining former nurses –***

The Scottish Government is investing £450,000 over the next three years (commencing 2015-16) to reintroduce a national Return to Practice scheme. This will enable around 75 former nurses and midwives to retrain each year and re-enter employment. The scheme got underway from April 2015. Already, interest in the scheme has been high, with interest from over 100 former nurses or midwives; we plan to increase the funding available for the scheme in 2015-16 to meet demand.

- ***One Year Job Guarantee for Newly Qualified Nurses and Midwives:***

The Scottish Government has made a commitment that each newly qualified nurse and midwife is guaranteed one year of employment once they complete their studies, a commitment which is not offered anywhere else in the UK. Demand for internships has dropped significantly, notably for nursing, reflecting increased employment opportunities. Spend in 2014-15 £1.15m ; projected spend 2015-16 circa £300k.

- ***Vocational rehabilitation:***

Allied Health Professionals (AHPs) are leading on the implementation of Individual Placement and Support, (IPS), – a model of vocational rehabilitation which can support up to 66% of users to gain paid employment, producing 50% cost savings for every individual in work. 20% of mental health service users now have access to IPS across 8 health boards with more IPS models in development. Evaluation of IPS models has resulted in improved client outcomes and investment to extend services.

The Minister for Public Health announced in Parliament on 19th May 2015 her commitment to a re-refresh of the AHP National Delivery Plan and to the development of an Active and Independent Living Improvement Programme (supported by £3m funding over 3 years). 3 regional improvement advisors will be appointed to support the programme. The essence of this work programme is to build on the success to date of the AHP national delivery plan in driving new models of self-care and preventative approaches (including vocational

rehabilitation, such as Musculoskeletal/orthopaedic service redesign, falls prevention) to enable people to live active, independent and productive lives, avoiding dependency on health and care services, through prevention, early intervention and enablement.

- ***Development of alternative Theatre workforce***

The introduction and development of support workers has been identified as a way of developing and modernising the Perioperative workforce in order to be responsive to current and future needs. NHS Lothian, Grampian and Tayside are being proactive in developing an 'alternative workforce' for theatre fulfilling the policy direction of access to healthcare roles via the Modern Apprentice route, HNC/HND and subsequent articulation to an Operating Department Practitioner programme or nursing degree and addressing the perceived shortage of theatre 'nurses'. SG is providing circa £200K support for these pilots, evaluating and exploring options for other specialties to adopt this approach.

This demonstrates the Scottish Government is tackling shortages by directing monies towards initiatives to support this sector.

4. Scotland as a remote and rural location

The difficulties recruiting to remote and rural location in Scotland is widely recognised; ⁷Scotland has an additional, separate shortage occupation list to reflect differing labour market demand needs compared to the rest of the UK ⁸. Evidence provided by NES (for training posts) linking the Boards use of COS against grades and specialisms is compelling in highlighting the difficulties remote and rural Board experience in recruiting⁹.

The remote and rural Boards for the purpose of this exercise are the Island Boards; NHS Orkney, NHS Shetland, and NHS Western Isles and parts of other northern and southern Boards (i.e. minus the central belt). The definition is an economic indicator and the spatial areas do not match the geographic boundaries for the Boards.

Four Territorial boards are not listed in the NES evidence, the three island Boards plus NHS Borders. No Certificates of Sponsorship for trainee doctors have been issued by these Boards. It is reasonable to assume no suitably qualified international applications seek to work in the four Board,s due to the remote and rural nature of the area.

In addition, two boards, NHS Dumfries and Galloway plus NHS Highland have been allocated seven COS over the past 18 months (the reporting period for this evidence). The six boards normally considered under the remote and rural category have recruited seven trainee doctors over the past 18 months or a paltry 4.6 doctors per annum.

4.1 Scottish Government Recruitment Initiatives

Annex A, paper 13 provides evidence of work being done by the Scottish Government Health Workforce Directorate.

⁷ See Annex A, papers 5,6 and 7

⁸ <https://www.gov.uk/government/publications/partial-review-of-the-shortage-occupation-lists>

⁹ (Annex A: excel spreadsheet /doc 8)

4.2 Advertising cost per doctor

On the costs per medic, while we are unable to directly attribute costs to international marketing campaigns, a recent trawl of Boards for replies to a Freedom of Information (Scotland) Act 2002 request provided the following information.

Boards	Costs of advertising and marketing between 1 Jan 2014- 1 Aug 2015
NHS Ayrshire and Arran	103,159
NHS Borders	33,095
NHS Dumfries and Galloway	65,598
NHS Fife	233,684
NHS Grampian	76,127
NHS Forth Valley	0
NHS Greater Glasgow and Clyde	268,302
NHS Highland	43,558
NHS Lanarkshire	16,513
NHS Lothian	14,842
NHS Orkney	15,660
NHS Shetland	381,168
NHS Tayside	4,320
NHS Western Isles	45,682
Total	1,198,549

While recognising the variance in reporting periods between this evidence and the NES evidence on COS, see next table, it is arguable the two are sufficiently aligned to draw the following conclusions:

The three island Boards plus NHS Borders spent £475, 605 and requested no certificates of sponsorship over the same time frame so no international trainee doctors were recruited to the four boards.

NHS Highland and NHS Dumfries and Galloway spent £82,111 and recruited 7 trainee doctors which is equivalent to £11, 730 per doctor.

The six Boards combined spent £558, 416 which is equivalent to £79,773 recruitment cost per doctor in what can be considered remote and rural locations.

This cost is unsustainable and anything to ease paths to recruitment, to retain foreign trained health workers should be examined. That might be achieved by relaxing visa entry restrictions for health sector workers and ensuring they get enhanced support and extra training for their services.¹⁰

¹⁰ <http://www.civitas.org.uk/NHS/nhstraining>

Specialty and Grade	Health Board											
	NHS Ayrshire & Arran	NHS Dumfries & Galloway	NHS Education for Scotland	NHS For Fife	NHS For Valley	NHS Grampian	NHS Greater Glasgow and Clyde	NHS Highland	NHS Lanares shire	NHS Lothian	NHS Tayside	Grand Total
ACGS Emergency Medicine									1			1
ST1									1			1
Acute Internal Medicine						2						2
LAT1						1						1
ST3						1						1
Anaesthetics							3		1		1	5
LAT1							1					1
LAT2							1					1
LAT3									1		1	2
ST3							1					1
Cardiology					1				2		2	5
LAT3											1	1
ST3					1				2		1	4
Clinical Pharmacology and Therapeutics							1					1
ST3							1					1
Clinical Radiology									1			1
ST1									1			1
Community Sexual and Reproductive Health						1						1
ST1						1						1
Core Anaesthetics Training							1	1				2
CT2							1					1
LAT2								1				1
Core Medical Training	2				1	2	7		1	3	2	18
CT1	2				1	1	1			3		8
CT2						1					2	3
LAT1							3		1			4

LAT2							3					3
Core Psychiatry Training		1		1								2
CT1		1										1
CT3				1								1
Core Surgical Training						3	1			1		5
CT1						3				1		4
ST1							1					1
Emergency Medicine							1		1			2
LAT1							1					1
ST4									1			1
Endocrinology and Diabetes Mellitus					1							1
ST3					1							1
Gastroenterology										1		1
LAT1										1		1
General (Internal) Medicine					1			1			1	3
CT2					1							1
LAT2								1				1
LAT3											1	1
General Adult Psychiatry							1					1
LAT1							1					1
General Practice	4	1	24	2		1	6	1	3	1	1	41
ST1	4	1	4	1			5	1	2	1	1	20
ST2			1			1	1					3
ST3			16	1					1			18
General Surgery						2						2
LAT5						1						1
ST4						1						1
Geriatric Medicine											1	1
ST3											1	1
Haematology											1	1
LAT1											1	1
Histopathology						1						1
ST1						1						1
Medical Virology										1		1
LAT1										1		1
Neurosurgery							2					2
LAT4							1					1
LAT5							1					1
Obstetrics and Gynaecology				1	1		1	1	1			5

LAT2							1					1
LAT3				1								1
LAT4					1				1			2
LAT6								1				1
Ophthalmology							2			1		3
LAT1							1					1
LAT4										1		1
ST1							1					1
Paediatrics	2			1	1	2		1	1	3		11
LAT1	1					1						2
LAT2				1								1
LAT3	1					1		1				3
ST1									1	1		2
ST4					1					2		3
Plastic Surgery							1					1
LAT3							1					1
Respiratory Medicine								1				1
ST3								1				1
Trauma and Orthopaedic Surgery	1						2				2	5
LAT1											1	1
LAT2											1	1
ST1							1					1
ST3	1						1					2
Urology						1						1
ST7						1						1
Grand Total	9	2	21	4	6	14	31	5	12	9	14	127

(Evidence submitted by NES on COS/Board/Grade)

4.3 Overseas medical staff

There is evidence THAT 3,000 doctors in the past year have been recruited from overseas and currently 26 per cent of NHS doctors are foreign national, coming from a multitude of countries both inside and outside the EU to posts within the UK ¹¹.

NHS Scotland Education Scotland (NES) supplied data¹² covering financial year 2014-15 and April 1 2015 to date (see below table). This demonstrates a 300% increase from 9 to 28 of COS issued for specialists on the SOL (UK or Scotland only, over the reporting period,) in the number of Certificates of Sponsorship issued covering occupations on the Shortage Occupation List (both UK and Scotland only).

On Shortage Occupation list	2014-15	2015-16 to date
No	118	61
Yes	9	28
Grand Total	127	89

Given the list was revised in April 2015 and the number of occupations listed under the Scotland only list, it is feasible to argue Boards are deploying this mechanism for overseas recruitment and that given the 2015 figure covers the period 1 April to the date the evidence was submitted (mid-August 2015) this figure could reasonably be expected to double by the end of the next reporting year (March 31 2016) , to 600%. This mechanism affords a swifter and less expensive option that Boards are using to ensure the correct staff are in place to deliver the correct patient care.

The Scottish Government recognise that Scotland does experience particular recruitment and retention difficulties in relation to certain medical professions. The creation of posts and filling of vacancies will depend on the service needs of each Board taking account of national and local priorities. NHS Boards have fully delegated powers to recruit and deploy their workforce to meet their service provision responsibilities and to deliver high quality, safe and sustainable services to meet the needs of their population. While the Scottish Government work in close partnership with all Boards to provide the policies, frameworks and resources for high quality health care in Scotland, it is for each NHS Board to decide how best to deliver those services to meet the needs of the population. Boards generally advertise vacancies through a number of different sources; professional journals; posting vacancies on their own Board website; advertising on SHOW (Scotland s Health on the Web) and through the boards micro-website – all medical jobs are now being advertised on - www.medicaljobs.scot.nhs.uk - where individuals can register on this site to be kept updated by email or text, with the latest jobs

¹¹ (See reference 1 – <http://www.civitas.org.uk/NHS/nhstraining>)

¹² See Annex A Document 4

5. NHS Lothian Response

Wider Review - 5 broad areas that MAC has called for evidence on:

Restricting Tier 2 will directly impact on NHS Lothian's ability to fill posts and deliver healthcare services. Restrictions also have an impact on the existing workforce from having to carry the gaps for a longer period of time whilst trying to recruit, where applicants are put off applying to work in the UK in posts that NHS Lothian has been unable to fill from within UK/EEA. There is increased financial pressure too from the use of locum, bank, agency and/or overtime, to help maintain service delivery whilst trying to recruit to the gap.

1. How should Tier 2 be reformed to restrict it to "genuine skills shortages and highly specialist experts only"?

Restricting Tier 2 will impact on NHS Lothian's ability to recruit from out-with the UK at a time where the NHS is facing significant challenges in filling posts. NHS Lothian like other NHS organisations are having to cast the recruitment net wider than before by increasing our promotion of job opportunities worldwide, in an attempt to fill posts. As such it is vital to make the posts as attractive as possible and seek to remove barriers and encourage candidates to apply. It would be helpful if tier 2 restrictions did not apply to trained NHS clinical posts.

2. How should Tier 2 be changed to limit the time jobs can be regarded as having a skill shortage?

Applying a maximum duration is not in itself helpful, as the shortage status may remain unchanged. An annual review of the shortage occupations with requirement to evidence on-going challenges to remain on the SO list is appropriate. Helpful if there could be the facility to allow interim updates at say 6 months interval, to allow any pressing additions.

3. How can a 'skills levy' be introduced on businesses recruiting from outside the EEA?

Any additional cost will act as an obstacle to recruiting someone under tier 2. NHS Scotland has committed to delivering 500 Mon Apps from within existing funded resources, therefore charging a skills levy would add additional pressure on the public purse.

4. What would be the impact of restricting the right to work for dependents of Tier 2 visa holders?

This could deter a migrant from applying to work in the UK. In terms of direct impact on NHS Lothian, there is no hard evidence. However, one would expect that such a restriction would deter some applicants from applying through tier 2 and that reducing the number of potential applicants will then have a detrimental impact on the Board's ability to fill posts.

Health Workforce ; NHS Lothian; 25 August

6. DIRECT RESPONSE TO MAC CALL FOR EVIDENCE

Skills Shortages

1. What impact, if any, will reducing the level of Tier 2 migration have on the economy? What are the reasons for your answer?

See main body of the submission

2. How well does the Resident Labour Market Test provide evidence that no domestic labour is available? How could the test be improved?

We support the evidence submitted by Boards that the requirement to advertise medical training jobs on the Job Centre Plus Universal Jobmatch website does not seem appropriate. Doctors would not look for vacancies there.

3. Does the points mechanism operating in respect of the limit on Tier 2 certificates of sponsorship prioritise those migrants of greatest benefit to the UK? How could its efficiency at doing this be improved?

The points mechanism does not currently prioritise migrants of greatest benefit to the UK, in particular the health sector, we have evidence NES recently had difficulty securing restricted Certificates of Sponsorship for two medical trainees. Both applications were refused in July, and although they were subsequently approved, this caused delayed starts which affected service delivery.

4. What criteria should be used to select jobs and occupations that are genuine skills shortages and people that are highly specialist experts? What use should be made of selection criteria such as salaries, points for particular attributes, economic need, number and length of vacancies and skills level? What other criteria should be considered?

The system is rigid and greater flexibility could be introduced through more frequent revisals. For example the recent problems regarding GP recruitment. In addition, paper 14 demonstrates how pressures can arise, driven by other factors such as in this case new contract negotiations for junior doctors that officials have to respond to. Linking material such as in this paper to vacancies and categories on the SOL happens here but the basis of the modelling, or the assumptions that drive the modelling, are not obvious.

5. What will be the impact of restricting Tier 2 (General) to genuine skills shortages and highly specialist experts?

This will unduly restrict the flow of migrant labour: see main submission for arguments against this.

7. What evidence is there of significant regional differences in skills shortages?

See main submission

8. What evidence is there of the need to recruit highly specialist experts?

See main submission.

9. What would be the impact on business and the economy of restricting recruitment to genuine skills shortages and highly specialised experts for:

- I. migrants switching from the Tier 4 student route;**
- II. all other in-country applications?**

See main submission plus NES response; we support the assertion the health sector does not enjoy the luxury of oversupply.

10. How could the methodology to set the Shortage Occupation List be expanded to develop a revised Tier 2 (General) which restricts the route to genuine skills shortages and highly specialised experts only?

Methodology is unclear currently and does not appear to have been applied consistently or reviewed often enough. Clearer methodology and a more transparent decision process required.

11. What occupations would you expect to see on an expanded shortage occupation list? How does the occupation or job title you are suggesting satisfy each of our criteria in relation to “skilled”, “shortage” and “sensible”? Alternatively, what other criteria does the occupation or job title satisfy that meets the requirement of being in a genuine skills shortage or for highly specialised experts?

See earlier submission on the MAC call for evidence on the SOL.

12. What would be the impact of an expanded Shortage Occupation List on business and the economy?

I agree with the NES evidence if hard to fill NHS posts were added to the expanded shortage occupation list, it would mean migrants requiring tier 2 sponsorship could be offered posts at the same time as other applicants and be able to start post in time (as they would have more time to apply for a visa). This would have a positive impact on frontline NHS services

13. How far in advance can your organisation, sector or local area anticipate a potential shortage in skilled labour?

See main submission regarding stress testing etc

14. Alternatively, is it sensible to leave the present Tier 2 (General) route intact and achieve any reduction in economic migration by raising the pay thresholds only?

This submission argues the Tier 2 route should be relaxed.

Sunsetting

15. The MAC has been asked how to limit the length of time occupations can be classed as having shortages:

- a. How long should any maximum duration be?**
- b. What, if any, exceptions should there be to this and why? Please provide evidence to support your answer.**

We have previously submitted evidence on sunseting. We would suggest there is no time limit as this would be difficult to measure, monitor and manage. However, if a more flexible Tier 2 approach is advocated, it may be possible to link any sunseting to this future approach. We suggest the three tests for inclusion on the SOL are sufficiently stringent (shortage, skilled and sensible) that only occupations in genuine shortage are included. We suggest also it can take considerable time to fill medical gaps and that any revisiting of medical categories should only take place every 3 years or so.

Skills levy

17. The Government has asked that the MAC consider to which businesses a skills levy should apply and the impact this may have, balancing the need to maximise the incentive for employers to recruit and train UK workers with the ability of businesses to access the skilled migrants they need. The proceeds of the levy would fund apprenticeships in the UK.

- a. What would be the impact of different levels of levy on your occupation or sector? Would a skills levy affect the way you recruit?**
- b. Should a skills levy apply to all businesses recruiting from outside the EEA? If not, to which businesses should a skills levy apply and why? Why should other businesses be exempt from the levy?**
- c. Should a skills levy be a one-off payment at the point of recruitment of a Tier 2 migrant or should it be on an annual basis for the duration of the migrant's stay under their initial Tier 2 visa?**
- d. Would a skills levy have specific regional impacts?**

We would strongly oppose a skills levy for NHS Scotland Boards, the largest public sector employer in Scotland. Boards already have a Modern Apprentice target of 500 over the three year period from August 2014 and no additional funding is provided.

We received the following evidence from NES that we support:

With regard to the levy, the figure of £5000 per migrant sponsored was mentioned by the MAC representatives at (the stakeholders event). It is unclear where this figure has come from, and £5000 per migrant seems unrealistic. However, if this levy had been in place in 2014-15, we would have had to pay an additional £635,000 on top of our Certificate of Sponsorship costs. The MAC mention in their guidance that they will provide analysis of a skills levy involving either a one-off or annual levy per migrant. A £5000 one off fee per sponsor is still significant, but perhaps more realistic.

Tier 2 Dependants

18. Dependants of Tier 2 migrants, such as partners, spouses and adult minors, presently have the unrestricted right to work in the UK. The MAC is asked to consider the impact of removing this automatic right:

- a. How would removing the automatic right of dependants to work affect main applicants' decision of whether to come to work in the UK?**
- b. How many of your Tier 2 employees bring dependants? If so, do they work whilst in the UK? Are they qualified to degree level? What occupations do they work in? If possible, please specify occupations or job titles according to the SOC 2010 classification.**

- c. How would removing the automatic right of dependants to work impact on:
 - i. the economy;**
 - ii. public finances?****
- d. Would removing the automatic right of dependants to work have social impacts?**
- e. Would removing the automatic right of dependants to work have specific regional impacts?**

We do not hold data on trainee dependants, but we are aware that the majority of medical trainees do come to country with dependants who themselves are often highly skilled. It is not unusual to find husband and wife doctor combinations. Any restrictions on dependants could have a negative overall impact.

Overall Tier 2 design

19. To what extent do the existing Tier 2 mechanisms and framework work optimally to enable business to bring in the skilled workers that they require?

We support NES evidence here.

20. What changes would you make to the design of the route that would address the issues identified and are not reflected in the changes discussed elsewhere in this call for evidence?

We support NES evidence here

21. How do the existing salary thresholds for Tier 2 compare to, and impact on, the overall wage distribution for each occupation?

We support NES evidence on pay scales for the health sector.

23. What would be the impact of increasing the thresholds to a level that better aligns with the salaries of highly specialised and/or highly skilled experts?

We support NES evidence on pay scales for the health sector.

24. What would be the impact of increasing the thresholds to a level that restricts the route to occupations which are experiencing skills shortages skilled to NQF level 6 or higher?

We support NES evidence here.

25. What would be the impact of increasing the Tier 2 minimum thresholds from the 10th to the 25th percentile for each occupation for new entrant workers?

We support NES evidence here.

26. What would be the impact of increasing the Tier 2 minimum thresholds from the 25th to the 50th or 75th percentiles for each occupation for experienced workers?

We support NES evidence here.

27. As an employer, what would be the impact of increasing the Tier 2 minimum thresholds on:

- a) hiring migrant workers from outside the EU;
- b) hiring migrant workers from within the EU;
- c) hiring natives.

We support NES evidence here.

28. Are there additional national pay scales or sources of salary data that should be used to set the thresholds?

NHS salary payscales

29. What other appropriate measures would you like to see for determining the minimum salary thresholds?

NHS salary payscales

30. Should the minimum salary threshold take account of variations in regional pay? If so, how?

We support NES evidence here.

From: Earl Stephen [REDACTED]
Sent: 06 November 2015 10:14
To: MacKenzie F (Fiona)(Health-Employee Experience)
Cc: Speedie C (Claire); Plunkett N (Nikola)
Subject: MAC review of nurses and shortage

Fiona, I just wanted to check that you are alive to the fact that the MAC have been commissioned to review nurses for the shortage occupation list.

We have published a call for evidence and are hosting a meeting here at 2 Marsham Street on Thursday 12 November.

We are reviewing the whole of the nurse occupation but will also look at evidence on individual nurse jobs and specialties.


We will be making recommendations to the Government both about the UK-wide shortages, if any, and also about separate shortage in Scotland if we get any evidence on the latter.


Let me know if you have any questions about the call or supplying evidence.

Thanks.

Steve

Stephen Earl
Head of Policy
Migration Advisory Committee secretariat
3rd Floor, Seacole Building
2 Marsham Street
London SW1P 4DF


<https://www.gov.uk/government/organisations/migration-advisory-committee>

From: 
Sent: 11 November 2015 13:32
To: Earl Stephen
Subject: In london tomorrow

Hi Steve,



I am coming down to the Home Office tomorrow (it was a bit last minute, so just found out yesterday). I was going to cover the MAC consultation event on nurses for Fiona in the afternoon, but unfortunately, I can't stay for that long and need to head back up the road at 3.30.

It would however be really great to see you all again, so I wondered if you were available around midday/early afternoon, just for a quick coffee/to say hello?


I look forward to hearing from you.

Thanks,

Claire

Claire Speedie | Senior Immigration Advisor, Migration Strategy | Scottish Government | 
 | 3rd Floor, 5 Atlantic Quay, 150 Broomielaw, Glasgow, G2 8LU

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From: Earl Stephen 
Sent: Wednesday, November 11, 2015 01:47 PM
To: Speedie C (Claire)
Subject: RE: In london tomorrow

Yes, I am around all day – 3rd floor. Seacole Bldg. Free anytime, give me a ring on [REDACTED] – you can meet the rest of the team and we can do lunch or coffee in the atrium.

Steve

Stephen Earl
Head of Policy
Migration Advisory Committee secretariat
3rd Floor, Seacole Building
2 Marsham Street
London SW1P 4DF



<https://www.gov.uk/government/organisations/migration-advisory-committee>

From: [REDACTED]
Sent: 12 November 2015 17:28
To: Earl Stephen
Subject: Re: In london tomorrow

Hi Steve,

Good to see you as usual. Thanks for taking the time. I've passed on what we talked about to Fiona and I'd be grateful if you can email us the slides from your consultation meeting.

Thanks again,

Claire
Claire Speedie
Senior Immigration Advisor
Migration Strategy
Scottish Government

3rd Floor, Atlantic Quay
Glasgow
G2 8LU



From: Earl Stephen [REDACTED]
Sent: 12 November 2015 17:59
To: Speedie C (Claire)
Cc: MacKenzie F (Fiona)(Health-Employee Experience)
Subject: RE: In london tomorrow

Both (mine and CfWI) slides attached.

Good seeing you, shame you could not come to the nurses meeting [REDACTED]

Steve

Stephen Earl
Head of Policy
Migration Advisory Committee secretariat
3rd Floor, Seacole Building
2 Marsham Street
London SW1P 4DF

[REDACTED]
<https://www.gov.uk/government/organisations/migration-advisory-committee>