

# A more international register means we need to support all our nurses

The annual report on the NMC register shows more overseas-educated nurses than ever are joining, says **Sam Foster**, Executive Director of Professional Practice, Nursing and Midwifery Council



In May of this year, the Nursing and Midwifery Council (NMC, 2023) published its annual data report, which shares both the shape of the NMC register, and the results of key questions asked of registrants. As nursing leaders, these results give us valuable insight to consider current employer strategies, and future retention plans.

Overall, the NMC register of nurses, midwives and nursing associates has grown by 30 351 to a record 788 638 professionals on the NMC register – more than 1% of the UK population. With over 52 000 new joiners to the register last year, this is a tale of two halves: around 25 000 new joiners to the register who are internationally educated, and just over 27 000 domestically educated, which was an increase of 8.5% from last year.

The UK government has faced criticism for its 'overreliance' in recent years on international recruitment, as reported in *The Times* (Lay, 2023). However, international recruitment continues at a significant rate, with the NMC reporting that professionals educated elsewhere in the world now account for one in five nurses, midwives and nursing associates who can practise in the UK.

The NMC data show that most international joiners are from outside Europe and are more ethnically diverse than the register they are joining. UK joiners are also becoming more ethnically diverse, with almost a third of last year's domestically educated joiners being from global majority

backgrounds. Over the past year the proportion of all registered professionals who are from the global majority has risen to 27.7% – more than a quarter of the register. In discussing the rising numbers of registrants who trained outside the UK, Dr Billy Palmer, from the Nuffield Trust, said:

**'Turning off the taps to international recruitment is just not feasible nor desirable for the NHS. Our health services rely on overseas nurses, who on average stay longer with the NHS than their counterparts trained in the UK.'**

**'Employing more homegrown NHS staff is rarely a quick process, but there are immediate steps the government should focus on including making public services a more attractive prospect for graduates and pushing to reduce the record numbers of staff choosing the leave the NHS.'**

*Nuffield Trust, 2023*

I have previously written regarding the concerning facts that, although there are some impressive corporate induction programmes for internationally educated nurses regarding orientation to the local living environments and so on, there is evidence that global majority registrants are often on the receiving end of racism in the workplace, in addition to being disproportionately referred to the NMC under fitness-to-practise procedures. Although there are some impressive examples of tackling racism, and resources such as the one from NHS England (2022) for nursing and midwifery professionals, there is clearly continued significant work to do, to truly make the workplace anti racist.

The NMC reports that the number of professionals leaving the register fell slightly to just under 27 000. However, a concerning

point from the NMC research is that more than half left sooner than planned and most don't plan to return to the professions – this also includes younger leavers.

Besides retirement, many who left cited five compounding workforce factors that influenced their decisions:

- Burnout or exhaustion
- Lack of support from colleagues
- Concerns about the quality of people's care
- Workload
- Staffing levels.

The important thing about the NMC data, is that, unlike the NHS staff survey, this information comes purely from NMC registrants. Addressing poor workplace experiences could help retain more early leavers – pay concerns were felt to be more prevalent for those educated overseas. Younger professionals report that the cost of living has impacted them, with more opting to leave the register earlier than planned, whereas this appears to have less impact on decision making in older cohorts, and a small group aged 65 and older are extending their time on the register. I would suggest that the NMC data report enables a strong evidence base that requires us as nurse leaders to really consider if the professional voice is being heard in organisations and if current national and local plans are truly reducing the risk of attrition. **BJN**

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