

NMC response to the call for input on trade with Switzerland

About Us

- 1 We are the UK's independent regulator of nursing and midwifery professions. We regulate 758,000 nursing and midwifery professionals. Our purpose is to promote and uphold the highest professional standards in order to protect the public and inspire confidence in the professions. Our vision is safe, effective and kind nursing and midwifery that improves everyone's health and wellbeing.
- 2 Our core role is to regulate. To regulate well, we support our professionals and the public. Regulating and supporting our professionals allows us to influence health and social care.

Background

- 1 We welcome this call for input on the UK's trade with Switzerland. It is vitally important that the direction of the UK's emerging trade policy is transparent and open to views. Our response builds on our previous submissions on other ongoing trade negotiations, including with India, Canada, Mexico, the Gulf Cooperation Council and Israel.
- 2 Unlike those countries, the UK has an existing agreement in place with Switzerland – the [Swiss Citizens' Rights Agreement](#) (SCRA) – which will remain in place until the 31 December 2025. Under the [terms of that agreement](#) we are required to recognise any qualification that would have previously been recognised while we were a member of the European Union (EU), where training was started before 31 December 2021 for Swiss nationals, their spouse and dependents.
- 3 This agreement gives Swiss applicants a greater level of access to our register compared to other international applicants, including EU nationals covered by the Government's standstill policy. Routes that were closed to EU applicants in 2020, such as the temporary and occasional route and the general systems route, are still open to Swiss nationals. Additionally, the Swiss agreement extends rights based on an applicant's nationality, while the Government's standstill arrangements and the European Free Trade Association (EFTA) trade deal are both based on qualification. Consequently, our position is that closing these routes and assessing all applications based on where qualifications were obtained, would ensure a consistent and equitable approach for how all international applicants are assessed.
- 4 While the provisions in the SCRA may be beneficial to some professions, the low numbers of applicants we receive means it is not necessary for our professions. Registrants from Switzerland account for a small proportion of those on our register, and we receive a very small number of applications to join the register from individuals with qualification obtained in Switzerland in a typical year. In total, there are currently 32 people on our register with qualifications obtained in

Switzerland. In the 12 months to 31 March 2022, we had two new joiners to our register with Swiss qualifications, and a total of 12 in the last five years.

- 5 We have responded to those questions of greatest relevance to our regulatory role, which for the purposes of this call for evidence principally concern the facilitation of the movement of people and the mutual recognition of professional qualifications.

Which areas do you think the UK government should consider changing or improving these areas during future trade negotiations with Switzerland?

- 6 As the independent regulator of nurses and midwives in the UK, and nursing associates in England, our mandate is to protect the public. We uphold this mandate by requiring that all applicants evidence that they have the knowledge and skills needed to deliver consistent and quality care.
- 7 Consequently, our primary priority for the UK's trade policy is that regulatory autonomy should not be undermined through the negotiation of mutual recognition agreements based on a person's qualification, and that our ability to assess international applicants through that our [Test of Competence](#) (ToC) should not be restricted. The current arrangements for Swiss nationals mean that we are unable to apply this preferred approach to Swiss applicants.
- 8 Our preference is that any future agreement with Switzerland should enable us to treat Swiss applicants in the exact same way as those from European Economic Area (EEA) countries in line with the Government's standstill policy. This would ensure that our approach is consistent, fair, efficient and cost-effective. It would also help to avoid the creation of new application routes for relatively small numbers of applicants and help to minimise the uncertainty about how a deal with Switzerland would interact with other trade deals, in particular the recognition provisions contained within the EFTA deal.
- 9 This would mean that Swiss applicants with qualifications aligned to EU Directive 2005/36/EC would be automatically recognised, while holders of unrecognised qualifications would be required to sit the ToC. All other application routes, such as Temporary and Occasional and General Systems, should come to an end as these are not offered to any other cohort of international applicants.
- 10 We are confident in the ToC as a holistic assessment method because it is designed to test the knowledge, skills and attributes needed for nursing and midwifery in the UK specifically. As these skills evolve and change, we can review and adapt the ToC to keep it aligned to reflect our new standards. This was done most recently in August 2021 in order to reflect our new [Future Nurse](#) and [Future Midwife](#) standards. This ensures that all those delivering care in the UK meet the same high standards, regardless of where they are trained. It is formed of two parts: a multiple-choice computer based theoretical test, known as the Computer Based Test (CBT), and a practical test known as the Objective Structured Clinical Examination (OSCE).

- 11 The ToC is applied consistently, transparently, and equally to all applicants. This aligns with the Government's ambition to see an efficient and fair process for the recruitment of internationally trained health professionals. It also underscores our commitment to fairness and non-discrimination in our processes.
- 12 Finally, the ToC offers a far more cost-effective and time-efficient method of assessment when compared to individual qualification assessment. Internal work undertaken in 2018 which looked at this in detail found that putting a qualification assessment process in place for overseas applicants would be very resource intensive and likely lead to an outcome where very few, if any, qualifications would meet our new standards. This is particularly the case when we would be considering a very small number of applicants under an alternative assessment route, where the resources required are disproportionate to the numbers we would be registering, as is the case with Switzerland.

What are your organisation's main priorities and concerns about an enhanced trade agreement (or related talks) with Switzerland?

- 13 Our main concerns relate to maintaining public safety, ensuring that all nursing and midwifery professionals in the UK meet the right standards to achieve this, and being sufficiently engaged in trade negotiations to be able to make sure this remains the case.
- 14 As a result, any trade deal with Switzerland should discontinue the greater level of access currently afforded to Swiss nationals. It should also reflect interdependencies with the EFTA trade agreement. If not, there is a risk that one group of applicants could receive preferential access to the register despite them having the same or similar standards, qualifications and regulatory frameworks to other European applicants. This risks both creating confusion for applicants and raising further issues around ensuring a fair and cost-effective application system. For example, a Swiss applicant holding a Norwegian nursing qualification would appear to be covered by both the EFTA trade deal and the SCRA but with different terms for each. The complexity of trade deals, and particularly in this case the overlap between a Swiss trade deal, the EFTA trade deal, and the Government's standstill policy, means that other issues could arise through the course of negotiations that we are not able to predict at this time.
- 15 It is therefore important that we are involved at the earliest opportunity possible in any negotiation process to ensure that we are able to provide input and feedback on relevant areas in the deal, so we can highlight unintended consequences and help shape outcomes in mutually beneficial ways. We would welcome continued in-depth engagement from DIT through the Regulated Professions Advisory Group throughout the process.

Is there anything else that you would want to say about the UK's future trade and investment relationship with Switzerland?

- 16 Trade can provide an important opportunity to promote good regulatory practice. We see benefits for both the UK's and Switzerland's health and care system if our respective professional regulation and education systems are better able to learn

from one another, so that we are continuously pushing forward innovation and best practice. We think that a trade deal could be an important enabler for this by providing a high-level framework which allows for closer regulatory engagement and knowledge exchange.

- 17 The UK has historically relied on recruiting nurses and midwives trained overseas. We know that internationally-trained professionals bring a wealth of skills and insights to the UK. However international nursing and midwifery professionals, and trade deals facilitating their movement and registration, should not be seen as a panacea to workforce shortages in the UK.