The case for working with refugee healthcare professionals:
an equality and diversity perspective

There is a strong business, legal and community case for the NHS to champion the training and employment of refugee healthcare professionals in the NHS. From an equality and diversity perspective, the inclusion of refugee healthcare professionals in the NHS workforce strengthens the ability of NHS organisations to meet their equality and diversity requirements and deliver a higher quality service to their clients and wider community.

The business case
Refugee healthcare professionals are often highly educated and bring with them years of significant and impressive experience when they settle in the UK. Here are four compelling arguments to help you get organisational buy-in to training and recruiting refugee healthcare professionals:

1. Refugee healthcare professionals provide a wide pool of talent, skills, experience, resources and ideas.
2. The employment of refugee healthcare professionals fills workforce gaps in a fluctuating labour market.
3. The NHS has a moral and social responsibility as an employer to provide an opportunity to trained and experienced health professionals to use their skills in the UK and ensure they are not wasted.
4. There is a high retention rate amongst refugee healthcare professionals as many remain in the UK for the rest of their working lives. This represents a good return on investment.

The legal case
As a public body and the largest employer in Europe, it is crucial for the NHS to be a leading example of good practice. In 2000, the Race Relations Act was amended to give public authorities a new statutory duty to promote racial equality and good race relations. According to the Equality and Human Rights Commission, promoting human rights can also bring competitive advantage to public authorities in terms of employment functions, for example by:

- achieving a more representative workforce
- attracting and keeping staff
- improving staff morale and productivity
- improving staff management
- identifying and developing good practice
- identifying discriminatory outcomes for any groups of employees
- avoiding claims of unlawful discrimination.

The Race Relations Act also requires NHS trusts to produce a Race Equality Scheme (RES) which should detail how they are carrying out their duties under the law. A number of public bodies have explicitly included refugees in their RES under the black and minority ethnic (BME) community. Targeting refugee healthcare professionals and integrating them into your RES will help you comply with the necessary legal requirements.
The community case

Employing refugee healthcare professionals brings with it numerous societal benefits, including:

- Increasing access to healthcare from refugee communities – employing people from refugee communities to deliver NHS services provides an opportunity to ensure that services meet the needs of that community and could result in more people from refugee communities accessing healthcare services appropriately.
- Your organisation can become a service of choice for patients and employees from refugee communities.
- Reducing worklessness in disadvantaged refugee communities has an impact on health. Employment of refugee professionals in public-facing roles also provides role models for the refugee community.

How to get involved

There are many ways employers can get involved in the Refugee Healthcare Professionals Programme, such as:

- providing placement opportunities ranging from clinical apprenticeships, clinical attachments and supervised practice to more general work placements
- contributing to the teaching programmes by providing lecturers or people to delivery sessions with refugee healthcare professionals
- providing mentors or contributing to advice and guidance sessions.

Refugee healthcare professional engagement in practice

There are a number of highly successful projects assisting refugee healthcare professionals dotted all around the country. For example, Reache North West, based at Salford Royal Foundation Trust, recently celebrated its fifth anniversary and in this short time has helped over 100 refugee healthcare professionals enter paid employment.

A number of trusts are delivering a Clinical Attachment Placements Scheme (CAPS) where refugee healthcare professionals undertake a three month placement in a supernumerary role in an NHS organisation. CAPS is being delivered in the North West by Reache North West and in London by the London Deanery.

Thirty-five refugee doctors are now working as GPs having been trained through the London Deanery.

Tower Hamlets PCT trained 32 refugee and overseas health professionals to work as healthcare assistants in primary care, most of whom were subsequently employed by local practices. The community dental service at Tower Hamlets PCT also employed eight refugee dentists as dental link workers.

“I manage 100 people and have worked in this PCT for 15 years and I will say it is rare to work with this level of consistent self-motivation, enthusiasm and dedication – they never seemed to lose that momentum, were filled with ideas and always looking at how they could improve the service. Not only that, but because of their unique background and range of experiences they tended to bring solutions to problems that had a unique flavour. Our project was very successful anyway but having this workforce to draw on meant the difference between bronze and gold.”

Ursula Bennett
Head of Dentistry at Tower Hamlets PCT

If you want to find out how you and your organisation can make a difference, you can find out more information at www.nhsemployers.org/refugees or get in touch by emailing RefugeeEmployment@nhsemployers.org or calling 020 7074 3354