

## Nurses on the move: implications of internal migration in the UK

Migration of healthcare professionals across and within national boundaries may benefit individual career progress but can result in certain regions and countries having insufficient resources to meet healthcare needs<sup>(1,2)</sup>. Developing strategies to ensure a balanced distribution of staff requires information about patterns of migration but this is often inaccurate and lacks comparability across borders<sup>(1)</sup>. Here we consider how regionally comparable data can inform nursing workforce planning in the UK; we draw on a Nursing Research Unit study of nurses' movements between regions<sup>(3,4)</sup>, and other research on the internal migration patterns of health professionals<sup>(5-9)</sup> and of the general population<sup>(10-14)</sup>.

### Analysing patterns of UK internal migration

Internal migration of the UK general population has been investigated using:

- Censuses<sup>(10)</sup>; the longitudinal study linking individuals across censuses<sup>(11)</sup>; the National Health Service Central Register<sup>(11)</sup>; the Labour Force Survey<sup>(12)</sup> and the British Household Panel Survey<sup>(11,13)</sup>.
- Studies of nurses in these data sets have investigated satisfaction and retention but analyses of internal migration patterns are limited by sample size and incomplete career histories.
- The new Electronic Staff Record (ESR) system will provide a job movement record between NHS organizations but not periods in non-NHS healthcare organizations.
- The UK Nursing and Midwifery Council requires nurses to re-register every three years; so career histories are incomplete.
- Longitudinal research based on representative national samples and comprising complete career histories, reveals more complete patterns of internal migration for doctors<sup>(5)</sup> and nurses<sup>(3,4)</sup>.

### Do English regions retain their locally trained nurses?

- The majority (64%) of nurses qualifying in England worked continuously in the region in which they had trained for 3 years after qualification<sup>(3)</sup>.
- London retained fewest nurses (55%) while North West region retained most (79%)<sup>(3,4)</sup>. Similar findings in general population studies are attributed to: stronger local and cultural identities in northern and western parts of the country; and high living costs in the South-East increasing likelihood of leaving<sup>(11,13)</sup>.
- Regional retention may vary by course: in the West Midlands, 69% of diploma nurse qualifiers were retained in early career<sup>(4)</sup> compared with just under half of degree qualifiers during the same period<sup>(6)</sup>

## Do some regions gain nurses at the expense of others?

- In early career, many nurses take jobs outside their training region<sup>(3,6)</sup>. General population migration studies suggest this is a means of gaining experience and skills to enhance subsequent progress<sup>(13)</sup>.
- London and the South-East are net losers of nurses<sup>(3,4)</sup>. Similar findings have been reported for doctors<sup>(5)</sup> and all health professionals<sup>(9)</sup>. General population studies indicate that London and the South East may act as an escalator region; i.e. people migrate there to gain training and experience to enhance subsequent progress<sup>(11)</sup> but then leave in response to high living costs<sup>(11,13)</sup>.
- Northern and North-West regions were also net losers of nurses, although having lower than average vacancy rates for nurses overall<sup>(3,4)</sup>. As with the general population, nurses may be less likely to move from southern to northern parts of the country than vice versa<sup>(10)</sup>.
- The South-West was a net gainer of nurses in early career<sup>(3,4)</sup>. General population studies also indicate trends to move to the South-West (and Wales) in mid to later career, as part of the wider phenomenon of counter-urbanization<sup>(10)</sup>.

## Are some groups of nurses more likely to move than others?

- Younger nurses are more mobile; with higher turnover rates in the NHS<sup>(8)</sup> and less likely to work in their training region<sup>(3,4)</sup>. General population studies confirm that mobility is highest among younger people<sup>(12,14)</sup>; reasons include career benefits and, for younger women, moving to accommodate a partner's career.
- Nurses with families are less likely to move than their childless counterparts<sup>(3,4)</sup>. This may reflect findings for the general population attributed to stability of children's education<sup>(14)</sup>.

## Understanding patterns of UK internal migration: policy implications

### Regional retention strategies

- Recruitment of local students, established in the housing market, may reduce the loss from training region. Availability of affordable accommodation and childcare is likely to influence migration<sup>(9)</sup>.
- Keeping in touch with locally trained nurses who move may encourage a subsequent return.
- Retention strategies in early career include: access to continuing education; peer support; preceptorship; and rotation to optimize career development through increasing the range of clinical experience<sup>(7)</sup>.

### Developing national tracking systems

Recommendations for systems to track nurses' movements<sup>(1)</sup> will entail:

- Allocating each nurse a unique identifier to ensure record linkage.
- Using postcodes to identify place of residence/work. Postcodes are less likely to change than administrative regions and can be grouped into larger units for analysis<sup>(3)</sup>.
- Developing and using a consistent definition of retention in the nursing workforce of a specific geographical area<sup>(3)</sup>.
- Longitudinal in-depth work on reasons for moving and future plans.
- Ensuring sufficient numbers of skilled personnel to implement followup systems, ensure high participation rates and analyse data<sup>(3)</sup>.

### Key issues for policy

- Understanding internal UK migration patterns requires national data that are comparable across regional boundaries and contain complete event histories.
- Robust data can inform strategies to retain locally trained workforces and attract new entrants.
- Many factors influencing mobility of nurses are reflected in the general population; strategy development should take place within this broader context.

## References

1. Diallo K (2004) Data on the migration of health-care workers: sources, uses and challenges. *Bulletin of the World Health Organisation* 82 (8): 601-607
2. International Council of Nurses (2002) *Career moves and migration: critical questions*. ICN, Geneva, Switzerland
3. Robinson S, Murrells T, Griffiths P (in press) Investigating the dynamics of nurse migration in early career: a questionnaire survey of variation in regional retention of diploma qualifiers in England. *International Journal of Nursing Studies*
4. Murrells T, Robinson S (2006) *Regional profiles of diploma nurses retention in early career*. Working paper available from Nursing Research Unit, King's College London
5. Parkhouse J, Lambert T (1997) Home, training and work: mobility of British doctors. *Medical Education* 31(6): 399-407
6. Wheeler H, Cross V, Anthony D (2001) Limitations, frustrations and opportunities: a follow-up of nursing graduates from the University of Birmingham. *Journal of Advanced Nursing* 32 (4): 842-856
7. Gould D (2004) Locally targeted initiatives to improve staffing levels by senior nurses responsible for recruitment and retention in acute NHS trusts in England. *Journal of Nursing Management* 14: 255-261
8. Gray A, Phillips V (1996) Labour turnover in the British National Health Service: a labour market analysis. *Health Policy* 36: 273-289
9. Hutt R, Buchan J (2005) *Trends in London's NHS workforce: an updated analysis of key data*. King's Fund for London, London
10. Boyle P (1994) Metropolitan outmigration in England and Wales 1980-81. *Urban Studies* 31 (10): 1707-1722
11. Fielding A (1992) Migration and social mobility: South-East England as an escalator region. *Regional Studies* 26 (1): 1-15
12. Dixon S (2003) Migration within Britain for job reasons. *Labour Market Trends* April 2003 191-201
13. Clark W, Huang Y (2004) Linking migration and mobility: individual and contextual effects in housing markets in the UK. *Regional Studies* 38 (6): 617-628
14. Green A (2004) Is relocation redundant? Observations on the changing nature and impacts of employment-related mobility in the UK. *Regional Studies* 38 (6): 629-641