

## **Scotland's Future: The Scottish Government's White Paper on Independence**

### **Background**

In September 2013, BMA Scotland published a discussion paper: *Independence Referendum 2014: Implications for Health* to raise some key questions on practical issues that are of direct relevance to doctors in their working lives and which, should there be a "YES" vote in the referendum, would need to be addressed as a priority during the subsequent transition to independence.

In the paper, the BMA focused on key issues for the medical profession:

- Undergraduate Medical Education
- Postgraduate Medical Education and Training
- Regulation of the Medical Profession
- Medical Workforce, Contracts and Pay
- Pensions
- Immigration
- Research

### **Introduction**

This paper considers the content of the White Paper in response to the questions posed in our discussion document. The 'answers' are directly quoted extracts and do not include any analysis or opinion as the BMA remains neutral in this debate. As stated previously, there are widely divergent and deeply held personal views on independence among our membership and we do not believe that it would be appropriate for us to suggest or influence how they choose to vote on such a highly sensitive political matter.

Questions raised in the BMA Scotland discussion document have clearly influenced some of the health related content of the Q&As in Section 5.

Please note that these extracts are not a comprehensive listing of all references in the White Paper relating to each topic.

### **Next Steps**

BMA Scotland will continue to engage in discussions with Scottish Government on the issues highlighted in our original document to ensure that the pre-referendum debates are as fully informed on the range of potential healthcare issues following a 'yes' vote as possible.

BMA Scotland Paper	White Paper Response	Page in White Paper
<p><b>Undergraduate Medical Education:</b> Current and future medical students will want to be reassured that:</p> <ul style="list-style-type: none"> <li>• Scottish Universities will continue to receive funding sufficient to retain their world class standing;</li> <li>• There is a clear and unambiguous position on tuition fee arrangements for students from RUK;</li> <li>• Students from lower economic backgrounds are not deterred from studying medicine on the basis of cost;</li> <li>• Scotland has a sufficient future medical workforce.</li> </ul>	<p>“On independence, Scottish domiciled students will continue to have free access to higher education. This guarantee will save Scottish students up to £9.000 a year compared with the cost of studying in England.”</p> <p>“[The] divergence in funding policy between Scotland and England, and resulting disparity in the cost of securing a university education, creates a huge financial incentive for students from England to study in Scotland. In that context, and to ensure Scottish students remain able to study at Scottish higher education institutions, the Government had little option but to allow Scottish institutions to set their own tuition fees for students from the rest of the UK at a rate no higher than the maximum annual tuition fee rate charged to such students by universities elsewhere in the UK...”</p> <p>“Following independence, the Scottish Government proposes to maintain the status quo by continuing our current policy of charging fees to students from the rest of the UK to study at Scottish higher education institutions...”</p> <p>“We believe that in an independent Scotland it will be possible for an objective justification for this charging regime to be established. On that basis, we consider that retention of tuition fees for students, based on residence in the rest of the UK, is an appropriate and necessary measure to ensure Scottish domiciled students continue to have access to higher education opportunities.”</p> <p>“With independence, we will continue to support access to higher education in Scotland for students from elsewhere in the EU in accordance with our support for student mobility across Europe.”</p>	<p>P198</p>

<p><b>Postgraduate Medical Education and Training</b> Doctors will want to know whether:</p> <ul style="list-style-type: none"> <li>• There would continue to be consistency of structure in medical education and training with other parts of the UK;</li> <li>• There will be mutual recognition of qualifications across UK Borders;</li> <li>• The role of the medical royal colleges in setting standards and curricula would continue.</li> </ul>	<p>From Section 5 (Q&amp;A) Q: Will an independent Scotland have to put in place new arrangements for medical training and education? A: No. Scotland already has five medical schools, which continue to attract high numbers of undergraduates from across Scotland and England, Wales and Northern Ireland, as well as students from overseas, who want to study medicine.</p> <p>Medical education operates in a world-wide market and Scotland continues to enjoy a well earned reputation for providing trainee doctors with high quality training and development opportunities. Given these strengths, we see co-operation on medical training continuing on the same four-country basis as today.</p>	<p>Page 439</p>
<p><b>Regulation of the medical profession</b> Doctors will want to know:</p> <ul style="list-style-type: none"> <li>• How the medical profession will be regulated;</li> <li>• How the responsibility for regulating the medical profession would be transferred to Scotland;</li> <li>• Whether there would still be a role for the GMC and what it would be.</li> </ul>	<p>“Scotland is already responsible for the regulation of some health professionals – those who came to be regulated after the establishment of the Scottish Parliament. After independence we will become responsible for all regulation. We will seek to co-operate with Westminster, and the devolved administrations to ensure that health professional regulation is maintained in the best interests of patient safety and the consistent treatment of healthcare professionals. We will also maintain existing professional healthcare regulatory bodies, which are funded by fees from registrants, and will continue to operate in Scotland after independence.”</p>	<p>Page 176</p>
<p><b>Medical workforce, contracts and pay</b> Doctors will want to know:</p> <ul style="list-style-type: none"> <li>• Whether the structure of the medical workforce will remain broadly similar to that in other parts of the UK;</li> <li>• How the pay of doctors will be determined;</li> <li>• Whether contracts will be negotiated on a similar basis to current arrangements.</li> </ul>	<p>From Section 5 (Q&amp;A) Q: Will an independent Scotland maintain the current number of doctors and nurses in the NHS? A: In Scotland’s NHS, staffing decisions are made by Health Boards in line with their own local needs and circumstances. This will continue to be the case on independence...</p>	<p>Page 437</p>

	<p>“Arrangements for reviewing NHS pay are already devolved but NHS Scotland currently operates within UK structures and modifies UK agreements to reflect Scottish circumstances where necessary. With independence, we will review the machinery for pay determination in partnership, including the potential for improvement across the wider Scottish public sector.”</p> <p>From Section 5 (Q&amp;A)  <b>Q:</b> Will medical workforce representatives participate in NHS Scotland pay negotiation processes after independence?</p> <p><b>A:</b> Yes. Responsibility for pay, terms and conditions of service for staff in NHS Scotland is already devolved.</p> <p>The Scottish Government will ensure that they continue to have independent pay advice when setting pay for NHS Scotland doctors and dentists.</p> <p>In recent years, the Scottish Government has successfully developed a Scottish GP contract with the British Medical Association, and with independence we will continue to work with them to ensure that GP contracts are developed to meet the needs and circumstances of the people of Scotland.</p> <p>Similarly, for hospital-based doctors and dentists, the Scottish Government will work with the BMA, and seek to co-operate with the Westminster Government where appropriate, to negotiate pay, terms and conditions.</p>	<p>Page 176</p> <p>Page 439</p>
<p><b>Pensions</b>  Doctors will want to know:</p> <ul style="list-style-type: none"> <li>• Whether pension transfer arrangements between pension schemes across the UK would continue to be possible in an independent Scotland.</li> </ul>	<p>“The Scottish Government is fully committed to providing a fair, affordable and sustainable pension and reward package to public sector employees.”</p> <p>From Section 5 (Q&amp;A)  <b>Q:</b> What will independence mean for the existing rights of members of affected public sector pension schemes?</p>	<p>Page 149</p> <p>Page 432</p>

	<p>A: In an independent Scotland, all public service provision rights and entitlements which have been accrued will continue to be fully protected and accessible – whether they have been accrued in schemes already executively devolved to Scotland or those currently reserved to Westminster. Article 1 of Protocol 1 of the European Convention on Human Rights means that pension rights are property rights under the Convention, which governments must respect.</p> <p>There will be no difference to individual contribution rates or benefit levels as a result of independence.</p> <p>On independence, the legislation and rules governing public sector pension schemes, whether reserved or already executively devolved to Scotland, will continue to apply (the “continuity of law principle”). The arrangements for these public sector schemes will therefore continue to operate as at present bridging the period before and after the date of Scotland’s independence.</p> <p>“In the past, public sector pensions policy has been imposed on Scotland with insufficient engagement and consultation. In an independent Scotland, this Government plans that the approach to negotiations about any future changes to public sector pensions will be positive and inclusive, rather than confrontational.</p> <p>“In the first term of an independent parliament, this Government will establish an independent commission to review and make recommendations on policy for an appropriate State Pension Age for Scotland. Within the first parliamentary term, this Government will also consider the Commission’s findings when reviewing the impact State Pension Age policy has on the working and retirement patterns of Scotland’s public servants.”</p>	Page 150
<p><b>Immigration</b> Doctors, prospective doctors, NHS employers and universities in Scotland will be interested in a number of key issues relating to immigration, in particular:</p>	<p>“We plan to continue in the current Common Travel Area with the rest of the UK and Ireland so there will be no need for border checks between an independent Scotland and England...”</p>	Page 269

<ul style="list-style-type: none"> <li>• What will be the arrangements for students from outside Scotland to attend medical school in Scotland?</li> <li>• What will their status be in relation to subsequent NHS employment in Scotland or elsewhere?</li> <li>• On what basis will NHS organisations in Scotland be able to recruit medical staff from outside Scotland?</li> </ul>	<p>“As a full member of the EU, Scottish borders will remain open to EU nationals exercising their treaty rights...”</p> <p>“A particular issue for Scotland is the post-study work visa. There are over 30,000 international students from more than 150 countries in Scotland; over 11 per cent of all students studying in Scotland are drawn from elsewhere in the EU and about 10 per cent are from the rest of the world. This Government plans to reintroduce the post-study work visa. This visa will encourage more talented people from around the world to further their education in Scotland, providing income for Scotland’s education institutions and contributing to the local economy and community diversity.”</p>	<p>Page 270</p>
<p><b>Research</b> Doctors, in particular medical academics, will want to know:</p> <ul style="list-style-type: none"> <li>• How Scotland would continue to fund medical research and retain Scotland’s reputation for excellence.</li> </ul>	<p>From Section 5 (Q&amp;A)</p> <p>Q: Will an independent Scotland set up its own research councils?</p> <p>A: There are a number of options for research funding in an independent Scotland including establishing a Scottish Research Council for the allocation of research monies or as a mechanism for directing funding into existing pan-UK research councils. We recognise the benefits – for the academic community, business and research charities across the UK – of maintaining long-term stability in research funding and systems that support initiatives of scale and researchers working together across boundaries. With independence we will seek to maintain a common research area with the rest of the UK including existing shared Research Councils.</p> <p>Q: What will be the impact of constitutional reform on funding for medical research in Scotland?</p> <p>A: Medical research is a Scottish strength. Scottish researchers win a disproportionate share of the Medical Research Council (MRC) and National Institute of Health Research (NIHR) funds for which researchers based in Scotland can apply. For example, in 2011/1, with a population share of 8.4%, researchers in Scotland won 9.8% of the total funds awarded by the MRC and won 14.6T of the total funds awarded through the NIHR funding streams open to them. There are clear benefits, for the whole medical</p>	<p>Page 452</p> <p>Page 438</p>

	<p>research community in these islands, from Scotland remaining within a research funding system with the rest of the UK. An independent Scotland, contributing directly to the overall research council budget, will be in a strong position to influence research priority setting at a UK level.</p> <p>Levels of public investment in university research will enable our researchers and universities to remain internationally competitive, with current levels of public investment in university research, through the Scottish Funding Council and Research Councils, at least maintained.</p> <p>Q: How would the research councils be funded?</p> <p>A: Scotland already contributes to the funding of the Research Councils through the tax base. Following independence, Scotland would contribute directly from the Scottish Government budget giving us a clearer role in setting the strategic objectives of these bodies. With independence, we would intend to negotiate with Westminster a fair funding formula for Scotland’s contribution based on population share but taking reasonable account of the fact that the amount of research funding received by Scottish institutions from the Research Councils may reflect higher or lower levels of funding.</p>	Page 453
<p><b>Other issues: Employment Law</b></p>	<p>“With independence powers over employment legislation will transfer from Westminster to Scotland. Employment law and regulations cover minimum terms and conditions, maternity and paternity rights, worker representation, the rules around unions and collective bargaining and the minimum wage.</p> <p>“The Scottish Government has adopted a strong social partnership approach, working with the voluntary sector, unions, employer associations and employers directly. With independence we will build on this approach.</p> <p>“We have proposed a Fair Work Commission which, as part of a remit, will deliver the mechanism for uprating the National Minimum Wage.</p>	Page 105

	<p>“We will also establish a National Convention on Employment and Labour Relations. Bringing together labour market regulation and other employment-related policies in a forum which encourages direct and constructive dialogue across all key stakeholders will be a major advantage. This could, in principle range from a focus on high level issues such as labour market reform, to sectoral issues such as addressing skills shortages in key sectors and particular policy initiatives such as the living wage”</p>	
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