



**TYNWALD COURT  
OFFICIAL REPORT**

**RECORTYS OIKOIL  
QUAIYL TINVAAL**

**PROCEEDINGS**

**DAALTYN**

**(HANSARD)**

**SELECT COMMITTEE ON IMMIGRATION**

**BING ER-LHEH TINVAAL MYCHIONE  
ARRAGHEY STIAGH 'SYN ELLAN**

**Douglas, Wednesday, 7th November 2007**

**Members Present:**

Chairman: The Speaker of the House of Keys (Hon. S C Rodan)  
 Mrs C M Christian, MLC  
 Mr R W Henderson, MHK  
 Mr J P Watterson. MHK

*Clerk:*  
 Mr L Crellin

*Apologies:* Mr Q B Gill, MHK

**Business transacted**

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*The Committee sat in private at 12.36 p.m.*

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## Tynwald Select Committee on Immigration

*The Committee sat in public at 10.37 a.m.  
in the Millennium Conference Room,  
Legislative Buildings, Douglas*

[MR SPEAKER *in the Chair*]

### Procedural

**The Chairman (The Speaker of the House of Keys, the Hon. S C Rodan):** Good morning everybody and welcome to this meeting, which is a sitting of the Select Committee of Tynwald on Immigration. We are hearing evidence in public session this morning.

The Committee was established by Tynwald in January of this year to examine and review the operation and adequacy of the existing legislation available to the Isle of Man for monitoring and controlling immigration to the Island.

If I could introduce my colleagues on the Committee: on my right is Mr Bill Henderson MHK; Mrs Clare Christian MLC; Mr Juan Watterson MHK; Mr Gill is unable to be with us this morning.

The other member of the Committee is Mr Les Crellin, the Clerk of the Committee; and Mr Clive Alford is the Hansard Editor responsible for recording today's proceedings, which will be published in due course and made available to the public. At this point, can I ask everyone who has a mobile phone to ensure that it is switched off to avoid any interference with the recording.

### EVIDENCE OF MR K CRELLIN AND MR D OLDAM

**The Chairman:** It is my pleasure to welcome today, before the Committee, Mr Ken Crellin and Mr Darren Oldam from the Department of Health and Social Security, and specifically from the Social Security Division.

Could I ask you gentlemen to introduce yourselves, with your titles and your positions within the Department.

**Mr Crellin:** Yes, Ken Crellin, Director of Social Security in the DHSS.

**Mr Oldam:** Darren Oldam, Deputy Director, with specific responsibility for policy and legislation.

**The Chairman:** Good morning, gentlemen and thank you for joining us.

We have had from you – and we thank you for it – some while ago, written evidence in respect of various Social Security issues concerning the impact of immigration on services delivered by the Social Security Division. At this point, just for the public record, I would wish to make absolutely clear, for the avoidance of any misunderstanding,

that a member of the Committee, Mr Juan Watterson, of course, is a political Member of the DHSS and has responsibility for Social Security. He will not be directly taking part in the questioning session this morning, and on this Committee he is, of course, with us in a parliamentary capacity, not in his Department capacity.

So, Mr Crellin, if I could begin by asking you to summarise the legislation governing contributions and benefits. Effectively, who has to pay into the system and who benefits from the system in the Isle of Man?

**Mr Crellin:** In broad terms, Mr Chairman, anybody who comes to work on the Isle of Man has to pay national insurance contributions to the Isle of Man National Insurance Fund. This could be a person from the UK or a person from abroad. If they want to come and work in the Isle of Man, they must pay contributions if they meet prescribed conditions, i.e. their earnings levels meet a certain level, or they are in self-employment and are in business on their own account.

**The Chairman:** Those who make contribution-based benefits have to be in possession of a national insurance contribution number.

**Mr Crellin:** Indeed, Chairman.

For those persons who come from the UK to work in the Isle of Man, they will ordinarily have been issued with a national insurance number within the UK system. That number is valid for the Isle of Man, so they would retain that number.

For persons who come from abroad, who have not previously obtained a national insurance number within the UK, the number would be issued by us in the Isle of Man, specifically Social Security Division, and there are a number of checks that are undertaken to issue that number. A number *has* to be issued to an individual to enable them to either undertake work and pay contributions and/or access the benefits system, in terms of if they are working, a national insurance number has to be issued before they will be granted a work permit to work in the Island.

So there are a number of checks in place to ensure that the Social Security system is aware of every individual coming in and wishing to work.

**The Chairman:** We will come on, I think, to the detail of that, about the procedures for acquiring, and checks on, NI numbers.

As well as the contributory-based benefits, though, there are non-contributory based. Could you just outline how entitlement to those is arrived at.

**Mr Crellin:** The benefit system is effectively, as you indicated, split into two general provisions: those that are based on contributions and those which are what we would call revenue funded, i.e. funded directly from the Government of the Isle of Man. To access the revenue benefits, generally there are residential qualifications that must be met. For example, Income Support – which is an out-of-work benefit which individuals can claim if they have insufficient resources – has a residential qualification of five years linked to the Isle of Man worker test.

So there are a number of tests in place to ensure that there are no undue drawings on public funds. Indeed, if you

### Procedural

are a non-EC national who comes to live in the Isle of Man, the granting of a visa is normally on the basis that you do not have access to public funds while you are on the Island, and that restriction has been replicated in Social Security legislation to make it that unless there are very specific circumstances, you cannot have access to public funds to support you while you are here – public funds, as in Social Security public funds.

**The Chairman:** Are you talking about people admitted to the Island... non-EU persons who are not working, when you say that?

**Mr Crellin:** This is for anybody who... A non-EU or EA person who comes to the Island will ordinarily have their passport restricted to say that they cannot have access to public funds, whether they are working or not. Public funds in that respect are Social Security benefits. So, regardless of whether they are working or not, that restriction will be in place.

**The Chairman:** If we turn, then, to the situation where we have contribution-based benefits, then – the requirement for a national insurance number – what is the procedure whereby somebody from within the EU, or outside the EU, acquires that number? We have evidence that there are differences. If you could just explain to us the difference in the procedure?

**Mr Crellin:** In an application for a national insurance number, it is a requirement for the individual to attend the office in person, to be interviewed by a number of officers, and a number of procedures in place. They have to produce evidence that they are who they are – generally, their passport. There are a number of checks undertaken. There are checks to see if there is any particular problem. We would liaise with Police and Immigration over these checks to ensure that the person is effectively who they say they are, and a number should be issued accordingly.

**The Chairman:** So that is for persons acquiring an NI number in the Isle of Man –

**Mr Crellin:** Yes.

**The Chairman:** – and that would be whether they were from the EU or outside the EU?

**Mr Crellin:** Yes, the principle is the same, Mr Chairman, inasmuch as we have to ensure that the person who is applying for the number is the person who would be shown on the application. So that is why it is always done in person. We will not accept postal applications for a national insurance number.

**The Chairman:** Those who arrive here with NI numbers, having acquired them in the UK, are there any checks made on their entitlement to hold such a number?

**Mr Crellin:** I think the short answer is no, Mr Chairman, inasmuch as that the expectation will be that the UK authorities will have done the similar process that we undertake in the Island when issuing the number in the first instance.

**The Chairman:** When we see that the Control of Employment regulations require a work permit from those from the UK or the EU, and for EU nationals to require a NI number in order to work, how does that work when someone applies for a work permit? What liaison takes place with the Department of Trade and Industry from the time of application for a permit? Can you just describe how you and the DTI work together.

**Mr Crellin:** In simple terms, Mr Chairman, the DTI will not issue a work permit until the individual has a national insurance number. So if the DTI receive an application for a work permit without a national insurance number, the individual is referred to the Department for the Department then to go through the process of issuing a number, and the work permit is withheld until such time as that number is issued and we have gone through all the checks that we need to do.

**The Chairman:** Would it be possible for somebody from the UK, who already had a number, to obtain another one in the Isle of Man?

**Mr Crellin:** If somebody coming from the UK applies for a national insurance number, what we would normally do... The expectation would be that they would have a national insurance number, so it would not be the norm. We have a system whereby we can check with the UK equivalent of our division to see whether a number exists on their system.

**The Chairman:** Just moving on for a moment, the actual benefits that having an NI number entitles you to claim... How long would someone require to be resident in the Isle of Man before they could benefit? If you could just tell us what the benefits are and if there is any difference in that residency period.

**Mr Crellin:** As I mentioned previously, Mr Chairman, the benefits system can be readily divided into two: the ones you have to pay contributions to qualify –

**The Chairman:** I am talking about the contributions.

**Mr Crellin:** You want the contributions, yes. In simple terms, an individual will probably have to pay at least two years' contributions to qualify for the main benefits, which are Incapacity Benefit and Jobseeker's Allowance, a minimum of two years' contributions. In terms of other benefits, the only one I think that is slightly different is Maternity Allowance, where you have a qualifying period of 26 weeks within a 66-week period, if I am correct...

**Mr Oldam:** That is correct, yes, in the 66-week period immediately prior to the expected date of childbirth the claimant must have worked for at least 26 of those weeks and have paid contributions, or had earnings of at least £30 a week for at least 13 of those 26 weeks.

**Mr Crellin:** Those are what we regard as short-term benefits. In terms of the longer-term benefits, like state retirement pension, of course, you need to pay for most of your working life, but a minimum of 10 years, before you qualify for the basic state pension.

**The Chairman:** Does it make any difference if somebody comes here from the EU and a country with which the Isle of Man has a reciprocal agreement?

**Mr Crellin:** Indeed, yes.

**The Chairman:** If you could just tell us, for the record, how this system of reciprocal agreements has come into being?

**Mr Crellin:** Could I ask Mr Oldam to respond to that, Chairman, because it is his specific responsibility?

**Mr Oldam:** The important thing to know, Mr Chairman, first of all is, of course, the Isle of Man is not a member state of the EC and what are known as the Migratory Workers Regulations – EC regulations – do not impinge upon the Isle of Man.

What instead we rely on, for migratory workers' protection, are the bilateral agreements which were established by the UK Government with various countries around the world – not just within Europe – predominantly in the 1950s and 1960s, and the Isle of Man essentially piggybacks onto those agreements by being defined within the territory of the United Kingdom.

Certainly, in the case of the agreements with European countries, the majority of those agreements say that where a person has paid social insurance contributions in their home country and have then come to live in the UK or the Isle of Man, then those contributions may count towards contributory benefits in the UK or the Isle of Man, but only after they have commenced a period of insurance. In other words, that they have at least had some period of work in the new territory.

Reciprocal agreements outside Europe tend to be less comprehensive, and a lot just simply deal with the prevention of duplicating national insurance contributions. So, for example, if they are sent by their employer in the United States to work in the Isle of Man, then they may only have to pay contributions to the US system, not to the Isle of Man, but it does not necessarily provide for any benefits.

**The Chairman:** So what we are saying is that normally there is a two-year residency period required.

**Mr Oldam:** Yes. If they are from a country which does not have a reciprocal agreement with the UK or Isle of Man, then we are looking, broadly speaking, at having to have paid contributions here for two years here before they could access the contributory benefits system.

**The Chairman:** So if somebody is claiming within that two years, it would be on the basis that it is on the back of the reciprocal social security agreement to which they contributed in their home country?

**Mr Oldam:** That is correct, Mr Chairman. They have come from a country which the Isle of Man has a reciprocal agreement with. They have come to the Isle of Man, they have commenced a period of insurance. For some reason then there has been an interruption in their employment – either there has been redundancy, or through a temporary period of sickness – and they are able to use the social insurance

contributions paid in their home country to help them qualify for benefits here.

**The Chairman:** Could you give us an indication of what those countries are?

**Mr Oldam:** They are the majority of continental Europe: France, Germany, Holland. I will be able to give a more comprehensive list.

**The Chairman:** Okay. Are we talking about also the new European countries, like Poland?

**Mr Oldam:** No, as statistics show, Mr Chairman, the vast majority of immigrants to the Isle of Man now are coming from Poland. There is no reciprocal agreement between the UK, Isle of Man and Poland. The relationship for migratory workers between the UK and Poland relies upon the European Community regulations, not on the old bilaterals.

**The Chairman:** In that case, how would the European Community regulations give entitlement to benefits over and above the requirements for two years' residency?

**Mr Crellin:** They would not in the Island.

**Mr Oldam:** They have no effect in the Island.

**The Chairman:** No effect in the Island, right.

Just staying then with contributory benefits and the system, I will just give my colleagues an opportunity if they have any particular points at this stage.

Mr Henderson.

**Mr Henderson:** Thank you, Vainstyr Loayreyder.

I just want to ask you some simple and possibly naïve-sounding questions, gentlemen, but because we are sitting in public today and matters are being recorded for the public record and a future Tynwald debate, I think it is worth clarifying a few issues.

A Polish person comes to the Isle of Man who has applied for a job to work for, say, Dandara. A position is there. They have to first come to see you for a national insurance number. You presumably then check with Dandara to say that 'Yes, we have got this position and this person has applied,' or some such sort of check to see that they are *bona fide*. You check their passport and so on. You issue them with the NI number. Consequent upon that, then the work permit is applied for and some sort of visa is issued then for their time here in the Isle of Man to go and work with Dandara.

Say it was for 12 months, or whatever, they arrive here, start work, and they have only been here a week, is the example, and they feel they could be entitled to some sort of benefit. So they come down and bash on your door. What would they be entitled to, if anything, and what would your response be to that person who says, 'Look, I'm earning minimal wages here. I may want to bring my family over.' What would you be telling them?

**Mr Oldam:** Taking the scenario that you have described for us there of a Polish person, as I stated before, there is no reciprocal agreement with Poland. They would not be able to meet the residential qualification for the likes of Income

Support or income-based Jobseeker's Allowance, which is the equivalent of Income Support for the unemployed, which generally speaking carries a five-year residential qualification for new immigrants.

They would not be able to access either the contribution-based Jobseeker's Allowance if they had become redundant, or Incapacity Benefit if they had fallen ill, because of the contribution tests that apply to those benefits, which require, broadly speaking, the person to have paid contributions for the two years prior to their period of interruption of employment.

**Mr Henderson:** So basically, you would be saying, 'Well, actually, we cannot give you anything.'

**Mr Oldam:** That is correct: 'You are not entitled to the insurance benefits because you have not worked and paid into the Isle of Man system for long enough, and you are not entitled to the means-tested benefits because you do not satisfy the residential qualification.'

**The Chairman:** That residential qualification being...?

**Mr Oldam:** What it says in the legislation, Mr Chairman, is they should be an 'Isle of Man worker'.

Broadly speaking, the most likely way of qualifying as an Isle of Man worker for a new immigrant is that they have lived on the Island for a minimum period of five years.

**The Chairman:** Thank you. I do not wish to interrupt you, but...

So what you are saying, for a non-contribution-based benefit like Income Support, where somebody has arrived in the Isle of Man, they are in difficult circumstances and they come looking for Income Support, because they do not meet the test of having acquired residency through definition of an Isle of Man worker status – which is only given after five years – they are not entitled for that until that five-year period is up.

**Mr Oldam:** That is correct, broadly speaking. There is a certain exception to that, and the Income Support legislation says that, notwithstanding they are not an Isle of Man worker, if disqualification from benefit would be exceptionally harsh or oppressive, then benefit may still be awarded. That, of course, requires some judgement on behalf of, in the first instance, the adjudication officer, and if he decides that, no, there is nothing exceptional about this case, then the claimant may be able to appeal that decision to the independent tribunal and the tribunal will revisit the question as to whether it would be exceptionally harsh or oppressive.

**The Chairman:** Just before I invite Mr Henderson back, can you give us an idea of the numbers of such cases, if any, where an application has gone through the system of claiming harsh and oppressive...

**Mr Oldam:** In the scenario painted of perhaps a young single person coming from Poland to work on the Isle of Man, no, we would not anticipate any claims to the tribunal in that respect, not when they have only been here for a matter of a few weeks or months.

**The Chairman:** Have there been any in the last year or couple of years?

**Mr Oldam:** Not that I am aware, sir.

**Mr Crellin:** Mr Chairman, it is important to stress it is *exceptionally* harsh and oppressive, not just harsh and oppressive.

So it is a very, what we consider quite a tough test to give them.

**The Chairman:** Back to Mr Henderson.

**Mr Henderson:** We have come across this harsh and oppressive criterion before, but you have made an interesting point: it is your understanding, or your policy, that it is not just harsh and oppressive, but you have got to apply the criterion that it is exceptionally –

**Mr Crellin:** It is in the legislation, Mr Henderson. It is not our view. The actual legislation is worded 'exceptionally harsh and oppressive'.

**Mr Henderson:** Okay, thank you.

Returning to my Polish gentleman, he builds his time up on the site and finds his wages are not so bad. He decides he wants his family to move here and manages to accomplish that through the various hurdles and prove that he can support his family and so on. Wife arrives... I could be wrong in my scenario, but there is certainly a public perception, but anyhow, the wife arrives with two or three children. They manage to get here. He is supporting the family unit, maybe in a rental accommodation, which is not a bad scenario, really, because I came by such a household last year, incidentally, it comes to mind.

The job finishes ahead of schedule on the Dandara site and this man is made redundant. He comes banging on your door and says, 'You are the Isle of Man, you are part of the UK, you are supposed to be helpful towards people. What are you going to do for me? What benefits can I get now? I am stuck.'

**Mr Oldam:** We are essentially back where we were, that the two out-of-work benefits – Jobseeker's Allowance and Incapacity Benefit – require two years' payment of contributions. That is absolute; there is no discretion in that.

**Mr Henderson:** So he could not scream for Family Allowance, Family Income Support?

**Mr Oldam:** He can certainly get Child Benefit, in respect of that child, depending upon whether he is a person who is subject to immigration control. If you are a person subject to immigration control, you cannot access public funds, and within the definition of public funds and immigration rules, is Child Benefit.

**Mr Crellin:** But our Polish worker would not be subject to immigration control because he is an EC/EU national.

**Mr Henderson:** There is a benefit he could dial into straight away, then, the Child Benefit?

**Mr Oldam:** Yes. We are not talking about huge amounts here: £19.90 per week in respect of each...

**Mr Henderson:** I realise that, gentlemen, but what I want to get on the record that in nearly all cases, a worker that I have described could not get any benefit whatsoever – whatever kind of contributory or non-contributory – but there is one and they could claim, if they knew about it, for Child Benefit if they were –

**Mr Crellin:** If the family is here, the children are here, that family could claim Child Benefit, yes.

**Mr Henderson:** What about his rented accommodation?

**Mr Oldam:** No. He would normally be assisted with housing costs through – if he was an unemployed person – income-based Jobseeker's Allowance. That benefit carries the same residential qualification, broadly Isle of Man worker test.

If he has a family and the children are established at an Isle of Man school, then you have got to start looking at whether it may be exceptionally harsh or oppressive to disqualify him from benefit, bearing in mind he has a child being educated on the Isle of Man. I have to say there are no hard and fast rules. There is nothing in legislation which helps us with this test, whether it is exceptionally harsh or oppressive. It is a judgement call.

**Mr Henderson:** Right, so he says to you: 'I am being evicted next week because I have been made redundant.' Would he have a shout in that particular circumstance?

**Mr Oldam:** I suppose the fact is we would be looking at how long has he been here, how long have the children been here. If they have only been here for a matter of a few weeks, then the upheaval would not be so great as if, for example, he had been here for three-and-a-half, four years. The children may have been at a local school for a couple of years, they are very well settled here. It would certainly be quite distraught for the children at least to be wrenched away from the school and the whole family would effectively have to go back to Poland.

**The Chairman:** But in that regard, that particular example is no different from anybody from the UK who would be treated in exactly the same position.

**Mr Oldam:** No, it is not. Correct, Chairman. It applies equally to anybody who is not an Isle of Man worker, no matter from where they came.

**Mr Henderson:** I could progress that scenario: somebody from the Philippines, or wherever, the same issue would...

**Mr Oldam:** Not quite the same issue, because the Philippines, of course, is outside the EA and there would be no access to Child Benefit then.

**Mr Henderson:** So outside the European Common Travel Area, folk could come here to work, then, if I put them into my scenario – they are entitled to absolutely nothing, basically?

**The Chairman:** And that is on the basis that there is no reciprocal Social Security agreement. That is the reason?

**Mr Oldam:** I believe there is an agreement with the Philippines, but I do not think it goes as far as benefits. I would have to check that for you, sir.

**The Chairman:** Thank you. Mr Henderson.

**Mr Henderson:** You talk about there are reciprocal arrangements predominantly with the larger industrialised nations within Europe, and you say their contributions may well be taken into account here for qualification purposes and so on.

If that happens – this is the naivety I was speaking of earlier – do any funds transfer from that country to here to build upon?

**Mr Oldam:** No, they do not. That is not generally a feature of bilateral agreements. There is no cash transfer. It merely smoothes the passage of the migratory worker.

**Mr Henderson:** So in other words, somebody who comes here, say from Holland, who has got a 20-year contribution history in Holland, they get here, might bring their family over for, say, work again on another Dandara site. This time, though, because they can show they have paid somewhere else, they dial into our system.

**Mr Oldam:** They do. That is correct. If, as you say, they had worked in Holland for a number of years and then were able to take up employment in the Isle of Man and were subsequently made redundant, then those social insurance contributions paid in Holland would come into play when we consider entitlement to contribution-based Jobseeker's Allowance on the Isle of Man.

**Mr Henderson:** Right, so they would be entitled to a lot more here than my Polish example or Philippine example?

**Mr Oldam:** Yes, because of the existence of the reciprocal agreement.

**Mr Henderson:** Even though nothing slides over from Holland to here. We just stump up.

**Mr Oldam:** Yes, in terms of the short-term benefits – Jobseeker's Allowance, Incapacity Benefit – that is correct, yes.

**Mr Henderson:** What about pension rights?

**Mr Oldam:** Pensions are slightly different. Normally what happens, there is each country takes on its own liability. So if a person has, very simply, worked 20 years in Holland and 20 years in the UK, they will get pensions from both countries, based on the number of years they have paid to that country.

**Mr Henderson:** They would pay that.

**Mr Oldam:** Yes. So Holland would pay its portion; the UK would pay its portion.

**Mr Henderson:** And what about here? Would there be any –

**Mr Oldam:** The same applies here.

**Mr Henderson:** They would have to pay in to get out.

**Mr Crellin:** I think it is important, Mr Henderson, to note that the bilateral provisions work both ways.

It is an intention that if an Isle of Man national goes to work in Holland, or the Netherlands, as you quoted before, they would benefit from the entitlement, should they need to claim anything.

**Mr Henderson:** Oh, sure. I realise there is a broader picture, but we are narrowed on this point of –

**Mr Crellin:** I accept that, but I think it is important to stress that that is the point of a bilateral agreement, to benefit both countries.

**Mr Henderson:** Oh, sure.  
Thank you, Vainstyr Loayreyder.

**The Chairman:** Thank you. Mrs Christian.

**Mrs Christian:** Yes, thank you.

Can I just revert to the process of getting a national insurance number again, please. You say you physically have to have the person in front of you.

**Mr Crellin:** Indeed.

**Mrs Christian:** So let us take the scenario... Clearly, immigration, if we consider it to be from anywhere outside this Island, there are different approaches and categories of people who are moving here, and we have been talking largely about people in the Common Travel Area, the EU countries, and so we have focused on them. But it requires a person to come here and apply for a job, or at least an employer applies for a work permit.

Is it at that point that you have liaison with the DTI, who informs you that this person is coming down to get a national insurance number? Is there a link between you and the work permits office?

**Mr Crellin:** Yes, there is, Mrs Christian.

I think it is important to stress that you cannot just come to the Island and apply for a national insurance number. So a person cannot just arrive on the Island and say, 'I want a Manx national insurance number,' because we recognise that a national insurance number is a gateway to access to the UK-Isle of Man benefits system or the national insurance system. So there has to be a reason for the issue of the national insurance number.

So the two primary reasons – the only reasons – are to access the benefit system or to work on the Island. You are quite right, the first port of call would be for an individual to apply for a self-employed permit, or an employer to apply for a work permit for that individual and at that point the application form must include a national insurance number. It is a requirement.

At that point, the DTI suspend the issue of that work permit and refer the individual to us and the matter is held

in suspense until we are satisfied that a number can be issued. Having done so, we inform the DTI and they will then subsequently issue the work permit.

**Mrs Christian:** Thank you.

Clearly, people in the Common Travel Area can come here quite freely, whether or not they are going to work, and whether or not they want a national insurance number. So physically for them to be here is not a big issue. Can I look at the situation, then, of people who apply to come to work in the Island from outside the Common Travel Area, those people who are subject to United Kingdom immigration laws, or our immigration rules.

I think this is where we have got a different category of immigration. The process there is also for them physically to come to your office, is it?

**Mr Crellin:** Absolutely, and if there is any doubt as to their credentials, for want of a better expression, we have liaison with Immigration and, if need be, we have involved them, and previous talks with Immigration have resulted in finding people who are on the Island who should not be here.

**Mrs Christian:** You will correct me if I am wrong but, as I understand it, the difference is that they have to obtain their work permit before they travel. Is that correct?

**Mr Oldam:** I do not think so, Mrs Christian, no.

**Mrs Christian:** Are we saying, then, that a person can come all the way here without an immigration approval... They have got to have an immigration approval, but normally that would be associated, wouldn't it, with an approval to work here, if they wanted to work here?

**Mr Oldam:** With respect, Mrs Christian, you are probably getting outside the grounds of our speciality here.

**Mr Crellin:** Yes. I can see where you are coming from, Mrs Christian, but I think that is a DTI question as to how the work permit... but I can understand the principle: why would they come here on speculation?

**Mrs Christian:** How do you, when they come down to your office then, in this circumstance... You would need information about how they are going to survive: are they going to work, do they have means? What are the questions you ask them before you would issue them a national insurance number?

**Mr Crellin:** The questions would be: why are they on the Island; are they going to work; is it in terms of claiming? Because in theory, you could have a female, whose partner is on the Island. The only reason they want a national insurance number is to access the Child Benefit system. That is a question of us sorting it out, but primarily, 99 per cent of applicants are here to apply for work.

So we go through the same process, so we would have to be content that DTI are already involved with the process of issuing, or they have applied for a work permit. They have effectively got a job to go to, hence they need a national insurance number to pay contributions.

**Mrs Christian:** So you look at their immigration status then –

**Mr Crellin:** We do.

**Mrs Christian:** – and liaise with the DTI immigration people.

**Mr Crellin:** DTI and Immigration, yes.

**Mrs Christian:** Thank you.

If we move back then to the issue of benefits, clearly you have, I think, illustrated that it is a fairly complex situation, depending on what country you come from, either in the Common Travel Area or outside. Can you clarify for me, please, if you can be from outside the Common Travel Area and still benefit from reciprocal agreements? I am thinking of countries, perhaps, such as Australia. I know there may be pension arrangements. Are there other national insurance reciprocal arrangements with countries?

**Mr Oldam:** Specific to Australia, Mrs Christian, the agreement which did exist between the UK and Australia was terminated at the Australians' request in March 2001, so that no longer exists, but there are others – for example, New Zealand – where provisions of those do facilitate contributions paid in one country to count in another country.

**Mrs Christian:** For more than pension purposes?

**Mr Oldam:** Yes. I cannot be more precise than that, but in terms of New Zealand, yes.

**Mr Crellin:** I think it is the agreement, which Mr Oldam pointed out, is negotiated by the UK and a lot of them go back to the 1960s, I think it is fair to say – 1950s and 1960s – that the provisions may vary per agreement. It depends who the agreement tends to be with, but there are a variety of arrangements with a variety of countries, yes.

**Mrs Christian:** You have commented that Child Benefit can be available fairly quickly. Is there any residential time required before you can claim, provided all the other reciprocal arrangements are right?

**Mr Oldam:** The general rule is that the applicant, or the child for whom Child Benefit is being claimed, must have been resident in either the Isle of Man or the United Kingdom for at least 182 days in the previous 365 – in other words, six months of the last year – but there is an exception to that in that it may be awarded earlier than that, if the applicant or partner has commenced employment on the Island.

**The Chairman:** Just sticking with Child Benefit, could you just explain to us, is it possible for somebody who residentially qualifies to claim Child Benefit in respect of children who are not resident, who do not live in the Isle of Man?

**Mr Oldam:** Generally speaking, no. However, we have two reciprocal agreements. The reasoning behind this we do not know, because I emphasise they were negotiated by the UK Government in the 1960s, and in particular, the

agreements are with Portugal and Spain. Those agreements provide that, notwithstanding the children may still be resident in Portugal or Spain, a person can access Child Benefit here in respect of those children, provided that the Portuguese or Spanish authorities are not also paying Child Benefit at the same time.

This matter has been raised with the UK Government as a matter of concern for the Island and the response we had was basically if we are only talking about very small numbers – bearing in mind we are talking about the United Kingdom here, not simply the Island – they are really not interested in renegotiating that agreement for us.

**The Chairman:** What are the numbers in respect of the Isle of Man where this is happening?

**Mr Oldam:** Probably only five or six at any one time.

**The Chairman:** Five or six?

**Mr Oldam:** Six families, yes.

**The Chairman:** Five or six families currently are in receipt of Child Benefit for children in Spain or Portugal, who live in –

**Mr Oldam:** Mr Chairman, that is five or six cases I am aware of. Whether or not they are currently in payment, I could not say, but there are five or six cases I have become aware of, where the father has been engaged in the construction industry on the Island.

**The Chairman:** What checks are made to ensure that the child is not getting benefit twice – once from the Isle of Man, and second at home in Spain?

**Mr Oldam:** The applicant is required to provide documentary evidence to the Department that the Portuguese or Spanish authority has ceased to pay Child Benefit.

**The Chairman:** Would that evidence take the form of a declaration from the home social security department that no benefits are being paid?

**Mr Oldam:** Indeed, Mr Chairman, yes.

**The Chairman:** Do you regard this as a significant problem? You said a moment ago that you raised it at a high level with Social Security in the UK, but they deemed the overall numbers to be so small it is not worth bothering about. Do we think it is worth bothering about?

**Mr Crellin:** It was a concern, Mr Chairman, hence that is why we raised it, but in terms of the overall picture, given the difficulties in renegotiating bilateral agreements, because of the complication with the EC arrangements, the UK made it quite clear that unless we could... They did not consider it being a problem, I have to say, the numbers quoted, and they were not really interested in getting involved in trying to renegotiate a complete bilateral because of the small number of cases.

**The Chairman:** So is this a situation we are going to have to live with?

**Mr Oldam:** By tolerating it, sir, yes.

**The Chairman:** And it is unique to Spain and Portugal?

**Mr Crellin:** It is, and, as Mr Oldam said previously, we have no real reason to understand why those specific agreements are different from the rest, because most of the European bilateral agreements which are in place, follow a set pattern. The provisions are fairly similar throughout them, but these two are distinctly different and there is no clear explanation as to why.

**The Chairman:** Where workers are here just for temporary employment and they residentially qualify for Child Benefit, if the child goes back to the home country and the parent still is working here, is there anything to stop them continuing to claim? How would you know?

**Mr Oldam:** Yes, we would not ordinarily pay for a child who is not residing on the Isle of Man, or is not ordinarily resident. Of course, we have children who may board out to schools in the United Kingdom, but provided they are domiciled here, then that would be okay, but if they have essentially returned to their home country, we would stop the payment of Child Benefit in respect of that child or children.

**The Chairman:** How are you notified if a child leaves the Isle of Man and goes back to the home country? Or are you notified?

**Mr Oldam:** There is an overriding obligation on any claimant to Social Security benefits to notify the Department of a change in their circumstances. So we would rely on the parent telling us that the child has returned to whichever country it may be.

**The Chairman:** Is there an obligation on the parent to report such a change in circumstances?

**Mr Oldam:** There is a statutory obligation and there are penalties for those who wilfully neglect to do so.

**Mr Crellin:** In addition, Mr Chairman, the division is also engaged in discussions with the Department of Education to marry up on a regular basis children at school with children claiming Child Benefit, so we can iron out any discrepancies, for example, where a parent has failed to notify us that their child is no longer at school. This could be not necessarily an immigrant; it could be any child who has left school.

**The Chairman:** Okay. There have been allegations in public, since the Committee was formed, that Child Benefit was being paid in respect of children resident in the Philippines. That was the example given. Is there any substance to that allegation?

**Mr Oldam:** None whatsoever, Chairman.

**Mr Crellin:** None whatsoever. There is no arrangement to pay Child Benefit, and the child would have to be here under the conditions we mentioned previously, Mr Chairman.

**The Chairman:** So if that was happening, it would be a clear breach of the law?

**Mr Crellin:** Absolutely, yes it would.

**The Chairman:** Thank you very much.  
Mr Henderson.

**Mr Henderson:** Yes, I would just like to pick up on a couple of things, gentlemen.

You mentioned that you have got these strange bilateral agreements with Spain and Portugal going back to the 1960s and when somebody arrives here, you said they have to produce some sort of document of authenticity to say that they were not claiming there. You say you accept that, but do you check with the authorities that they issued that letter, or do you take that on face value?

**Mr Crellin:** I think my understanding is that, where there are provisions in place, to actually check with the relevant authorities, but I would have to confirm. I would not want to mislead you, Mr Henderson, but I am of the view, I think, that we do take some checks as well.

**Mr Henderson:** I am sure the Committee would like to be clarified of that point, rather than taking documents at face value.

The second clarifying question was: have you got any evidence where parents have skipped the Island but used various methods to carry on claiming bogus Child Benefit claims? Has that happened, or is it a big problem, or...

**Mr Oldam:** It is certainly not one that has come to my attention, sir.

**Mr Henderson:** I am quite conscious they could use their own agency to... fraudulent, shall we say, in procuring.

**Mr Oldam:** There is certainly no evidence to substantiate that.

**Mr Henderson:** Okay. Thank you, Vainstyr Loayreyder.

**The Chairman:** Just before we move on, just to remind you, as witnesses, not to speak over a questioner. It is purely for the *Hansard*, that it gets a bit muffled, and the same applies to us not to speak over you, and I am sure we will do our best.

Mrs Christian, do you have a further point?

**Mrs Christian:** Yes, please. I would just like to clarify at what point an immigrant from outside the Common Travel Area who, when they first come to the Island is required to be self-sufficient and cannot claim benefits, eventually they may obtain indefinite leave to remain. Some may take up British citizenship. When they become a British citizen, would they then be able to partake of the whole of the benefits that are available, or is it when they get indefinite leave to remain, or does it never happen?

On the non-contributory benefits; clearly, if they have been working here, they gradually build up an entitlement to contributory benefits. What about the non-contributory benefits? When do they become entitled to those?

**Mr Crellin:** The restriction on access to public funds... If that access is removed by Immigration, they then simply fall into the category of what we regard as EEA people, who are entitled to live here. They still have to then go through the same processes, clear the same hurdles as other non-Isle of Man workers to access what we would call the revenue benefits or the income-related benefits. So it is only one of the barriers. You just remove that first barrier, which says they cannot access public funds. Once they have met that hurdle, they then have to meet all the other hurdles.

**Mrs Christian:** Do you know when that barrier is removed, or if it is removed? Or should we ask DTI about that?

**Mr Crellin:** I suspect the barrier is an immigration control barrier. I do not know, Mrs Christian, what that point is.

**Mrs Christian:** Yes, we need to put that to the Immigration people through DTI.

**Mr Crellin:** Yes.

**Mrs Christian:** You do not know when that is removed, whether it is removed, when given indefinite leave to remain, or...?

**Mr Oldam:** The only response I can give, Mrs Christian, is, as soon as they are no longer subject to immigration control, then, as Mr Crellin says, they can access benefits on the same basis as any other EEA national.

**Mrs Christian:** How do you become aware of that? You would simply check that if they came to make a claim?

**Mr Oldam:** Yes, absolutely. When we are looking at foreign nationals, we would always ask to see their passport and see whether that stamp is within the passport which says they cannot access public funds.

**Mrs Christian:** Chairman, I am conscious of the time, but we have not explored at all enforcement issues and the lack of national insurance numbers, or breach of any of the rules.

**The Chairman:** Yes, if we turn to that... We have heard quite a lot in the UK media recently about the discrepancy in the numbers of persons holding NI numbers and the discrepancy with those admitted to the UK under the various immigration schemes. What reliance can we put here in the Isle of Man on the *bona fides* of persons coming to the Isle of Man ultimately to claim either contributory benefits, or by residency qualification entitlement, to non-contributory benefits in time, where there might be a suspicion that their entry to the UK was invalid for some reason? Is there any way in the system of claiming benefit that checks are made on entitlement, or do you simply rely that the NI number, for example, has been issued appropriately?

**Mr Oldam:** In the first instance, we will check the passport. We also have certain instruments which would help us to see whether that passport has been tampered with in any way – a UV scanner, for example, magnifying glasses

– and we have actually caught out two or three cases where the passport has been tampered with, the presence of the person in the Isle of Man has been illegal and they have been deported.

So before issuing a national insurance number to a foreign immigrant, we do carry out rigorous checks. We are not flippant in issuing national insurance numbers. We have to be absolutely confident that the person is who they say they are and that their presence in the Isle of Man is legal.

**The Chairman:** Mrs Christian.

**Mrs Christian:** Can I ask you, please, about both Common Travel Area citizens and immigrants under the UK immigration law who might come into the UK and get a national insurance number there. What checks do you run between yourself and the DTI when such a person comes and applies for a work permit, already having a national insurance number, putting that national insurance number on their application form? Do the DTI or yourselves have any co-operation in terms of checking that they are genuine national insurance numbers?

**Mr Crellin:** I think the short answer is that I do not think that we actually get much involved, Mrs Christian, because if they have got a national insurance number... and the DTI are experienced officers. They know the format of a national insurance number and if they accept that it is a valid national insurance number, they would issue a permit. We would not necessarily have any access to that data.

**Mrs Christian:** If in doubt, would they refer to yourselves?

**Mr Crellin:** I think if there is a doubt, if they have got a particular problem, knowing that we can undertake checks... As I mentioned previously, we have access to the UK database from the issue of national insurance numbers. If there is any doubt, I am absolutely certain that the DTI would contact us and we would have a discussion as to what the situation was.

**The Chairman:** There is a popular perception that in the UK the border controls are inadequate and the system has broken down and really immigration into the UK is taking place in a completely uncontrolled manner by the UK Government, and immigrants, having arrived from wherever, are then entitled to be housed and claim benefit, and local authorities in the UK have excessive demands put upon them.

We have touched on some of the benefits and you have explained the criteria for claiming benefit in terms of residence. Are we saying that, in the case of the Isle of Man, because of the five-year residence requirement to acquire Isle of Man worker status for housing benefit, for example, those problems could not arise in the Isle of Man because of our different structures?

**Mr Crellin:** I think that is fair comment, Mr Chairman. Particularly with the movement of EU nationals within the European Economic area, the whole purpose of the legislation – or one purpose of the legislation – is to get treated the same as residents of the country where they are working.

So you are right in that respect, that Mr Henderson's Polish family coming into the UK, they would have the same rights as a UK resident to access local authority housing etc and can claim state benefits, the equivalent of our income support instantly if they have not any income. Over here, the safeguards in place are that they will not get access to benefits. Even if they access Child Benefit, it will not be sufficient benefit to allow them to live on the Island, so they cannot access the benefits immediately to live on and they must work to live here. To live here they must work. To work, they must get a work permit, they must go through the system.

So there is no influx of people to come and live on the Island. They do not have access to local authority housing in the same way as the UK do, so there are a number of effectively pragmatic hurdles that they have to get through to be on the Island. So therefore they must come with a purpose. The purpose will be to work.

**The Chairman:** Would you add to that hurdle the requirement for 10 years' residency to be put on public housing?

**Mr Crellin:** The lack of access to public housing, I would imagine, must be a major consideration.

**The Chairman:** A disincentive to... Therefore, if we did not have a work permit system, which was originally envisaged to manage numbers, particularly people coming in of British origin from the rest of the British Isles... If that was not in place now, there would really be nothing to stop them claiming housing benefit. There would be no other control in place, would there?

**Mr Oldam:** I am not quite sure that is true to say, Mr Chairman. We would carry out the checks, regardless of what their employment status may be, whatever their work permit status may be. We will always seek evidence of their residence on the Isle of Man, and indeed the period of that residence, to see if they meet the qualification for benefits.

**The Chairman:** But if we did not have the definition of an Isle of Man worker status, they would otherwise, as they can in the UK, get immediate access to housing benefit.

**Mr Oldam:** Certainly if we did not have a residential qualification for benefits in some form, then you would be absolutely correct.

**Mr Crellin:** The link to Isle of Man worker status, Mr Chairman, is a test. We could have a different test. It is just a convenient test, for want of a better expression. But yes, you are right, if you removed any residency test and access to benefit, yes, I would imagine we would have some of the same difficulties.

**The Chairman:** I will need to make this the last question, certainly from me.

Back to Child Benefit again: you made clear that Child Benefit is a non-contributory benefit. It would not be given to somebody admitted under immigration rules, on the basis they had no recourse to public funds. Supposing somebody came in under that category and was in a relationship here or got married... Let us not say got married, because that

would confer rights – had a relationship and had a child here in the Isle of Man. How would the benefits entitlement alter in that situation, where there was a child born here to a mother admitted under immigration rules, not to claim public funds?

**Mr Oldam:** Either parent can claim Child Benefit. It is a decision for them to make as to which parent claims. Generally speaking, it is the mother, but there is nothing to say it could not be the father. So if you have one partner of the relationship who is subject to immigration control and one who is not, then it is most likely the person who is not subject to immigration control who would make the claim for Child Benefit and would lawfully be able to access it.

The only hurdle to that, Mr Chairman, is... I say it is normally claimed by the mother, because receipt of Child Benefit also gives access to what is known as home responsibilities protection. This effectively protects the entitlement to basic state pension of a mother whilst she is not working, or she is raising the children.

If we take the example that the father is the person who is not subject to immigration control and is the breadwinner – the mother is the person who is subject to immigration control and is not working – then effectively that home responsibilities protection, the HRP, is wasted. The man is paying contributions anyway, he does not need to be protected. It is the woman who is most likely not working, needs the protection of the HRP, but because she is not the recipient of Child Benefit, she cannot access it. So it would certainly influence the decision.

**The Chairman:** What if both partners were, though, subject to immigration control? Would the question of entitlement to Child Benefit not arise at all?

**Mr Oldam:** No, because, as I say, either parent can claim now. If it is the case that both parents are subject to immigration control, then clearly neither is entitled to access Child Benefit.

**The Chairman:** Have you any final questions, Mr Henderson?

**Mr Henderson:** Yes, thank you, Vainstyr Loayreyder.

Just getting back to the point about a fraudulent Child Benefit claim. An immigrant family leaves the Island but leaves the bank account here for the sole purpose of the direct debit to continue.

You say you are in touch with the Department of Education now and again, but in theory, if somebody tried that kind of a stunt, is it feasible that funds could be paid into that account for say six, 10 months, before you would properly discover that somebody was being fraudulent, or possibly longer?

**Mr Oldam:** It is certainly possible, sir, yes. It is possible.

The whole system of social security relies on a relationship of trust between the claimant and the Department, and whilst there are powers for the Department to recover benefits where they have been fraudulently claimed and to take prosecution action against claimants who do claim benefit fraudulently, there are the practicalities of overpayment and recovery. We do accept that.

**Mr Henderson:** Right, rather than trying to arrest somebody from Hungary or wherever.

**Mr Oldam:** Yes.

**Mr Henderson:** Okay. Thank you.

**The Chairman:** Mrs Christian.

**Mrs Christian:** Just to make the point that it is also, Isle of Man residents can use the system in the same way as regards to their pensions, can they not? Not just immigrants?

**Mr Oldam:** That is correct, Mrs Christian.

**Mr Crellin:** In respect of any benefit, Mrs Christian.

**Mrs Christian:** Any benefit that is paid directly into bank accounts.

**Mr Crellin:** Indeed, yes.

**Mrs Christian:** If they are not resident here, they may still receive it. It is very difficult to detect.

**Mr Crellin:** We do, as an annual exercise, for people who get their money paid into their bank account, we send out a non-redirect letter to their home address each year to ask them to confirm their status. Should that not be responded to, or should that be returned to us, because it cannot be forwarded on, even with a redirect notice, we suspend the benefit while an investigation is undertaken. We are conscious of the difficulty and we do whatever practical steps we can.

**Mrs Christian:** Can you apply that same thing to Child Benefit? It is more difficult, perhaps, because it is the parent who responds and who is here at the resident address. Sorry, Chairman. Thank you.

**The Chairman:** That is alright. I do not want to invite you to make any leading comments, but just by way of summary, would it be true to say, then, you believe the benefit system and the way the Social Security system operates in the Isle of Man runs well and does not act as a theoretical attraction for immigration to take place in the Isle of Man because of our benefit structure?

Secondly, are you confident that any abuses of the system, whether on the part of immigrants, defined in the widest sense: those from outside the Isle of Man or those inside the Isle of Man, the system of monitoring, controlling abuse and fraud, is working satisfactorily?

**Mr Crellin:** I think, the answer to your question is, yes, Mr Chairman. I think, at best, in a practical situation, I think, the steps we have in place regarding immigrants and immigration in relation to access to benefits is an extremely tight system, for want of a better expression. I think, because we are a small Island, we have the controls in place that make that okay.

I think it might be worthwhile just pointing out, though, Mr Chairman, in terms of the National Insurance fund which actually supports and finances a lot of benefits. As you are

probably aware, we have an actuarial review of the position undertaken every five years. As part of that review, the UK Government actuary who does it on our behalf, looks at migration or net inward immigration and in the most recent report – which they are quite happy for the Committee to have access to, if they have not already done so – points out that, purely in Social Security terms, net inward migration to the Island is required as the most sustainable position for the National Insurance fund.

Without inward migration the projected figures are that population will fall in the Island because the birth rate is not matching the death rate. Therefore, net inward migration has benefits to the Island. The question, of course, is what levels are those. That is the paradox.

**The Chairman:** Inward migration on the basis that those migrants work here and contribute to the fund.

**Mr Crellin:** Absolutely. It is inward migration contributing to the system, not drawing from the system.

**The Chairman:** So, in that respect, the Isle of Man is a net beneficiary of this situation?

**Mr Crellin:** Indeed and in terms of – just as a final comment – national insurance numbers issued by the Department in terms of foreign nationals, in the current year to date figures – that is up to 31st October from April this year, which is what we call our financial year – there have been 588 national insurance numbers issued, 573 of which were for employment purposes.

That puts into perspective the reasons we are issuing national insurance. It is *not* to get access to the benefit system, it is access to employment.

**The Chairman:** And those contributions by those persons, those individuals will not necessarily be drawing all the benefits in terms of pensions, because they will have moved on.

**Mr Crellin:** Absolutely, Mr Chairman. That is right. The transient worker, for want of a better expression, or migrant worker is ideal for the Island, inasmuch as they pay into the system, they probably do not pay enough contributions for long enough to get any benefits out of the system, so that is money to the National Insurance fund.

**The Chairman:** Okay. I know I have said we are winding up, but I did, just following on from that... we are really talking about benefits and caseloads here, are we not? Because of the nature of those making the contributions that do not stay here long enough to draw a pension and get that particular benefit, what increase in caseload have you noted in terms of short-term benefits? We talked about Child Benefit. I think in the evidence we saw some reference to Maternity Allowance?

**Mr Oldam:** Certainly, in terms of the most common short-term benefits: Incapacity Benefit and Jobseeker's Allowance, there really has been no impact or very insignificant impact at all. I am just looking at the latest unemployment figures here, Mr Chairman. Out of a total unemployed register of 611 persons, only 16 require work permits, so it certainly appears that the immigrants are genuinely coming here to

work and not to, for want of a better expression, malingering and claim benefits from the State.

We did mention Maternity Allowance and that is one area where we have seen some impact in the caseload, as we heard at the very beginning of the session, Mr Chairman. That is certainly eased by the fact that the contribution test or the employment test for Maternity Allowance is somewhat easier to satisfy than the other short-term benefits.

**The Chairman:** Mrs Christian.

**Mrs Christian:** Can I just clarify the position on Family Income Supplement? That is an in-work benefit. Clearly, people under the immigration law will not qualify because they have to sustain themselves, but EEA nationals could claim Family Income Supplement, could they?

**Mr Oldam:** They can, Mrs Christian.

**Mrs Christian:** Is there an indication in the claims in those figures that immigrants are coming into work on levels of wages which put them in the position to claim Family Income Supplement or not?

**Mr Oldam:** Certainly, access to Family Income Supplement is much easier than the other income-related benefits, because the residential qualification for that benefit is only six months as opposed to, generally speaking, five years for the likes of income support and Jobseeker's Allowance. There certainly is a perception that some migrants may be coming here purporting to be single people, accessing lower paid jobs via a work permit and then several months later, lo and behold the family arrive on the Isle of Man. There is very little impact on the Family Income Supplement caseload, if that is the case.

**Mrs Christian:** So you have not any evidence really that Family Income Supplement is being claimed by...?

**Mr Oldam:** There is no evidence, Mrs Christian, that Family Income Supplement is being, certainly not significantly abused, in that respect.

I do not think my Minister would object if I was to put on record this morning that we are looking at the residential qualification for Family Income Supplement and considering whether it may be too easy to satisfy it in its present form and, maybe, whether a longer period of residence should be required before persons can access that benefit.

**Mrs Christian:** Thank you.

**The Chairman:** Thank you very much. Just to clarify, the Maternity Allowance you referred to, is that a contributory benefit or a non-contributory benefit?

**Mr Oldam:** It is something of a quasi benefit, Mr Chairman, in that it is funded from the National Insurance Fund, but you can gain entitlement to it without paying any contributions at all.

If we take, for example, the case of an employed earner, they are required to simply earn at least £30 per week. The threshold before they pay any contributions at all is £100 per week. So, whilst it is regarded as a contributory benefit, entitlement to which normally relies on the payment of

contributions, you can access Maternity Allowance without having paid any contributions at all; simply by means of having worked and they have had earnings of at least £30 per week.

**The Chairman:** Right. Anybody admitted under immigration rules, though, not to have recourse to public funds would not qualify?

**Mr Oldam:** That is not correct, Mr Chairman. Maternity Allowance is not regarded as a public fund in the immigration rules.

**The Chairman:** Oh, it is not regarded as a public fund?

**Mr Oldam:** Because it is funded from contribution.

**The Chairman:** So it could be that somebody is here, has a child and, whereas with Child Benefit there would be not entitlement, there would be entitlement to Maternity Allowance?

**Mr Oldam:** There is certainly a potential, sir, yes.

**The Chairman:** And, of those receiving Maternity Allowance, how many, what percentage would be foreign nationals at the present time?

**Mr Oldam:** Off the cuff, somewhere, probably about 10 per cent of the caseload.

**The Chairman:** Is that quite high?

**Mr Oldam:** That is roughly 20 individuals. I would need to check with colleagues to be exact on that, sir.

**The Chairman:** Okay. Well, I think we have gone as far as we can in the allotted time, so I would like to thank you, gentlemen, very much for coming before the Committee.

We will obviously consider the evidence that you have given and it may well be that we want to, either in correspondence or possibly invite you back, to give further evidence in public in due course. Until that time, thank you both very much for coming. You have been very helpful to the Committee. Thank you.

**Mr Crellin and Mr Oldam:** Thank you, Mr Chairman.

*Mr McGregor Edwards and Mrs Scott were called at  
11.48 a.m.*

#### EVIDENCE OF MR N MCGREGOR EDWARDS AND MRS B SCOTT

**The Chairman:** If I could now invite Mr Norman McGregor Edwards and Mrs Barbara Scott to step forward please.

Good morning. Thank you very much. Thank you both for coming to see us and could I ask you, in a similar manner, to introduce yourselves and tell us what your position is.

**Mr Edwards:** Norman McGregor Edwards, Director of Health, Strategy and Performance for the Health Service within the DHSS.

**Mrs Scott:** I am Barbara Scott, acting Hospital Manager at Noble's Hospital.

**The Chairman:** Thank you very much indeed.

Can I start, Mr McGregor Edwards, by asking you, in broad terms, does immigration have a noticeable impact on staffing issues within the Health Service?

**Mr Edwards:** Mr Chairman, in terms of staff who come and join us, who are of non-Manx origin, yes it does.

For two reasons: first of all, that very many of our professionals we have to recruit from across, because we require individuals who are trained and experienced and, inevitably, that means that our recruitment, by and large, reflects the make up of the professional population across, the UK, which tends to be fairly heavily dependent on people coming in from other parts of the world. So, in terms of enabling us to fill essential posts, immigration is very important to us.

In terms of the demand on services, I am not aware of any particular stresses or strains on the Health Service from migration.

**The Chairman:** Thank you. We will come back to that latter point just in a moment. Just reverting to staffing issues, if we define immigration in the broader sense: anybody who is not from the Isle of Man being an immigrant, what proportion of staff in the Health Service are immigrants to the Isle of Man?

**Mr Edwards:** I do not have figures, I am afraid, Mr Chairman, but I think it is probably easier to look at it in terms of how many do we know are from the Isle of Man. I think, in particular, in relation to doctors, it is a minority. In relation to nurses, I suspect it is probably slightly more are Manx.

**The Chairman:** Just to quote a figure which we had in some earlier written evidence of around 95 per cent of Health Service staff are immigrants to the Isle of Man, whether they be from the UK, EU or the rest of the world.

**Mr Watterson:** Medical staff, just to clarify: 39 per cent of medical staff and 60 per cent of the Department's workforce. That is the figure that we received from the –

**The Chairman:** From the human resources people, that 96 per cent of medical staff are immigrants and 60 per cent of Department staff overall.

**Mrs Christian:** That is DHSS. That is not Health Services.

**The Chairman:** Would that seem to correspond, Mrs Scott?

**Mrs Scott:** I would say so. Yes.

**The Chairman:** Okay. That is fine. And it has always been thus, has it not?

**Mrs Scott:** Yes. Never any different.

**The Chairman:** The Health Service could not function without imported people, imported labour, whether medical or non-medical?

**Mrs Scott:** That is due to the training needs of those people and the Island's Health Service, obviously.

**The Chairman:** Yes. Given that the nature of the composition of such immigration has changed over the years, has language become a specific difficulty in recent years, in your opinion?

**Mrs Scott:** I would not say so. The restrictions in the UK have increased in that people must take an English test before they are allowed into the country and, therefore, we fit into that same category.

**The Chairman:** And this would require study for exams and going to classes?

**Mrs Scott:** To attain a certain level of English, spoken and written.

**The Chairman:** Okay.

**Mr Edwards:** Sir, can I just add slightly to that? We require our professionals – doctors, for example, and nurses – to be UK registered. In order to achieve that registration, they have to meet the UK language requirements. So, in the case of doctors, yes, there is a system of examinations spread over some time. They do not just arrive and one day they have an examination, the next day they have a second part and that is it. They are actually spaced out over some time and they have been revised several times in the last few years, so, if somebody is registered in the UK, then they will have completed that UK language qualification test.

**The Chairman:** Okay, thank you. I am quite happy now just to invite my colleagues to put questions. Mrs Christian.

**Mrs Christian:** Can I just ask you if you have a view on whether the language test is adequate in the UK?

**Mr Edwards:** I think it is certainly adequate.

I think problems can arise with regional variations in accents in that, very often, the language test will produce a fairly standardised form of English which may have problems when encountering regional accents in the UK, particularly ones from Scotland. For example, somebody who has trained in fairly standard English in the London area may experience problems when they move north of the border or into parts of Wales or Ireland, but that is not a unique problem to migrants. It may be slightly more severe and communication the other way. It is a process of settlement, I think, that just takes a bit of time and acclimatisation. But, I am not aware of any problems, real problems, arising from miscommunication.

**Mrs Christian:** Can I ask you about the processes for recruitment? You said they have got to be on the UK register professionally. Does that mean that most of them will come in from the UK, already having gone through immigration in

the UK and therefore, are simply moving to a job in the Isle of Man under the Control of Employment legislation?

**Mrs Scott:** It does vary. With the more senior medical staff, consultants and such like, the majority of those are employed in the UK, already have GMC registration and work, obviously, there and so have gone through those processes.

Those that are coming via the UK, but from another country, tend to be in the more junior medical staff. That is also the case for nurses. Some will pass through the UK before coming here. They come from various countries, such as Australia, New Zealand, various countries that they pass through to move to the Isle of Man.

**Mrs Christian:** There is a requirement that, first of all – and this is a Common Travel Area EU requirement – jobs, first of all we expect them to be filled locally, then from the EU and then from outside. How effective is the recruitment process – whether or not we like that policy, that is what we are subject to – in terms of us advertising in the EU for staff?

**Mrs Scott:** With regard to medical staff, the way we recruit and advertise, the medical staff from various parts of the world see those adverts via the web or via the journals that are read internationally.

The processes we have, we comply with the way we have to recruit in that the way the jobs are offered, it does not give us any great problems. The main problems this year have been through the MTAS system, which are national, as opposed to just for the Isle of Man and we have actually probably come out better than a lot of places.

**Mrs Christian:** That is the doctors?

**Mrs Scott:** Yes. Junior doctors, medical. Yes.

**Mrs Christian:** Right. Thank you, Mr Chairman.

**The Chairman:** Thank you. Mr Henderson.

**Mr Henderson:** Thank you, Vainstyr Loayreyder.

Earlier you heard my scenario of a Polish family, which drew some smiles from the public gallery. Notwithstanding that, I actually did canvass such a family last year, so it is a very real scenario. So, they have been here for a couple of weeks, father has a road traffic accident and is admitted to Noble's. I take it all medical care is given on a free basis?

**Mr Scott:** If the person is normally resident, yes.

**Mr Henderson:** So he has been here for two weeks, working here.

**Mrs Scott:** If he is classed as resident, yes, he would get care.

**Mr Henderson:** He would not be classed as an Isle of Man worker as such, because obviously he would be on a visa, but by virtue of living here and working here that would...?

**Mrs Scott:** Yes.

**Mr Henderson:** Right. Members of his family would be under the same?

**Mrs Scott:** Yes.

**Mr Henderson:** Okay. Visitor here. I know we do cover TT week, because we invite folks here for TT and we see it as our duty to look after them. So, any visitors here from any four corners of the world are treated here free of charge?

**Mrs Scott:** No. They are charged. There are charges for patients who are not from the Isle of Man or the UK.

**Mr Henderson:** Oh, right, because I think it used to be, if my understanding, that if patients were treated, there would not be a charge or there did not used to be. Has there always been a charge and the public in the Isle of Man have never been aware of it or is this recent?

**Mr Edwards:** Let us make a distinction. There is almost a universal, international agreement, although it is very rarely written down that, if an individual requires immediate, necessary emergency treatment, then they get it, regardless of where they are. But if they then require further treatment, unless they are covered by a reciprocal agreement – and we have reciprocal agreements particularly with the UK – then they are charged.

So, in TT, for example, if somebody is injured in a road traffic accident, they will receive the immediately necessary treatment they need in order to save their life and preserve their limbs and so on and prevent them deteriorating, but thereafter we would expect them to pay or be insured, unless there is a reciprocal agreement in place which would give the same rights to a Manx resident living somewhere else.

**Mr Henderson:** Okay. So, somebody just generally visiting from another part of the planet, for a few days, if they had a road traffic accident here, they would fit those criteria and then you would be sending a bill?

**Mrs Scott:** Yes.

**The Chairman:** And is this whether they are from... is there a distinction whether that person is from the UK, as opposed to the EU and is there a distinction if they are from the EU to the non-EU?

**Mrs Scott:** Yes.

**Mr Edwards:** There is a specific distinction around the UK, in that there is so much traffic between the UK and the Isle of Man, in terms of people that we send to the UK and UK residents who are treated here, that there is an analysis and a financial settlement at the end of the year to balance the respective charges.

In terms of other jurisdictions which are relatively small, whether they be within the European Union or elsewhere, then there is no direct charge.

So, for example, if it is an Australian, we would not necessarily go ahead and just bill the Australian Government, but there is a degree of discussion needed when an individual, for example, requires to be repatriated, but we are getting almost into the travel arrangements, rather than our own arrangements.

**The Chairman:** I do not quite understand how that squares with what was said earlier that you bill such people. You say you would not necessarily do that?

**Mr Edwards:** If there is a reciprocal agreement in place, we do not. So, for example, if it is a UK resident, we do not bill the UK resident, we later bill the UK.

**The Chairman:** Yes, and, if it is EU, are EU citizens not treated as coming from the same pool as UK citizens?

**Mr Scott:** They are expected to have insurance or they pay themselves for their care.

**The Chairman:** Sorry to digress, because we are talking about visitors here.

**Mrs Scott:** Yes.

**Mr Henderson:** An EU national is treated; you do your lifesaving bit and then they may need physiotherapy; rehabilitation; longer term care. They are not insured, how do we cope with that?

**Mrs Scott:** It depends. Are we talking of visitors?

**Mr Henderson:** Yes. Or my Polish worker who is here on site. He has a fall on the Dandara site, breaks both legs, suffers a back injury, for instance.

**The Chairman:** But there is a distinction between a visitor and a resident. This Polish person is a resident.

**Mr Henderson:** I realise that, Vainstyr Loayreyder.

The Polish building worker would then be eligible for all the long term. Whereas a short-term visitor, however, how would we cope in that situation?

**Mrs Scott:** With short-term visitors requiring aftercare, we would not normally see them for aftercare, because normally they would want to go home as quickly as possible. But if they decided to stay, they would be billed for all the care that they receive from the Health Services.

**Mr Henderson:** Right okay.

**Mr Edwards:** Or if they are unable to return.

**Mr Henderson:** If they are unable to return, obviously. Yes. If it transpired that they could not pay or were not insured, have you ever come across that scenario? What can happen then?

**Mrs Scott:** The invoices are raised through the DHSS, through the Finance Department. Once a payment is not received, the person then moves into being a bad debtor and they are passed on to the Attorney General's office for the debts to be collected in that way.

**Mr Henderson:** Right, okay. So you can square your books by, at the end of the yearly audit, it is gone to the Attorney General's, basically. Right, okay.

We made mention of language barriers earlier and the high percentage of migrant workers who are within the

Health Service. I am just wondering, what service checks do you run for immigrant staff workers to ensure that their knowledge and use of English language is to the point where their instructions are fully understood by all; conversations with patients are fully understood; medical instructions are fully understood?

**Mrs Scott:** Those people are trained to the same standards as any worker from the UK would be. Therefore, we expect their understanding is the same. The medical terminology is the same and therefore the understanding should be the same. They have passed their exams, they have passed their assessments to move to the UK and to ourselves and are registered within the UK bodies.

**Mr Henderson:** Right, I understand that part of it. Those are the standard things that we have to do.

However, I am thinking of a situation at night time, perhaps, where the houseman has been called to a patient's bedside to assess a deteriorating medical condition and is not from the UK, is thickly accented, has a good command of the English language and certainly on paper is excellent, but is thickly accented in the use of English and maybe wants to order up some medication, for which an instruction is issued. How do we know, under those circumstances, that communication is spot on there?

**Mrs Scott:** Any drugs that are prescribed are written down. No drugs are given by a verbal command, they are all written down. We use the British National Formulary for prescribing. That is a document that every medical professional keeps. Therefore, the prescription of drugs is within that.

We have a hospital formulary, whereby a doctor who joins us knows exactly what drugs are prescribable under our NHS.

**Mr Henderson:** If I switch scenarios to Accident and Emergency, where there is a life-threatening situation where you may not be able to write your prescription card out; the doctor will be passing instructions out for immediate action: how do we assess there that communication is spot on, or will professionals actually say if there is a communication –

**Mrs Scott:** A professional would challenge if they did not understand what was going on. Also, I think most professionals would always clarify that the patient understands a doctor's discussion with them, if they feel there may be a lack of understanding, (**Mr Henderson:** Right.) as in a nurse may well say: 'Did you understand everything the doctor said to you?' That is for every doctor and patient relationship.

It does not matter whether it is a language barrier. It is something about the terminology that is used in explaining a medical condition that we check that patients understand.

**Mr Henderson:** I just have got a further question, Vainstyr Loayreyder.

In progressing this, then, on a ward there are a couple of nurses from a different country. Are they expected to... when they are interacting around patients or in the vicinity, are they expected to communicate between themselves in English, rather than use their own home language, so the patients will understand what is happening and will not feel threatened.

**Mrs Scott:** Yes.

**Mr Henderson:** Right, okay.  
Thank you, Vainstyr Loayreyder.

**The Chairman:** Thank you.

Just before I bring Mr Watterson in, just picking up on part of the discussion with Mr Henderson, where you described access to healthcare in terms of visitors and Isle of Man residents – notwithstanding that the Isle of Man resident might be, the example was given, Poland – there are, of course, other Isle of Man residents who are here by virtue of the immigration rules, where a condition might well be ‘no recourse to public funds’. How does the definition of ‘public funds’ and ‘Health Services care’, ‘hospital treatment’... how do they link in with each other?

**Mr Edwards:** It does not affect us at all.

**Mrs Scott:** No.

**Mr Edwards:** Because the predominant question is: Does the individual require the treatment? If they do, are they entitled to receive it free of charge or subject to a reciprocal agreement? If the answer to that is ‘yes’, then they receive it free. If the answer is ‘no, they have to pay’, then they will have to pay. If they are resident on the Island and entitled to treatment, then they will get it, regardless of how long they have been here.

**The Chairman:** This is what I am trying to just clarify: the entitlement to treatment.

Somebody resident on the Isle of Man, on the condition that they have no recourse to public funds – and we have heard how they would be disqualified from a vast range of Social Security benefits – that does not apply to hospital treatment or health care? That is not having recourse to public funds?

**Mr Edwards:** No.

**The Chairman:** Okay. So we are absolutely clear about that.

**Mrs Scott:** Yes.

**The Chairman:** So, right: well, that is very clear.

Somebody living here under that specific condition could have entitlement to treatment, hospital care, healthcare, on the same basis as every other resident of the Isle of Man.

**Mrs Scott:** Yes.

**Mr Edwards:** Yes.

**The Chairman:** Thank you very much.

**Mrs Christian:** Chairman, can I just say, I think ‘public funds’ are defined somewhere in the immigration rules to say specifically to what that phrase applies.

**The Chairman:** To what it refers... Thank you.

**Mrs Christian:** May I –

**The Chairman:** Could I just bring Mr Watterson in – unless it was on this point?

**Mrs Christian:** No, that is fine.

**The Chairman:** Mr Watterson.

**Mr Watterson:** No, I do not have any questions, on the same principle as I had with Mr Crellin and Mr Oldam and then as a Member of the Department, obviously.

**The Chairman:** Okay, that is fine.  
Mrs Christian.

**Mrs Christian:** Can I ask about language on the other side of the coin, where the patient, perhaps as a non-English speaking person: do you have recourse to interpreters? Do you need them very often? Does it present you with a problem in any of the Health Services?

**Mrs Scott:** We are very conscious that people do need interpreters. In the majority of times, if a patient is coming for planned treatment to an outpatient clinic, they tend to organise their own interpreter if they know they are going to have difficulties. If they cannot, we can arrange that for them and we use the – we are in the process of a central register of interpreters and the whole Island using those.

With regard to problems, it does encounter a problem if the patient then becomes an in-patient. That can pose difficulties, but we will always organise interpreters for patients.

**Mrs Christian:** At the cost of the Health Service?

**Mrs Scott:** Yes.

**Mrs Christian:** Thank you.

**The Chairman:** Thank you very much.

**Mr Edwards:** Can I just add one point? (**The Chairman:** Yes.) We are very unlikely to ever be in a situation in which every possible language and dialect could be covered. So, in fact, Health Services and A & E are a very good example, very adept at using a wide variety of tools to get over language problems – the use of symbols and cards and so on, to enable them to understand what the individual wants and vice versa.

**The Chairman:** We often hear about ‘health tourism’, where a person has come to the UK with the express purpose of receiving free treatment. Is that a problem or an issue of any sort in the Isle of Man in your experience?

**Mrs Scott:** Not that we are aware of, no.

**Mr Edwards:** No.

We do have the ability to not accept an individual for treatment if we cannot provide the treatment. So, for example, we have had odd occasions when a resident of the Isle of Man has wished to bring somebody from across – a relative – in circumstances under which we do not provide the treatment which was required because it is beyond our capacity. Clearly, what would then happen is that individual

would immediately be turned round and sent back to the UK and, potentially, treated at Manx expense. Under those circumstances we have said 'no, we cannot provide the treatment' and the individual has remained in the UK.

Similarly, if we do have individuals who have gone to the UK for treatment and are there for a considerable amount of time, we do seek to get the UK to take over responsibility at the point at which they could reasonably be deemed to be resident in the UK, i.e. they are not coming back.

**The Chairman:** Okay, Thank you.

Anybody who was perceived to be a 'health tourist' and had come to the Isle of Man to take part in the superior facilities offered by Noble's Hospital – let's face it, which are way head and shoulders above similar hospitals in the UK – somebody who, perhaps, had knowledge of the Isle of Man and how good our hospital was – very good bed occupancy ratios, for example, good standards of care – and had heard about this and had come here: if you had reason to believe they had come on that basis, would you seek to charge them for the treatment? Or would it very much depend on whether or not they were UK based? If they came from the UK, they would be entitled to treatment, would they, under the reciprocal arrangements?

**Mr Edwards:** Yes, in that case, if they were UK, we would be adding them to the bill that the UK has to settle up with us at the end of the period. If they were non-UK and we had reason to believe that they were not genuinely here as a resident but were visiting for the purposes of obtaining treatment then we would seek to charge them.

**Mrs Scott:** Yes.

**The Chairman:** Yes. So somebody who is of non-EU origin and non-UK origin who was visiting relatives, let us say in the Isle of Man, who had reported to relatives how good the system was... That could happen, could it?

**Mr Edwards:** If they were here as a visitor?

**The Chairman:** As a visitor.

**Mr Edwards:** But if we just take the situation where somebody turned up – was living with relatives here for a couple of weeks and suddenly turned up and said 'Can I have my heart transplant, please,' we would be investigating that one with a great deal of vigour.

**The Chairman:** Ah, ha.

**Mr Edwards:** A great deal of vigour!

**The Chairman:** Thank you.

**Mr Edwards:** But I am not aware of any cases of –

**The Chairman:** You are not aware of any...

**Mr Edwards:** – of that severity.

**The Chairman:** Anecdotal or otherwise?

**Mr Edwards:** No.

**The Chairman:** No.

Mr Henderson.

**Mr Henderson:** Thank you, Vainstyr Loayreyder.

I will put a... something that was being put to me on a not unreasonable regular basis when I was out canvassing last year, that we are overrun with immigrants and that beds in Noble's Hospital are being taken up with immigrants, whereby local folks cannot receive treatment and are being pushed to the back of the queue. Waiting lists are elongating, with hundreds of immigrants going on to them, and local folks or Isle of Man residents are being put back to the queue, waiting times are being increased, fracture clinic cannot be accessed because there are more non-local folks using it – those kind of scenarios.

What would you say in public to those kinds of statements?

**Mrs Scott:** I have seen no evidence of that. Waiting lists are, as we all know... there are waiting lists for various types of treatments. The patients are seen in chronological order unless there is an exceptional clinical need. It is then up to the clinician to decide when he or she treats that patient and they must be able to give a clinical need that says why that patient should receive treatment.

Our staff would question that, if that was going on, I can assure you. They are not quiet in sitting back and letting things like that happen.

**Mr Henderson:** That is good to know, because there is this public perception now: how it is being driven or why is another matter, but it is interesting to note the people on the ground with the day to day knowledge being able to tell this committee those kind of... And the same scenario I have come across before now: 'Oh, Casualty was full up with different speaking people and we could not get in quick enough, blah blah.' What would you say to that?

**Mrs Scott:** Again, Casualty patients are seen and triaged and given treatment in the order of priority with which the clinicians feel they should have it. If they are urgent patients, they will be seen more quickly than less urgent.

**The Chairman:** Mr McGregor Edwards.

**Mr Edwards:** Could I just add that the areas with the longest waiting lists traditionally have been around cataracts and around orthopaedics which, by and large, although not exclusively, are features of the older population. So unless there was a significant influx of older people requiring treatment, I do not think that they would be a feature on the current waiting list problems.

**Mr Henderson:** Right.

Further scenario put to me: Casualty is full up of different speaking people that are taking up... I am conscious that you are saying each patient is assessed and so on, but for somebody who needs to be seen but is not urgent: 'Oh, I had to wait for three hours because there were so many other different people there before me and don't you think it is a disgrace?'

Do you see the A & E or other areas swamped out with different nationalities, or would you say that is more of a myth and it is an urban legend, if you like, rather than...

**Mrs Scott:** Yes, I would say so. It is not something... We frequently walk through A & E to see what is going on, as you do. You see what is going on in service and walk the floor.

I would not say that A & E is swamped with foreign people who are waiting for treatment inappropriately. No.

**Mr Henderson:** Okay, thank you.

**The Chairman:** Okay, thanks, Mr Henderson.  
Mrs Christian.

**Mrs Christian:** Occasionally, there are, sort of, anecdotal tales of people who come back from other parts of the world to have their babies here. Can you identify them in the system and are they charged for the maternity treatment and maternity services?

**Mrs Scott:** I am not aware of people coming to have their babies here that are not treated here, because we would always, in the main, do the antenatal care of a lady having a baby.

The percentage is actually higher now than it was five years ago of mums who were either born on the Isle of Man or in the UK. So the percentage of mums born on the Isle of Man or in the UK has increased in the last five years, and the changes we see in the... the birth rate is roughly the same in the last five years: it has not really altered in the numbers. However, the mum's place of birth, where they were England, Scotland, Ireland, Wales, those numbers have lessened and the percentages changed to the EU and other countries, but not to any great extent, because it is still more now from the UK and the Isle of Man than it was five years ago, if you see what I mean.

**Mrs Christian:** Are you talking about the place of birth of the mother?

**Mrs Scott:** Of the mum, yes.

**Mrs Christian:** What is the situation, say, of a Manx-born person who has been living in France, decides they want to have their baby in Isle of Man; comes back here?

**Mrs Scott:** They would have to be ordinarily resident, otherwise they would be charged.

**Mrs Christian:** Yes.  
You have a way of identifying whether or not...?

**Mrs Scott:** Yes.

**Mrs Christian:** Right.

And, again, there is a situation being described where a person with a terminal illness, who was not ordinarily resident within the UK, comes to the Isle of Man for treatment, maybe because they feel it is better or whatever. Are there charges in those circumstances, if they have lived, for example, in the Far East?

**Mrs Scott:** If they come back and are then resident and are registered with a GP.

**Mrs Christian:** So it is the registration with the GP?

**Mrs Scott:** It is the registration with the GP and being resident on the Isle of Man.

**Mrs Christian:** Right.

**Mrs Scott:** So, in that case, no they would not be charged because they...

**Mr Edwards:** If they are terminally ill –

**Mrs Christian:** Terminally ill.

**Mr Edwards:** – and they come from elsewhere and they are not Manx resident then, yes, they are charged.

**Mrs Scott:** Yes.

**Mrs Christian:** Yes, right. Thank you.

But their Manx residence would be dependant upon them registering with a GP here. Is that the definition that you have just given me?

**Mr Edwards:** Full registration – I should say that, because when somebody registers with a GP they will register either as a visitor or as a temporary resident – which is a period of up to three months, or as a full registration.

At the point at which they do that, we will then seek to obtain their record from their old practice. If it is not a UK practice that will immediately cause us to go into another set of circumstances through practitioner services, where we will look at whether they are indeed resident here, or entitled to receive services, because they will not have the background within the UK NHS or the Manx NHS.

**Mrs Christian:** In summary, then, you do not have a feel that there is any real... that there is not scope for health tourism here, because you have to get on the waiting list for elective surgery.

**Mrs Scott:** Yes, and like the situation you gave for terminal care, we do charge for that and we have recently.

**Mrs Christian:** Right.

**Mrs Scott:** For someone who came here for the care, because they deemed that it was best here. So we would continue to charge.

**Mrs Christian:** I see. Right, thank you.

**The Chairman:** Thank you.

Mr McGregor Edwards, what checks are made to ensure that persons on GP lists register with GPs correspond with actual residents of the Isle of Man? We have heard that GP lists exceed the numbers of persons in the Isle of Man and that is because people do not get removed from the lists. What checks are made?

**Mr Edwards:** They do not get moved from the lists because they move elsewhere and do not then register with another GP. So they will remain here on our list until such time as we are aware that they have moved somewhere else.

There is no formal method of checking at the moment to

see whether they coincide with, for example, electoral rolls or registration or any other system.

**The Chairman:** Do you think that there should be a cross check of that sort with the electoral rolls?

**Mr Edwards:** I am not sure how useful that would be, because, of course, there are individuals who are on the electoral roll who are... they have their discussions and arguments, so I have heard, about whether they are truly resident here or not. I think, in terms of mis-use of the Health Service by people who are not really resident here, I do not think it is a huge problem.

I would say I get more comments, or more reports, if you like, from the public about potential cases of abuse – about people who have left the Island – than I do of people reporting potential abuse from people who have come into the Island. By far and away the main public concern, or main public observation, seems to be at individuals who are alleged to have left the Island but are still using the Health Service.

**The Chairman:** Yes.

**Mr Edwards:** And where we become aware of those, we do investigate and take appropriate action.

**The Chairman:** So reports have been made of people having left the Island, but making periodic returns to get supplies of prescription drugs, for example.

**Mr Edwards:** Or they arrange for somebody else to put in the prescription for them and we become aware of that either, through individuals in the community – public-spirited, who are reporting that to us, which is great – or, indeed, our own staff becoming aware of situations, circumstances, which lead them to believe that the individual may not actually be resident here.

**The Chairman:** But we do not really know the scope of that problem. It relies on anecdotes and reports. There is no systematic check that doctor's registered patient lists are actually up to date and correspond with persons resident here.

**Mr Edwards:** No, I think, in terms of people who have moved to the UK, we do know when they seek to register with a GP across.

People who move outside of the UK, where their registration does not trigger a change here, then as I say, I do not think it is a particularly big problem, from what we can see and hear. There is quite a lot of effort has to go in doing something like that, essentially for the prescriptions, but if we do get a situation where an individual comes back for treatment – and we have had this happen, when an individual has come back for treatment and it has become evident during the course of the consultation that the individual is not resident here – then that has been acted upon.

So, in terms of prescriptions, no we would not, but it is amazing how often something turns up that makes the professionals think: 'Hang on, there is something funny going on here.' For example, many prescriptions require the individual to be physically seen and checked, because of the nature of the drugs they are on and if they do not re-appear, then it stops. And if, during the consultation, the doctor or

the nurse feels that there is something funny going on they will take it up with us, and they do.

**The Chairman:** Thank you.

If I could come back to Mrs Scott in terms of recruitment of staff. The rules require, for the grant of a work permit, that the employer needs to give evidence that there is nobody locally available. Where recruitment takes place from outside the EEA, we understand that there has to be evidence provided that it has been impossible to recruit from the UK or the EU.

Now in terms of Health Service staff, we are aware, of course that, historically and traditionally, there are some parts of the world which have been particularly favoured, like the Philippines, to provide what are excellent health care staff, who I think the public widely acknowledge give very very good standards of healthcare.

There was a system in place, was there not, by which Filipino staff could go to the UK Health Service and effectively to our health service? Is this system altered recently in some way?

**Mrs Scott:** There are various systems in place, in that we have to take the EU residents first, before we then move to those countries. So, whilst a few years ago we could probably take Filipino-trained nurses more easily we could not now, that is going to have an impact on us.

**The Chairman:** So to satisfy the immigration rules and express preference to recruit Filipino care workers, for example, you would fall foul of recent EU rules requiring preference to be given.

**Mrs Scott:** Yes.

**The Chairman:** Is this because of the expansion of the EU to the eastern European countries?

**Mrs Scott:** Yes.

**The Chairman:** That change coincided with that.

**Mrs Scott:** Yes. The same for medical staff, as well: it is exactly the same. The majority of Filipinos that we recruit now have worked in the UK, anyway. They are not coming direct from the Philippines.

**The Chairman:** Yes, indeed.

**Mrs Scott:** They are coming from a UK post to work in the Isle of Man, because that is a nice place they want to work.

**The Chairman:** Yes, we understand that. Is that something that you see as unfortunate?

**Mrs Scott:** Yes, because they are very good, very well trained and very caring people.

**The Chairman:** Yes.

**Mrs Scott:** And so it is unfortunate and it is... we are not seeing the impact of that as yet, but I am sure we will in the future.

**The Chairman:** Okay. Well, thank you for clarifying that.

I have no specific questions further.  
Mr Henderson.

**Mr Henderson:** No, I think they have answered.

**The Chairman:** Mrs Christian.

**Mrs Christian:** Can I follow up on the point you have just made, in that we have traditionally employed a lot of Filipino staff and everybody has been very happy with that. If they are now tightening up on the immigration rules, which prevent Filipino nurses getting into the UK, have you yet begun to see where the nursing staff are going to come from, in terms of the EU?

**Mrs Scott:** Not as yet, we are not seeing any changes.

**Mrs Christian:** There isn't a pattern emerging –

**Mrs Scott:** No.

**Mrs Christian:** – about which countries are going to produce the staff, which they were not producing before?

**Mrs Scott:** No, exactly. I think our pool will always mainly be the UK.

They may have come from another country into the UK, but I think they will always be from the UK to us, which would be our preference, as well, and at least they are tried and tested as working in the UK.

**Mr Edwards:** As a small community and a relatively small hospital, we probably place a greater reliance on people with experience coming to work here, rather than people who are straight out of the box, if I can put it that way. So I think the issue of people coming directly from other countries to us is less acute than it is in the UK.

By and large they will have worked somewhere else, probably in the UK, before they come here, because we are saying we do not want somebody who is, by and large, straight qualified: we want them with a bit of experience in this particular area. So in one way our more demanding recruiting requirements probably make it slightly less of a problem for us than the UK.

**The Chairman:** Mrs Scott, do you have any issues with staff having been recruited into the hospital, then transferring to other parts of the care services that requires you to re-recruit? I think it would be fairer to say that, because of the high reputation of Filipino hospital staff who then get recruited by the private sector into care homes, that would have –

**Mrs Scott:** It is the other way! (*Laughter*)

**The Chairman:** It is the other way.

**Mrs Scott:** Yes, we take from the care homes on the Island.

**The Chairman:** So the complaint is on their part that, having recruited...

**Mrs Scott:** Yes.

**The Chairman:** So there is no evidence – it is the other way round.

**Mrs Scott:** Yes.

**The Chairman:** Okay.

Well, unless there are any other questions, I would thank you both very much for coming in.

Maybe we will want to follow up, but if you have any final points you wish to make to us, please feel free to do so.

**Mr Edwards:** Could I just make one point for completeness.

We have focussed inevitably on the acute side of the Health Service and, of course, the majority of contacts take place in primary care in the community. I have no evidence at all of any stresses or strains on primary care in the community from my managers or any stresses or strains as a result of inward migration – none at all.

So we have dealt largely with the acute side, but the same is true of the GPs dentists, pharmacists, and optometrists and community care.

**The Chairman:** Would that be because, by the nature of primary healthcare, much of it is directed to older people, that potentially immigration patterns of going forward years into the future when those people will, in turn, become old – if they have stayed here and become old. You would expect, naturally, demands on the health system at that point, wouldn't you? Is it in the nature of the immigration: it is younger people here for a temporary period, usually moving out again?

**Mr Edwards:** There is no real evidence of stresses and strains on health visiting either, or on GP services, which again you would expect to see some evidence there if there were stresses and strains, but there is nothing at the moment.

**The Chairman:** Thank you very much. That is clear, thank you.

We do appreciate your time this morning and if we have further questions we will either write to you, or if we need to see you again in public we will do so. Thank you very much indeed.

### Procedural

**The Chairman:** Ladies and gentlemen, that brings to a conclusion the scheduled oral evidence hearings for this morning.

I would like to thank everyone very much for their attendance and interest and there will be public notices if there are to be further sessions of oral evidence.

Thank you very much.

*The Committee sat in private at 12.36 p.m.*