

Isabel Shutes May 16th, 2025

Cracking down on care worker visas will not solve the care crisis

The Government claims that putting an end to care worker visas will end the abuse and exploitation of overseas care workers, and will lead to employers investing in the UK workforce. But Isabel

Shutes argues while ending the care work visa scheme might reduce international recruitment, there is little reason to believe it will improve employment conditions for care workers.

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The Government's White Paper: Restoring control over the immigration system proposes reforming the Skilled Worker visa through which people come to the UK to work. The proposed reforms include closing the Health and Care Worker visa to care workers. The reasons for doing so, as stated in the White Paper, focus on the numbers of visas issued to care workers in recent years, evidence of abuse and exploitation of care workers recruited through the visa, and the need for employers to invest in the UK workforce, tackling issues of poor pay and poor terms and conditions. But cracking down on care worker visas is not what is needed to solve the care crisis.

Improving pay and conditions of care work

The Health and Care Worker visa was opened to care workers in 2022 to allow for international recruitment as a means of mitigating shortages of care workers in the short term. However, the drivers of care worker shortages, as noted in the White Paper, are historic issues, including low pay, a lack of pay progression, and poor terms and conditions. Many care workers are motivated by the non-economic rewards that their job brings in caring for others. But it is a job that is among the lowest paid in the UK, a job that is done largely by women, and a job that results in many care workers living in poverty.

Over the years, a succession of reports have called for government action and greater investment to build a sustainable care system. It is to be commended that the current government pledged to bring about improvements in the pay and conditions of care work and develop a National Care Service in its manifesto. But the argument that ending care worker visas will contribute to those efforts is unconvincing.



Closing the Health and Care Worker visa to care workers is unlikely to be a magic bullet that will force employers to improve pay to attract and retain care workers: fixing the funding of care is the key consideration.



Health and care systems have long relied on migrant workers, both in higher and lower paid occupations. In the past, adult social care often relied on the recruitment of people after they had already migrated to the UK, such as EU workers (prior to Brexit), family members, international students, and people settled in the UK. Work visas for care workers are not a cheap and easy way for care employers to fill vacancies – they create additional costs for employers, including immigration fees and administration – and they require, at least in principle, the employer to meet a salary threshold set above the minimum wage. Indeed, the costs, risks and administration associated with the immigration system are identified by care employers as inhibiting international recruitment.



The White Paper does say that the Government will put in place Fair Pay Agreements for the sector, but when and how will that be funded? Increased national funding and stronger enforcement will be needed.



Closing the Health and Care Worker visa to care workers is unlikely to be a magic bullet that will force employers to improve pay to attract and retain care workers: fixing the funding of care is the key consideration. Care providers, which are predominantly private providers, deliver care that is largely publicly funded through local authorities. Cost-cutting pressures have contributed to local authority fees for care services being lower than operating costs, with private providers relying on cross-subsidising public funding by charging higher fees to clients self-funding their care. There is also evidence of private providers diverting their services to richer areas to attract self-funders, with concerns about the decline of provision in poorer areas. In this context, closing visas for care workers is unlikely to push employers to increase wages without an increase in local authority fees to make real improvements in pay viable. Indeed, an alternative to putting up wages is for care providers to close and shut up shop or move shop to richer areas. The White Paper does say that the Government will put in place Fair Pay Agreements for the sector, but when and how will that be funded? Increased national funding and stronger enforcement will be needed.

Tackling abuse and exploitation

Moving to the UK to work in health and social care can provide opportunities for workers from countries with which the UK and many UK citizens have longstanding relationships, such as India. But it can also come with costs for those workers. The White Paper refers to evidence of abuse and exploitation of care workers coming to the UK through the Health and Social Care visa. This includes employers and recruitment agents charging fees to workers, the underpayment of wages, and substandard accommodation for workers, among other issues.

Charging fees to workers is in part a means of diverting the costs of immigration and recruitment fees, despite it being unlawful to do so. These issues reflect a need for stronger regulation and enforcement of labour standards in international recruitment, such as limiting care worker recruitment to licensed recruiters. Steps have been taken to address unlawful practices, which can include revoking a care employer's sponsorship licence. But the visa system itself contributes to risks of abuse and exploitation for workers. Where the worker's visa is tied to their employer, they risk losing both their job and their visa if they report an employer, the employer's sponsorship licence is then revoked, and the care worker is unable to find an alternative employer. This inhibits workers from reporting abuse or leaving exploitative conditions.



Closing visas to care workers would make recruitment from within the UK imperative, but without a funded pay agreement in place, the challenges facing the social care system remain unaddressed.



There are examples the Government could follow to protect the rights of care workers in international recruitment. For example, the Aged Care Industry Labour Agreement in Australia requires employers to agree a Memorandum of Understanding with the relevant trade union to be able to enter into this Agreement, which allows for the international recruitment of care workers. The MoU requires employers to demonstrate standards are already met in terms of pay and working conditions (e.g. set hours of work) as a precondition for hiring overseas workers. It also requires paid time for attending union meetings for all interested care workers, facilitating access to representative bodies.

Closing the Health and Care worker visa for care workers would, evidently, contribute to a reduction in the numbers of migrants entering the UK on that visa. But why single out care workers? Closing visas to care workers would make recruitment from within the UK imperative, but without a funded pay agreement in place, the challenges facing the social care system remain unaddressed. Closing visas to care workers also does nothing to protect care workers from abuse and exploitation in an underregulated and underfunded system in which the employment rights of care workers, both migrant and domestic, are put at risk.

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