

special
articles

MITESH SHAH, SANTANU GOSWAMI, GAGANDEEP SINGH AND ROBERT BROWN

Overseas consultant psychiatrists moving into the NHS: initial experience

Moving to a different country for work can be an interesting experience but can be demanding for healthcare professionals as the systems across countries are vastly different. At the same time, such an opportunity can enable professionals to broaden their skills and experiences. The National Health Service (NHS) provided such an opportunity by recruiting consultants from overseas under the International Fellowship Scheme. In this paper three psychiatrists (M.S., S.G. and G.S.) who moved to the UK under this scheme describe their initial experiences.

Initial experience

In 2002, the Department of Health, UK launched a global campaign to recruit psychiatrists from overseas to work as consultants in the NHS. We were among the hundreds of aspirants who responded to advertisements in national newspapers. Initial seminars organised across India were informative but overwhelming. Being short-listed for the interviews was an exciting experience in itself but the amount of paperwork needed for acquiring Specialist Training Authority (STA) approval seemed to be an uphill task. Visiting the UK for the interview was very exciting. For many of us it was our first visit abroad. The interview week allowed us to visit our potential workplaces and attend presentations about multidisciplinary teams and working systems. We visited about ten sites across four different trusts and we found it quite difficult to assimilate all the information.

Like many other trusts, Mersey Care NHS Trust provided us with the opportunity to socialise with the consultants and leading staff and meet the chief executive and other lead consultants of the trust. Our families also had a glimpse of the life they were potentially going to experience. Perhaps the best part of the interview week was being interviewed by a panel of experts. The overall interview style, framing of questions and emphasis on putting the candidate at ease was not only refreshing but also gave us an idea of the system we were perhaps going to work in. However, waiting for the interview results was somewhat nerve-racking although worth the wait.

Selection

Our selection of a post was based more on our impressions than empirical data as we had difficulty in recalling all the information. Our final decisions about taking the posts in the Mersey Care NHS Trust were made on the basis of location and possible better future options for our families.

The time from being selected to joining our posts proved to be an ordeal. We had to 'crisscross' various parts of our home country to complete documentation for STA approval which required evidence of our training in our home country. Fortunately, our medical institutes not only provide rigorous training but also keep excellent records of training activities, such as duration in post, skills gained, formal and informal teaching programmes and academic and research activities. Postgraduate training activities have to follow a prescribed pattern and all trainees have to complete regular 6-monthly assessments and final examinations. Supporting documents authenticated by our supervisors were provided to the STA. Despite this efficient system, it took us about 6–8 weeks to complete the paperwork. However, as our education and training were conducted in English, clearance from the English Language Testing System was not difficult. While we waited patiently for approval, feedback from colleagues who had already arrived in the UK reinforced our decision to move here. Depending on the exact timing of filing the application, it took about 10–16 weeks for STA approval and another 4–8 weeks for General Medical Council (GMC) registration.

Relocation

Once GMC registration was finalised, the major task of planning the relocation began. The Department of Health provided an excellent relocation programme, which included assistance in moving, help in finding suitable accommodation and support for our families. Although one of us undertook a 'preview' trip to organise accommodation and children's schools, others were assisted by our relocation consultants.

As the departure date became imminent, we spent time with our relatives, addressing their concerns and saying 'goodbye'. Perhaps there was too little time left to prepare us for the professional challenges ahead. Overall, it was a long journey. We appeared at the interviews after about 8 months of filing initial applications. It took another 4–6 months for approval and registration to come through. The final move from our home country took a further 3–5 months.

When we arrived in the UK we were excited, but were apprehensive about a totally different healthcare system, about which we had no experience. For the first few months we shadowed senior consultants but found the information overwhelming. There were difficulties in obtaining information from other team members owing to their own busy schedules but we were helped by continual input from our clinical and medical directors. Major professional challenges included understanding the



correct application of the Mental Health Act 1983, the multidisciplinary team approach to patient management, after-care programmes and the intricacies of the referral system. We had to rely on others for the implementation of the Act. However, in addition to the initial shadowing the Mersey Care NHS Trust provided further assistance by appointing a mentor with whom we could discuss our professional difficulties. The trust also provided assistance for the Section 12 course approval, which is essential for application of the Mental Health Act 1983. For those of us who are not yet Section 12 approved, we are constantly supervised and assisted by another senior consultant.

Conclusions

Moving to the UK was not only a professional challenge for us but also a testing time for our families. There were issues related to living in a new country with the different lifestyle, food and educational system. For some of us, it was a matter of supporting our children who experienced a culture shock; for others, safety and security on the streets were major concerns.

One of the major factors that has helped us to settle down here has been the support we have drawn from each other. Those who came here earlier provided excellent assistance and guidance to the newcomers. We frequently interact with each other, make suggestions and put others at ease. The fact that few of us knew each

other before arriving in the UK only helped the situation further. Our colleagues in our home countries have reacted variably to our move. Although there was some concern at the potential loss of trained practitioners (especially those who were in government jobs), we met with a general feeling of acceptance of our move. We have often discussed with our colleagues back home the similarities and differences in health systems and the challenges of working in the NHS.

Overall moving has been a challenging experience. We still feel anxious, nervous and lonely at times, and miss our families. At other times we feel at ease.

It would be immensely helpful if future programmes included a more comprehensive induction programme focusing on the structure of the NHS, the Mental Health Act 1983 and the city where recruits would work. Some knowledge by existing staff about the culture of overseas doctors and their expectations would also be helpful in allowing a smoother transition.

Declaration of interest

M.S., S.G. and G.S. moved to the UK from India under the International Fellowship Scheme.

Mitesh Shah Consultant Psychiatrist, **Santanu Goswami** Consultant Psychiatrist, **Gagandeep Singh** Consultant Psychiatrist, Mersey Care NHS Trust, Liverpool, ***Robert Brown** Consultant Psychiatrist, Rehabilitation Services, Adult Mental Health Directorate, Rathbone Hospital, Mill Lane, Liverpool L9 7JP, e-mail: marie.jones@merseycare.nhs.uk,

SANJU GEORGE, BILL CALTHORPE AND SUDHIR KHANDELWAL

The International Fellowship Scheme for consultant psychiatrists: trainees' perspective

The NHS International Fellowship Scheme for consultants offers overseas consultants, in specialties including psychiatry, an opportunity to work in the UK (Goldberg, 2003). This was launched by the Department of Health in 2002 and so far over 100 consultant psychiatrists have been recruited. However, there are several aspects of the project that are unclear. How long will this recruitment continue? Are there any arrangements in place to encourage overseas consultants to return to their home country at the end of their fellowship? Are they eligible to train senior house officers (SHOs) and specialist registrars (SpRs)? Will the recruitment under the scheme have an impact on job opportunities for SpRs currently training in the UK? Why is membership of the Royal College of Psychiatrists being granted to the newly recruited consultants without an examination? These and many more concerns have arisen in the wake of this scheme. In

this article, we evaluate the scheme, discuss its implications and suggest possible ways forward.

Benefits of the scheme

This scheme has a range of potential benefits. It will help to fill the vacant consultant posts in the National Health Service (NHS). Careful and selective recruitment of highly skilled and truly committed consultants can make a real difference to mental health service delivery.

The overseas consultants and potentially their home countries have as much to gain as the NHS. The scheme offers them an opportunity to work 'in a different health system, acquire new skills, get wider work experience, pursue research interests and develop their teaching skills' (Mellor, 2003). Individual NHS trusts are also providing many, less well-publicised, voluntary services in