

Enhanced  
Support  
Programme to  
improve  
transitioning of  
IMGs to the NHS

**DR ROOPA CHOPRA**

ACTING UP CONSULTANT DIABETES AND ENDOCRINE

CLINICAL LEAD FOR GIM

NEW CROSS HOSPITAL, WOLVERHAMPTON



NOTHING TO DECLARE

# Background

- ▶ International medical graduates (IMGs) are the doctors who have graduated from medical schools outside of the UK or the European Economic Area (EEA).
- ▶ Since its inception, IMGs have been a major part of the NHS workforce
  - ▶ June 2020: >10,000 additional IMGs joined
  - ▶ IMGs constitute 30-40% of the junior doctor workforce

# IMG support during transitioning

## Why do IMGs need support

- ▶ Adjusting to a new country and a new healthcare system, all at once
- ▶ The fundamental values of medicine may be universal, but their expression varies according to the social, cultural and organisational context of care delivery

## What does it achieve

- ▶ Well-structured and individualised support enables IMGs to successfully integrate professionally and socially
- ▶ There is strong suggestion that smooth transition is linked to better patient care

# Principles of enhanced support by the Clinical Fellowship Programme (CFP), RWT

## **Support doctors to support patients**

- ▶ Delivered by CFs
- ▶ Delivered prior to arriving in the UK and continued after arrival
- ▶ Repeat attendance encouraged
- ▶ 3 main areas of support
  1. Acclimatisation and pastoral support
  2. Care of acute patients
  3. Education, training and career

# Acclimatisation and pastoral support

# Common concerns of moving to a new country

- ▶ What to bring to the UK
- ▶ Accommodation
- ▶ Mobile network
- ▶ Transport
- ▶ Medical help
- ▶ Shopping

# Buddy system and early support lead

- ▶ Allocation of buddy
- ▶ Pastoral induction pre-arrival
- ▶ Sharing contact details of Chief CFs and Pastoral leads
- ▶ Face to face pastoral drop in sessions
- ▶ Early support team services
- ▶ CF WhatsApp group



# Pastoral induction and support sessions

- Accommodation
- Transport
- Registering with GP
- What to bring, where to buy/ eat out
- Mobile network, currency, banking

- Buying a car, parking
- Indemnity, blue light card
- Request AL, SL, sick leave, lieu day
- Information on available support services, social groups, networking

# Induction

- ▶ Trust induction
- ▶ CFP induction
- ▶ Pastoral induction
- ▶ GMC – Welcome to UK practice
- ▶ IT induction: hands on, repeat session
- ▶ Directorate induction: Log in / passwords provided on start



# Care of acutely ill patients

# Training opportunities

## **On call training**

- ▶ 3 hour on-call induction including “Walk through ED / AMU”
- ▶ Shadow on-calls for one week including “nights and long days”

## **ALS and IMPACT training**

### **SIM training**

- ▶ Procedural
- ▶ Acute care sessions
- ▶ In-situ SIM training



# Education and career progression

# Supervision and Study Leave

- ▶ Clinical and Educational supervisor allocation
- ▶ Group supervision
- ▶ CESR supervisors
  
- ▶ 10 days per year
- ▶ £600 per year
- ▶ Additional leave and funding at the discretion of the directorate

# Clinical teaching and training

## Clinical

- ▶ Level 1, 2 and 3 teaching
- ▶ Surgical clinical teaching
- ▶ PACES teaching and training

## Additional training

- ▶ Funded ALS and Impact training
- ▶ Funded SIM sessions
- ▶ Communication training
- ▶ Appraisal and revalidation

Date	Time	Topic of Teaching	Date	Time	Topic of Teaching	Location
1 <sup>st</sup> February 2024	16:00 – 17:30	COE	7 <sup>th</sup> February 2024	14:00 – 15:30	Palliative and EOL Care	MLCC Room 9 & MS Teams
8 <sup>th</sup> February 2024	16:00 – 17:30	GUM	14 <sup>th</sup> February 2024	14:00 – 15:30	Stroke Essentials	MLCC Room 10 & MS Teams
15 <sup>th</sup> February 2024	16:00 – 17:30	Cardiology	21 <sup>st</sup> February 2024	14:00 – 15:30	Oncological Emergencies	MLCC Room 10 & MS Teams
22 <sup>nd</sup> February 2024	16:00 – 17:30	Respiratory	28 <sup>th</sup> February 2024	14:00 – 15:30	Avoiding prescribing and medication errors	MLCC Room 3/4 & MS Teams
29 <sup>th</sup> February 2024	16:00 – 17:30	Rheumatology	6 <sup>th</sup> March 2024	14:00 – 15:30	The Role of Digital Fellows in the Trust	MLCC Room 3/4 & MS Teams
7 <sup>th</sup> March 2024	16:00 – 17:30	Medical Legal	13 <sup>th</sup> March 2024	14:00 – 15:30	Recognition of Sepsis	MLCC Room 11 & MS Teams
14 <sup>th</sup> March 2024	16:00 – 17:30	Sepsis	20 <sup>th</sup> March 2024	14:00 – 15:30	General Surgical Emergencies	MLCC Room 9 & MS Teams
21 <sup>st</sup> March 2024	16:00 – 17:30	Neurology	27 <sup>th</sup> March 2024	14:00 – 15:30	Communications Skills	MLCC Room 10 & MS Teams
28 <sup>th</sup> March 2024	16:00 – 17:30	Haematology	3 <sup>rd</sup> April 2024	14:00 – 15:30	Leadership Teaching	MS Teams
11 <sup>th</sup> April 2024	16:00 – 17:30	QIP/ Audit presentations	10 <sup>th</sup> April 2024	14:00 – 15:30	Public Mental Health & Health Protection	MLCC Room 10 & MS Teams
18 <sup>th</sup> April 2024	16:00 – 17:30	Renal	17 <sup>th</sup> April 2024	14:00 – 15:30	Paediatric Emergencies	MS Teams
25 <sup>th</sup> April 2024	16:00 – 17:30	Interview Skills	24 <sup>th</sup> April 2024	14:00 – 15:30	COE	Sister Dora Lecture Theatre & MS Teams
2 <sup>nd</sup> May 2024	16:00 – 17:30	Palliative Care	1 <sup>st</sup> May 2024	14:00 – 15:30	Freedom to Speak Up	MLCC Room 3/4 & MS Teams
9 <sup>th</sup> May 2024	16:00 – 17:30	Radiology	8 <sup>th</sup> May 2024	14:00 – 15:30	Pharmacy	MLCC Room 9 & MS Teams
16 <sup>th</sup> May 2024	16:00 – 17:30	Education/ Teaching Opportunities Session	15 <sup>th</sup> May 2024	14:00 – 15:30	Obs & Gynae	MS Teams
23 <sup>rd</sup> May 2024	16:00 – 17:30	AMU	15 <sup>th</sup> May 2024	14:00 – 15:30	Obs & Gynae	MS Teams
30 <sup>th</sup> May 2024	16:00 – 17:30	Gastroenterology	22 <sup>nd</sup> May 2024	14:00 – 15:30	Medical Legal	MLCC Room 9 & MS Teams
6 <sup>th</sup> June 2024	16:00 – 17:30	Research and Publications	29 <sup>th</sup> May 2024	14:00 – 15:30	Coroners Inquest	MLCC Room 9 & MS Teams
13 <sup>th</sup> June 2024	16:00 – 17:30	Endocrine and Diabetes	5 <sup>th</sup> June 2024	14:00 – 15:30	Cardiology	MLCC Room 9 & MS Teams
20 <sup>th</sup> June 2024	16:00 – 17:30	Stroke	12 <sup>th</sup> June 2024	14:00 – 15:30	Diabetes	MS Teams
27 <sup>th</sup> June 2024	16:00 – 17:30	ICU	19 <sup>th</sup> June 2024	14:00 – 15:30	Oncology	MS Teams
4 <sup>th</sup> July 2024	16:00 – 17:30	QIP/ Audit Presentations				



# Career progression

- ▶ 1 month and 6-month EQ sessions
- ▶ E-portfolio training sessions
- ▶ Career guidance session
- ▶ Interview training
- ▶ Audit and QIP support and training

Educational meeting with EQ team at 3/12- AG/RR/HB/CCFs  
Batches of 2, 20 minutes for each candidate  
2-3 hour protected meeting every month  
Covering 18-27 candidates every month

**Before the meeting**

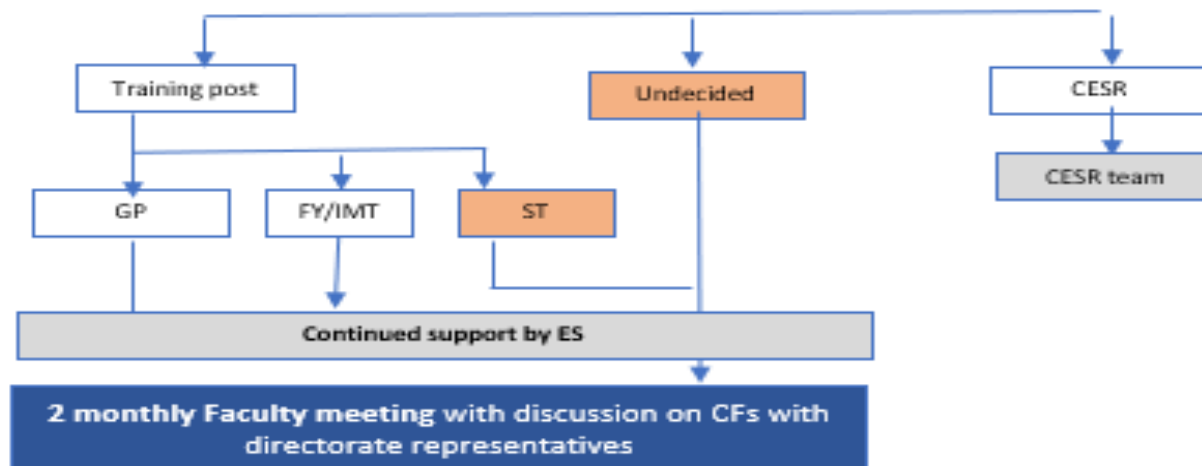
- ES report- structured template
- CF to complete a reflection on career objectives and plans or a PPT x 2 slides

EQ lead, CCF and team

Career objective  
Gaps and areas of improvement  
plus strengths

Protected teaching programme  
for every one  
Discussed during assessment  
with ES

SIM teaching –  
mandatory



**Further meeting with the CF's at 12 or 18 months- 5 minute powerpoint presentation x3 slides on:**  
**achievements/progress/Gaps**  
**How will they plan to achieve**  
**Other areas covered are**

- MRCP or other exams/ COE / ICU/ AMU/ ST Level "take" exposure/ Courses/ Mock interviews



# CESR (Portfolio pathway) training

# CESR programme (Portfolio pathway)

## Identify “committed” CESR doctors to support with

- ▶ Establish support within directorates
- ▶ CESR supervision
- ▶ Develop opportunities in non-clinical domains
- ▶ Secondment
- ▶ CESR Peer group
- ▶ Pastoral support and mentorship
  
- ▶ Development of CESR posts

# ARCP for CESR

- ▶ Annually during the last 2-3 years across all specialities
- ▶ Panel: Trust CESR team, Supervisor, admin team
- ▶ ARCP template based on SSG
- ▶ Formative assessment and recommendations
- ▶ Formal report on the progress made and needed – used for evidence

# Support for Non-clinical Evidence

- Management roles
- Teaching and training opportunities
- Governance activities
- Audit and QIP guidance

**Support for non-clinical domains is aimed not just at CESR but to build a career after CESR**

# Situation, Behaviour and Impact (SBI) model

- ▶ We have collected feedback for every support session that has been held so far
- ▶ Multiple PDSA cycles for most of the services for improvisations
- ▶ Audit on buddy system
- ▶ Exit interviews

Last 12 months (May 2023-May 2024)

RWT

WHT

BCHFT

**Total number of Clinical fellows (CFs) in post = 374**

253

92

29

**CF attendance at induction sessions (12 months)**

CF induction

95

20

21

Pastoral induction

109

58

13

IT training

53

25

NA

**CF delivered pastoral support (12 months)**

Number of buddies

57

18

11

Number of early support leads

14

2

1

**Portfolio pathway (CESR pathway)**

Successfully completed

22

0

0

Appointed consultants in the trust

16

0

0

Appointed consultants in the region

4

0

0

CESR ongoing

32

10

0





First CFP Conference – 23/9/2023



“Patients do not just have pathologies, they have a story, a life, priorities, fears and anxieties – a good doctor will attempt to listen and address them all”

Jag Samra

...of one thousand pounds and over to the ROTHA ABRHAM LECTURE THEATRE

<p>our White Charitable Trust          Beulton Paul Male Choir          and St          rington          Baxter Cookery Partnership          Group Services Ltd          Howard Foundation          Parkes and Sons Ltd</p>	<p>Mander Brothers Ltd          Messrs Baker Jones and Co          National Westminster Bank PLC          Patients Aid Association          Rotha Abraham Trust          Samra PLC          Wolverhampton and Dudley Breweries PLC          Wolverhampton Marathon 1984          Dr. R.A. Young</p>
---	---

Development in  
 ...ent care

Development  
 ...are



# Welcome to the Clinical Fellowship Conference 2023

Working in partnership

The Royal Wolverhampton NHS Trust  
Walsall Healthcare NHS Trust



Care Colleagues  
Collaboration Communities

1







The success of our programme is defined by the success of our fellows



**THANK YOU**

For any follow up  
queries, please feel free  
to email me on  
[roopa.chopra@nhs.net](mailto:roopa.chopra@nhs.net)