This publication is a tailored guide for overseas trained Allied Health Professionals and Healthcare Scientists who wish to find employment in the National Health Service. It is intended for the refugee community however much of the information is relevant for a non-refugee, overseas audience as well.

It is written in a clear style and uses case studies to personalise the experiences of new employees to the NHS. Much of the information can be further researched by visiting the websites referred to throughout the guide.

Some of the topics covered are:
- the Health Professions Council registration procedures
- a career framework for the NHS
- alternative careers for Allied Health Professionals and Healthcare Scientists
- practical guidance on job applications, CV writing and interviews

The Department of Health’s Refugee Health Professionals Steering Group funded this publication

January 2006
A guide for refugee Allied Health Professionals and Healthcare Scientists seeking employment in the UK

Pan London NHS Refugee Allied Health Professionals Group
Praxis
Praxis Community Projects, based in east London, was established in 1983 to promote the human rights, social justice and economic empowerment of people displaced by war, conflict, poverty and environmental degradation.

We work with new residents and new communities, mostly in the London region. Some of our activities also have impact and engage with beneficiaries across the UK.

We have 3 delivery projects 1) advice and orientation, 2) community development and 3) workforce development.

We are engaged in a wide range of networks, partnerships and policy development initiatives concerning the NHS, Housing, Community Development, Prisons and Probation, Education and Employment, and Human Rights issues.

Acknowledgements
We would like to acknowledge and thank all members of the Allied Health Professional Steering group past and present for their support in helping to produce this handbook. The group consists of members of the five strategic health authorities of London. We would also like to thank Sandra Applegate, Head Biomedical Scientist in Histopathology, Queen Mary’s Hospital, Sidcup, Rachel Tripp, Policy Manager, Health Professions Council, Rachel Boocock, Refugee Recruitment Project Manager, Guy’s & St Thomas’ Hospital and Malika Zuagane and Piotrka Pazowska for agreeing to submit their case studies. This handbook has been produced with funding from the Department of Health.

For further copies of this guide please contact:
Praxis
Pott Street
London E2 0EF
020 7729 7985
WorkforceDevelopment@praxis.org.uk
Charity Number: 1078945
Steering Group
Author: Sara Zmertych, Praxis
Other Contributors:
Sarah Coleby, Assistant Director SELSHA
Anne Marie Davies, AHP & HCS Return to Practice Lead NCLSHA
Rachel Wright, Overseas Health Professionals Project Officer NELSHA
Diana Cliff, Refugee Health and Social Care Professionals Co-ordinator NELWDC
Design: Martin Lore 020 8941 4419
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Foreword

It is with pleasure that I present this guide for refugee Allied Health Professionals (AHPs) and Healthcare Scientists seeking employment in the UK.

The guide will provide an invaluable resource for qualified Allied Health Professionals and Healthcare Scientists wishing to work within the United Kingdom. It aims to address the needs of this complex group of professionals and provides up-to-date and vital information on areas such as qualification procedures, working for the NHS, registering with UK regulatory bodies and writing a CV.

The case studies provide a useful insight into what some professionals have undertaken in order to begin employment in the Health Service and helps by bringing together information, contained in this booklet, as a useful starting point. The guide will be nationally distributed and will also be available on the ROSE website - www.rose.nhs.uk

This publication would not have been possible without the support of the Department of Health’s Refugee Health Professionals Steering Group who have funded the guide. This group is committed to helping refugee professionals find employment and have so far distributed £2 million pounds over 4 years to projects across England, that work with refugee Healthcare Professionals.

Finally, as Chairman of Central Manchester and Manchester Children’s University Hospitals NHS Trust - one of the largest teaching Trusts within the UK - I understand the importance of support and the difference that accessible and comprehensible information can make to peoples lives. That is why I am committed to this worthwhile project.

Peter W Mount
Chairman Central Manchester and Manchester Children’s University Hospitals, NHS Trust, Chairman NHS Confederation
Contents

1 Introduction 6
2 Are you an Allied Health Professional or a Healthcare Scientist? 8
3 Allied Health Professionals and Healthcare Scientists registered by the Health Professions Council 15
  3.1 Health Professions Council 15
  3.2 Allied Health Professions that are registered by the Health Professions Council 15
  3.3 Healthcare Science Professions that are registered by the Health Professions Council 16
4 Roles of Allied Health Professionals and Healthcare Scientists in the UK 17
  4.1 Case Study 1 17
  4.2 Case Study 2 20
5 The National Health Service 24
6 Structure of the NHS 24
7 NHS Employment 24
8 The Qualification Procedures in the UK for entry into AHP and HCS roles 24
9 A Career Framework for the NHS 26
10 The Process of Registration 28
  10.1 Contacting the HPC 30
  10.2 English Language Proficiency 30
  10.3 Application to the HPC 30
  10.4 Assessment by the HPC 32
  10.5 Decision Letter: Interpreting the Assessors’ Recommendation
      i) Accepted 32
      ii) Rejected 33
      iii) Period of Adaptation / Supervised Practice 33
      iv) What to Expect from a Period of Adaptation 33
      v) Further Verification 34
  10.6 Right of Appeal 34
11 Other Options – Assistant / Technician level 35
12 Alternative roles in Allied Health 35
13 Alternative roles in Healthcare Science 36
14 Employment 36
  14.1 Curriculum Vitaes (CVs) 36
      i) Personal Details 37
      ii) Education / Qualifications 37
      iii) Employment / Key Responsibilities / Skills 38
      iv) Additional Information / Achievements 38
      v) Referees 39
  14.2 Optional Sections
      i) Personal Statement 39
      ii) Interests 39
  14.3 Different Styles of CV
      i) Chronological 40
      ii) Functional 40
      iii) Targeted 40
  14.4 Presentation 40
  14.5 Useful Suggestions 41
  14.6 Other Sources of Information 41
15 Job Application Forms 42
  15.1 Presentation 43
  15.2 Content 43
16 Covering letter 44
  16.1 Other Sources of Information 45
17 Interviews 45
  17.1 Preparation 45
  17.2 Practice 46
  17.3 Performance 46
  17.4 After the Interview 48
18 Other Sources of Information 48
Appendix 1 Professional Bodies 49
Appendix 2 Health Professions Council Contact Details 51
Appendix 3 Strategic Health Authorities / Workforce Development Confederations / Return to Practice Co-ordinators 51
1 Introduction

This booklet is intended as a guide for refugee and overseas qualified Allied Health Professionals and Healthcare Scientists who are planning to enter the labour market in the United Kingdom (this includes Northern Ireland, Scotland and Wales).

It informs the reader of the many different professions that belong under the umbrella term of Allied Health Professionals and Healthcare Scientists and it specifically details those that are registered by the Health Professions Council, the regulatory body for many of them.

This booklet also informs the reader of the following:
- Pathways refugees can take to register with the Health Professions Council
- What to expect working in the National Health Service (NHS)
- An outline of the academic levels which are required for the different professional levels

The sections on employment focus on the NHS as the principle employer. The NHS is the largest employer of Allied Health Professionals and Healthcare Scientists in the UK.

The guide is most effective if used in collaboration with the Internet as there are many references to relevant websites.

While refugees are the intended target audience, employment advisers and human resources staff can also benefit.

Sara Zmertych

Sara Zmertych was born in London in 1971. She has a BSc in Psychology and Linguistics from Roehampton Institute, University of Surrey. Previously she worked in the legal team of the Refugee Council and for the past three years for Praxis as an Education & Employment Adviser. She coordinated the first course for qualified refugee Allied Health Professionals / Health Care Scientists in the UK, funded by the Department of Health Refugee Health Professionals Steering Group.
2 Are you an Allied Health Professional or a Healthcare Scientist?

In the UK there are a wide range of professions that belong to these two groups. You will need to check whether your profession is included.

Allied Health Professions are:

**Occupational Therapy**
Roles: occupational therapist, occupational therapy assistant, occupational therapy support worker, rehabilitation assistant, technical instructor

Occupational Therapists help people to overcome physical, psychological or social problems arising from illness or disability by concentrating on what they are able to achieve, rather than on their disabilities.

Assistants, support workers, technical instructors and rehabilitation assistants are alternative job titles for those who assist qualified occupational therapists. This can sometimes be a route to an in-service degree course leading to qualification as an occupational therapist.

**Paramedics**
Roles: paramedic, ambulance care assistant, ambulance technician

Paramedics are the senior members of accident and emergency ambulance crews, trained in all aspects of pre-hospital emergency care and in emergency driving.

Ambulance technicians assist paramedics in accident and emergency work. They can go on to qualify as paramedics.

Ambulance care assistant transport non-emergency patients to and from hospital. They can go on to qualify as ambulance technicians and then paramedics. Some ambulance services only recruit potential paramedics and ambulance technicians via this route.

**Physiotherapy**
Roles: physiotherapist, physiotherapy assistant

Physiotherapists treat the physical problems caused by accidents, illness and ageing, particularly those affecting the muscles, bones, heart, circulation and lungs.

Physiotherapy assistants help with tasks such as preparing patients for treatment, showing patients how to use mobility aids or working on exercises with them. This can sometimes be a route to an in-service degree course leading to qualification as a physiotherapist.

Assistants, support workers, technical instructors and rehabilitation assistants are alternative job titles for those who assist qualified occupational therapists. This can sometimes be a route to an in-service degree course leading to qualification as an occupational therapist.
Prosthetics and Orthotics
Roles: prosthetist, orthotist, limited orthotic practitioner

Prosthetists design and fit artificial replacements - or prostheses - for upper and lower limbs. Prosthetists design and fit the best possible artificial replacements for patients who have lost, or were born without, a limb.

Orthotists provide braces, splints and special footwear to help patients with movement difficulties, and to relieve discomfort.

Limited orthotic practitioners hold a qualification from the British Association of Prosthetists and Orthotists that allows them to practice in a limited area, such as fitting breast prostheses.

Psychology
Roles: clinical psychologist, health psychologist, counselling psychologist, forensic psychologist, assistant psychologist

Psychologists bring psychological theory and practice to bear on solving problems or bringing about improvements for individuals, groups and organisations. The NHS employs psychologists in four main specialisms: clinical work, counselling, forensic work and health psychology.

Clinical psychologists aim to reduce psychological distress and to enhance and promote psychological well-being. They work with people with mental or physical health problems, which might include anxiety and depression, serious and enduring mental illness, adjustment to physical illness, neurological disorders, addictive behaviours, childhood behaviour disorders, or personal and family relationships. They work with people throughout the life-span and with those with learning disabilities.

Health psychology is a new and rapidly evolving area, and can be defined as the practice and application of psychological methods to the study of behaviour relevant to health, illness and healthcare.

Counselling psychologists apply psychology to working collaboratively with people across a diverse range of human problems. These include helping people manage difficult life events such as bereavement, past and present relationships and working with mental health issues and disorders.

Forensic psychology is one of the fastest growing areas of employment of psychology graduates. Forensic psychologists deal with the application of psychology in the criminal and civil justice field. They can work for academic institutions, prison services, the NHS, probation services, police services and Social Services.

Assistant psychologists assist psychologists with the day-to-day work.

Psychologists register with the British Psychological Society. The website is www.bps.org.uk

Psychotherapy
Roles: child psychotherapist, adult psychotherapist, psychotherapy assistant

Psychotherapists use a psychological approach in treating adults and children for a wide range of mental and physical difficulties. There are a number of different approaches, including psychoanalysis. The NHS has designated posts for child psychotherapists only.

Child and adolescents psychotherapists will usually work as a member of a team consisting of psychiatrists, social workers, psychologists, family therapists and community psychiatric nurses within these environments.

Psychotherapists register with the British Confederation of Psychotherapists.

The website is www.bcp.org.uk

Radiography
Roles: diagnostic radiographer, therapeutic radiographer, radiographer assistant, imaging support workers

Radiographers are involved in the planning and delivery of ionising radiation treatment and in the examination of patients by means of x-rays, which are interpreted to aid the identification of illness and disease.

Diagnostic radiographers work mainly within the radiology and imaging departments of hospitals (NHS trusts or private sector) but may also work in surgeries / clinics.

The therapeutic radiographer works closely with doctors, nurses, physicists and other members of the oncology team to treat patients with cancer.

Radiographer assistants and imaging support workers assist qualified diagnostic and therapeutic radiographers. They process films and assist
patients. There is a relevant NVQ, but this is not at present an entry route to qualification as a radiographer.

Speech and Language Therapy
Roles: speech and language therapist, speech and language therapy assistant

Speech and language therapists work with people who have problems with communication, including speech defects or with chewing or swallowing.

Speech and language therapy assistants work with qualified staff. An NVQ in Care at level 3 is available. Currently this is not a route to qualification as a speech and language therapist, but part-time, in-service degree courses are being planned.1

Healthcare Science Professions:

Life Sciences
Life Sciences cover three areas:

1. Pathology
Healthcare Scientists working in pathology laboratories are involved in diagnosing illnesses. They investigate the causes and development of illnesses and assess the effectiveness of the treatments used by doctors. They perform tests on tissues, blood and other bodily samples.

2. Genetics
Healthcare Scientists in this area specialise in analysing and understanding the genetic components of illnesses.

3. Embryology
This is one of the fastest growing areas within healthcare science. Scientists are concerned with the formation of the embryo and with providing other solutions to infertility.

Healthcare Scientists working in life sciences and pathology work in hospital laboratories, the community or other agencies, such as the National Blood Service or the Health Protection Agency.

Life Science disciplines include:
• Anatomical Pathology
• Blood Transfusion
• Clinical Biochemistry
• Clinical Cytogenetics
• Clinical Embryology
• Clinical Immunology
• Cytopathology, including Cervical Cytology
• Electron Microscopy
• External Quality Assurance
• Haematology
• Haemostasis & Thrombosis
• Histocompatibility & Immunogenetics
• Histopathology
• Molecular Genetics
• Microbiology
• Phlebotomy
• Tissue Banking
• Toxicology

Physiological Sciences
Healthcare Scientists in this field are responsible for analysing and diagnosing abnormalities found in the organs. They have direct contact with patients and use specialist equipment to investigate the functioning of the body and to provide treatment. They are mostly based within hospital clinics as part of the medical or surgical teams. Some will work in the community visiting patients at home or in school.

Physiological Science disciplines include:
• Audiology
• Autonomic neurovascular function
• Cardiology
• Clinical Perfusion
• Critical Care Technology
• Gastrointestinal Physiology
• Hearing Therapy
• Neurophysiology
• Ophthalmic Science

1. Information in the above sections has been taken from the NHS Carers website www.nhsccareers.nhs.uk and the NHS Careers publication, ‘Allied professions in the NHS’. Crown copyright material is reproduced with the permission of the Controller of HMSO and the Queen’s Printer for Scotland.
3 Allied Health Professionals and Healthcare Scientists registered by the Health Professions Council

3.1 Health Professions Council

The Health Professions Council (HPC) is the UK regulatory body for a group of thirteen Allied Health Professions (AHP) and Healthcare Science (HCS) professions. The list of professions can be viewed in section 3.2 and 3.3. As a regulator, the main objective is ‘to safeguard the health and well-being of persons using or needing the services of registrants’.

In order to register with the HPC, you will need to show that you meet the required standards. If you become registered, you will be entitled to use the protected professional title for your profession. As the titles are protected, it is illegal for anyone to use the title unless they are registered with the HPC.

The HPC does not regulate assistants or support workers, so if you are a radiographer, you must register with the HPC. Radiography assistants do not need to register.

The website is www.hpc-uk.org

Each profession will also have their own professional body. The professional bodies promote and develop the professions and provide support and advice to members. They are independent bodies which means that the levels of support may vary. (See Appendix 1 for the full list of professional bodies).

3.2 Allied Health Professions that are registered by the Health Professions Council

- Art Therapists
- Chiropodists / Podiatrists
- Dieticians
- Occupational Therapists

Physics and Engineering

Healthcare Scientists in this area will study new ways of diagnosing, monitoring and treating illnesses. They can be involved in developing techniques such as radioactivity and magnetic resonance which are ways to monitor and record illnesses. They also check that equipment is functioning correctly.

Physics and Engineering disciplines include:

- Biomechanical Engineering
- Clinical Measurement
- Equipment Management
- Information Technology and Management
- Medical Electronics and Instrumentation
- Medical Engineering Design
- Maxillofacial Prosthetists & Technologists
- Medical Illustration
- Rehabilitation Engineering
- Diagnostic Radiology
- Nuclear Medicine
- Radiation Protection and Monitoring
- Radiotherapy Physics
- Renal Science and Technology
- Ultrasound and Non-Ionising Radiation

Information is available at www.fedhcs.net
4 Roles of Allied Health Professionals and Healthcare Scientists in the UK

Allied Health Professionals

Allied Health Professionals work both as single, independent practitioners (unless they are assistants in which case they function as support staff) and as part of a multidisciplinary team. An example of multidisciplinary team working could be a physiotherapist who consults with the patient's doctor, nurse, social worker and family to establish and implement a care plan. The physiotherapist will need to have good interpersonal and communication skills. The working environment will not necessarily be a hospital. It may be a residential care home, family home or a community clinic. Therefore, the physiotherapist needs to be flexible and adapt to changing environments and circumstances. The NHS encourages a patient-centred approach which means that a care plan is agreed and developed with the patient and his/her family and the patient is kept informed throughout the process. Patients must also be treated holistically which means that the social as well as healthcare needs of the patient are addressed.

4.1 Case Study 1
Malika Zuagane

Malika Zaghouane is a trained Orthotist technician from Algeria. When she came to the UK she found it very difficult to find work because she had not trained in the UK. Initially, she worked as a sales assistant in a special footwear shop and as an assistant in a nursery school.

Malika had a very positive attitude and was determined to re-enter her field and work in a hospital. She attended English courses to improve her language skills. She also joined the Society of Chiropodists and Podiatrists (SCP) as an affiliate member and the British Association of Prosthetists and Orthotists (BAPO). These contacts meant that she could attend group meetings and talks in which she learnt about various training courses, such as the NVQ 1 ‘Footcare in the social setting’. Malika also attended a NHS Information Day in London where she met people with similar difficulties as her. With some assistance from her Employment Adviser at a refugee community organisation she was successful in gaining a job as a Podiatry technician at Westminster Primary Care Trust in London.
‘In the beginning my job involved working in the reception area booking appointments for clients and make referrals to see the Podiatrist. Later, I began to work in two clinics seeing a caseload of five patients in the morning and five in the afternoon’.

Typical work involved taking templates of feet and making orthotic appliances (such as insoles), prescribing sample insoles and providing nail care for elderly patients.

‘The NHS made me feel very welcome. When I first started my job I was offered a two-week induction programme which I attended with other employees. We learnt about NHS policies and about the primary care trust to which we belonged. I had the opportunity to meet the chairman, all of the HR staff, the managers and representatives from UNISON- the trade union for public sector workers. I felt part of a bigger group and it helped me to position myself and orientate myself to the organisation’.

At the same time as working in the clinics, Malika was attending an Association of Chief Chiropodists’ (ACCO) training programme one day a week from September 2004 - July 2005. The types of topics covered were: pathology, pharmacology, microbiology, anatomy and physiology, as well as more general topics such as communication skills, Healthcare policies, First Aid treatments and Health and Safety procedures.

‘I enjoy the variety of studying and working. It is very busy and enjoyable’.

Often Malika needs to attend conferences and away days with her colleagues.

‘I also have a lot of emails that I need to read and catch up with’.

One morning a week is spent in the classroom with the rest of the day spent studying independently and preparing the relevant paper work. There is a Student Support Adviser employed by the Trust to support students like Malika with her studies and with completing the witness statements that are required for each practical case study she does. As well as the Association of Chief Chiropodists’ ACCO training, Malika has been completing her NVQ 3 in Care. She has been attending an evening class once a week and now needs to work on her portfolio. The Strategic Health Authority offered the training, Thames Valley University delivered the training and her employer paid for it.
Malika’s ambition for the future is to specialise as a Podiatrist working in the areas of biomechanics and musculoskeletal positioning. This would involve working closely with Physiotherapists or Physiotherapy assistants. Alternatively, she would like to do the two year Foundation degree in Podiatry.

Healthcare Scientists

Healthcare Scientists are responsible for the prevention, diagnosis and treatment of illnesses. Often the outcome of a patient’s treatment is dependent on the Healthcare Scientist. For example, a doctor may think that a patient is anaemic but until the Biomedical Scientist analyses the patient’s blood they will not know for sure. Some Healthcare Scientists have direct access to the patient, such as Audiologists and Cardiographers. The nature of the work also means that, like AHPs, they will be familiar with a multidisciplinary working environment.

4.2 Case Study 2
Piroska Pazowska

Piroska Pazowska is twenty-seven years old. She trained for four years as a medical laboratory technician in a medical high school in Macedonia before leaving her country and coming to the United Kingdom. Her ambition was to develop a career as a scientist, specialising in pathology. An assessment from the National Academic Recognition Information Centre for the United Kingdom (NARIC) had concluded that her training was equivalent to a BTEC National certificate. This was adequate training for the role of a Medical Laboratory Assistant, but Piroska felt she needed to gain confidence and an insight into the laboratory work of the UK before applying for paid positions. She also wanted to explore what options were open to her within the field of Biomedical Science, and in particular pathology. Previously, her experience had been restricted to microbiology.

Piroska also needed some means of supporting herself. She decided to attend a two week course to train as a Healthcare Assistant (HCA). On successful completion of the course, she obtained a job in a private nursing home in South East London.

‘It was exhausting work and it was sad but I felt quite happy at the time. I worked as part of a team and I was seeing how the healthcare system
worked. I had heard the expression about ‘getting your foot in the door’, so I thought I’d give it a go.’

While working as a healthcare assistant, Piroska learnt about NHS Careers, the telephone advisory service which gives information about careers in the NHS. She rang and asked about the possibility of undertaking voluntary work within a Biomedical Science laboratory. The adviser she spoke to was very helpful. She was told that the adviser knew some managers within different hospitals whom she would email on Piroska’s behalf.

Within a couple of days a senior manager from Queen Mary’s Sidcup NHS Trust called Piroska and invited her to attend the hospital. Piroska went along taking her translated degree certificate and her syllabus. The two of them had a good discussion regarding her training and past work experiences and she was given a tour of the laboratory. The manager said she would need to speak with the Human Resources department to enquire about taking her on as a volunteer. Four days later, she rang Piroska to say that she could start as a volunteer as soon as possible doing two days a week, 8.30-5pm. Piroska arranged with the nursing home to have the days off so that she could attend the hospital.

Initially she started working in the Cytology department. After two months, a vacancy arose for which she applied. Piroska knew that she stood a good chance of getting the post as she was a very reliable employee; she was never late and she was passionate about the work.

‘I was working properly; I wasn’t chatting or having tea breaks. I was really working hard.’

Her interview went very well and she was offered the job. The post was a one year contract doing part time work of two and half days a week.

Piroska’s manager knew that she was also interested in learning about the other areas of pathology, such as Biochemistry, Haematology, Microbiology, Histology and Cytology. She therefore arranged for Piroska to spend a further one and a half days as a volunteer in the MLA bank and one day in Phlebotomy. The work in the bank involved receiving specimens in the central reception area and observing the various procedures undertaken within the haematology and chemistry section. Then one of the MLAs in Histology retired and a vacancy arose. Piroska was encouraged to apply for the position as it would allow her to develop her skills and knowledge.

In the interview, she remembers being asked what her career ambition would be for the next five years. She was open and said that her ambition was to register as a Biomedical Scientist with the Health Professions Council. The managers were pleased with her performance in the interview and offered her the post saying that they would inform her of any future trainee positions.

Piroska says that she owes a lot of her success to the fact that she took the initiative and showed real determination and enthusiasm to do voluntary work. At one point she was working seven days a week, undertaking more paid work as a HCA in order to support herself.

‘In the beginning, I really sacrificed my social life for my work. It was hard but it was worth it. The advantage of doing voluntary work is that it will help you to refresh old knowledge and it will allow you to learn some new procedures which you may not have done before, such as using the latest equipment.’

Piroska says that throughout her time as a volunteer she was closely supervised. In the beginning, she was not allowed to touch anything and gradually as her experience and confidence improved she was allowed to take on responsibilities, starting with small tasks which had been previously shown to her and then more complex ones, but always under close supervision.

In March 2005 a trainee post came up within the cytology department for which Piroska applied. She has been interviewed and is awaiting the results. She is also waiting to hear from the Home Office to see whether they will grant her indefinite leave to remain.

2. www.nhscarers.nhs.uk Tel: 0845 6060655
5 The National Health Service (NHS)

The largest employer of AHPs and HCS in the UK is the NHS. In fact, it is the largest employer in Europe and the third largest employer in the world after the Indian State Railways service and the Chinese army. It is therefore important to understand its structure.

6 Structure of the NHS

See diagram on opposite page. For further information visit www.dh.gov.uk or www.rose.nhs.uk

7 NHS Employment

The National Health Service offers opportunities for its staff to engage in a process of continuing professional development. This means that opportunities exist to attend in-house or external training programmes to enhance your skills as well as your levels of responsibilities. For example, an Occupational Therapy Technician could proceed to a Senior Occupational Therapist after several years of training and employment with the NHS. This is known as the skills escalator which allows the employee to continually enhance their career by proceeding to higher levels of specialisation, authority and pay.

8 The Qualification Procedures in the UK for Entry into AHP and HCS Roles

Most AHP and HCS professions require you to hold a degree from a recognised University or Higher Education Institute. Degrees in the UK generally last three years. Some will last four because they offer a ‘sandwich year’ a year undertaken in a work setting. On completion of the degree, you are awarded a BSc (a Bachelor of Science) or a BA (a Bachelor of Arts).

AHPs and HCSs enter the career framework at level 5.
9 A career framework for the NHS

See diagram on opposite page.

2 Support Workers

National Vocational level 2.
This level of study can be undertaken by a student aged 16. It can also be
taken by an adult, post 18, at an Institute of Further Education. NVQs are
used for teaching practical subjects and assessment is by portfolio. They are
valid for one year. If you are receiving benefits the courses are offered for
free. To find further information on NVQs visit www.learndirect.co.uk,
www.hotcourses.co.uk, www.ukcoursefinder.com or see a careers adviser.

3 Senior Healthcare Assistants / Technicians

National Vocational qualification level 3.
This is higher than a National Vocational level 2 and you may have practical
opportunities to follow your professional career. At level 4 you would be
attending a place of employment while studying, or you would be studying
without working. There may be an opportunity for APL/APEL*.

4 Assistant Practitioners / Associate Practitioners

Foundation Degree
This is a new qualification that lasts two years and combines academic
study with work-based learning. There is a Foundation degree in Allied
Health. The course involves the teaching of several different AHP
professions, for example Diagnostic Radiography, Occupational Therapy,
Physiotherapy and Podiatry. There are shared academic studies followed by
generic placements in a range of health and social care settings such as
hospitals, residential care homes, GP surgeries. There are other Foundation
degrees, such as a Foundation Degree in Rehabilitation, Foundation Degree
in Health and Social Care, Foundation Degree in Radiography.

On completion of a Foundation degree, students can progress to a full
honours degree programme to specialise in a preferred area. This takes a
further two years if studied part-time. Employees are also encouraged to
undertake them as a part of their ‘continuing professional development’.
For more information visit http://www.foundationdegree.org.uk
Route to registration with the Health Professionals Council (HPC) for overseas qualified allied health professionals and health care scientists.

Contact the HPC
Either download application pack from the website or request by phone.

English Language Proficiency
Allied health professionals and health care scientists need to score at least 7 in the academic IELTS exam as an overall score with minimal scores of 6.5 each of the sections (for speech and language therapists a score of 8.0 with no section under 7.5). The HPC have a list of alternative acceptable exams.

Application to the HPC
Send completed application form, supporting documents and form.

Assessment by the HPC
Your application is assessed by the HPC. During this time you may be required to provide further documentation.

Test of competence
If documentation is contradictory or inconsistent you may be asked to attend a test of competence.

Decision letter
Applicants will receive a decision letter from the HPC stating one of the four.

Acceptance to the register
Rejection because original qualification is not comparable to the HPC Standards of Proficiency and/or experience has not rectified these shortfalls.

Period of adaption (this only applies to an EEA National). Note there is a time limit on these as experience over time.

Request further verification or invitation to attend a test of Competence based on the professions’ Standards of Proficiency.

To become registered you may wish to study and obtain a UK approved qualification.

You must identify appropriate training/experience. On successful completion the supervisor must sign off and send letter to HPC to confirm that you now meet the HPC Standards of Proficiency.

Registration with the HPC
Registration fee of £60 per year is payable. HPC operates registration over a 2-year period so depending on when you join the Register you may be asked to pay an additional renewal fee of £60 on top of your registration fee. Once payment is received in full the applicant is accepted onto the register.

Alternatively, you can take a BTEC National Course. The course lasts for two years and can lead onto higher education. These are studied at the age of 16 or taken by an adult post 18 at an institute of further education. There are also Higher National Diplomas.

Information on courses can be found at www.aimhigher.ac.uk/courses

At level 5-9 you will be fully registered.

5 Practitioners

Post registration / professional qualifications - A practitioner's first job after qualifying in a professional career.

Study at this level would be postgraduate professional courses, ranging from a one day study programme in diabetic wound care, to a Masters degree in Sports Medicine or Health Management.

6/7/8/9 Senior / Advanced / Consultant Practitioners & Senior Staff

At this level you would be expected to be studying at a Masters or a PHD level. The type of work experience you have is also relevant.

*Assessment of Prior Learning or Assessment of Prior Experiential Learning

Assessment of Prior Learning (APL) or Assessment of Prior Experiential Learning (APEL) are methods for assessing existing knowledge and skills. Each educational establishment have their own process for doing this and you must contact the designated tutor or subject tutor for an interview.

APL is a process by which you receive recognition of your prior learning with an educational organisation (either in this country or your own) and may be permitted to join a degree programme. You will need to show evidence of your studies. A portfolio is the most suitable way to demonstrate this evidence. You will be assigned a mark or credits by way of recognition. APEL is the same process applied to your experience or non-certified acquisition of relevant skills and knowledge.

10 The Process of Registration

See diagram on opposite page.
Completing the application form is very much like completing a job application in which you must demonstrate how you meet each of the requirements on the job specification giving detailed examples.

Here is an example:

**Standards of Proficiency**

**Chiropodists and Podiatrists**

**Expectations of a health professional**

1a: Professional autonomy and accountability
1a.8 understand the need for career-long self-directed learning

I have followed the department’s / trust’s / HPC’s guidance concerning continuing professional development. I have attended in-house and external training that was identified within my appraisal, and that I wanted to undertake for my future career development. I have maintained my professional portfolio, which includes reflections on learning objectives, and clinical / career achievements.

The Skills required for the application of Practice

2a: Identification and assessment of health and social care needs
2a.2 be able to use appropriate assessment techniques

Diabetic new patient assessment.

- At this assessment I recorded in the patient’s notes the patient’s medical history.
- Conducted an examination of the feet. Noted foot abnormalities in its structure (for example Hallux valgus) and assessed skin integrity by looking for signs of skin overloading which may have resulted in the development of corns / calluses / wounds.

I performed the following diabetic foot assessments:

- Vascular assessment: used a hand-held Doppler to record ankle / brachial pressures, checked foot temperature, digital refilling time, foot pulses and skin colouration.
- Neurological assessment: I assessed light touch and pressure sensitivity with neuro-filaments, and vibration sensation with a tuning fork.
- Provided appropriate educational advice.
There were signs of a significant abnormality which I acted upon. I felt that the diabetes represented a high risk. I therefore informed the patient that they needed to be seen on a regular basis for further appropriate treatment. I also referred them to the hospital diabetic team.

10.4 Assessment by the HPC

Your application will be assessed by two assessors who will be registered professionals from the relevant part of the Register. They will be assessing you on your ability to meet the standards. They will look at your education, and then, if necessary, at your training and experience to see whether they meet the standards of proficiency. They will also consider any recent training or work experience (paid or unpaid) which you may have undertaken in the UK.

Incomplete documents will be returned to you. Completed applications will be given a reference number and a letter of acknowledgement.

If you do not have the appropriate documents with you, include your Home Office documents and a covering letter explaining the reasons why the papers are absent and use alternative documents, such as a portfolio or a professional diary. Include as much evidence as possible to show your professional competence.

10.5 Decision Letter

Interpreting the Assessors’ Recommendation

It is very important that you seek guidance to help you interpret the results of the assessment. Contact a refugee organisation or the refugee lead from the Strategic Health Authority that covers the area where you live.

i) Accepted

The assessors have recommended that you should be registered with the HPC. You therefore need to pay your registration fees and then subsequently every two years. Your name will appear on the online register and you will be sent a certificate. You then need to keep the HPC informed of any changes to your contact details, and renew your registration every two years by paying your fees and signing the renewal notice.

As a practising professional you will need to maintain the standard of competence by completing continuing professional development while you are in employment. You can become a member of the professional body for your profession. This will help you to keep up-to-date with developments in your field, enrol for training programmes and read professional journals.

ii) Rejected

The assessors have recommended that you should not be registered as you do not meet the Standards of Proficiency. Your letter will tell you the areas where you did not meet the standards and why. You will therefore need to gain more training or experience to address these areas, and re-apply again later if you wish.

iii) Period of Adaptation / Supervised Practice

If you are a citizen of an EEA state and you are registered in your profession in the EEA then you may be offered a period of adaptation. This is a period during which you can make up any shortfalls in your ability to meet the Standards of Proficiency. The shortfalls will have been described on the record of assessment as minimal or medium.

It is your responsibility to arrange the adaptation. You may wish to contact the Strategic Health Authority which is local to the area where you live and ask to speak to the Return to Practice Co-ordinator for overseas nationals and enquire whether they can offer you a clinical placement. See Appendix 3 for Strategic Health Authority contact details. Currently there are no recognised adaptation courses.

iv) What to Expect from a Period of Adaptation

• You should agree a learning contract with your supervisor.
• You should receive regular supervision.
• You will be expected to keep records / logbook.

It is normal practice for a healthcare professional participating in a period of adaptation to be paid at a care assistant grade. You should not expect to work as an unpaid volunteer.

At the end of your period of adaptation your supervisor will officially verify whether you successfully meet the standards of proficiency by looking at your portfolio. It will be your responsibility to re-apply to the HPC with this new information in the usual manner by completing the application form and paying the scrutiny or application fee again.
v) Further Verification

In some cases, the assessors will not be able to assess your application form because there is a lack of evidence. They may write to you asking for additional information. There is usually a time limit set for returning this information to them. Alternatively, they may ask you to attend a Test of Competence which is based on the standards. The test may be an oral test (typically of 45 minutes), or it may be a practical. Further details will be in your letter. The purpose of the test is to see whether the shortfalls that have been identified can be met.

10.6 Right of Appeal

You can appeal against a decision you think is unfair. You must do this within 28 days. You need to tell the HPC why you are appealing by giving a 'concise statement of the grounds of appeal'. Your appeal may then be considered by a panel who will look again at your application and the assessment decision, and will decide whether to recommend that you should be registered.

If the original decision is upheld then one option for gaining the appropriate training may be to enrol for an UK degree programme. To see the approved list of courses visit www.hpc-uk.org/apply/uk You will need to check with the University whether you can enter the APL/APEL procedure to be admitted onto the course. You will need to discuss this with the Head of Department or Course Admissions Tutor at the university. If you are unsure whether this applies to you contact an Education / Employment Adviser. See the Rose website for an advice centre in your area. www.rose.nhs.uk Alternatively you may decide to apply for an assistant post.

11 Other Options - Assistant / Technician Level

If you have not been able to gain registration with the HPC you may choose to work at the assistant / technician level. While working at this level you may be able to do further training, part-time study or day release to reach the appropriate level for HPC registration, or you may choose to remain at the level that the role demands.

12 Alternative Roles in Allied Health

The following is a selection of careers available in the NHS within the fields of Allied Health professions and Healthcare Scientists. These roles do not currently need registration. However, some may need a specific degree and some of the careers are in the process of becoming a protected title.

We have aimed to match jobs to where they sit on the careers framework. However, this should only be taken as a guide as there is a great deal of change taking place in the NHS. These roles may also vary between trusts.

For further information visit www.nhscareers.nhs.uk or www.rose.nhs.uk

- Ambulance Care Assistant (level 2) [colour coded to match 9 point plan]
- Ambulance Technicians (level 3)
- Chiropody / Podiatry Assistants (level 2-4)
- Dietetic Assistant (level 2-4)
- Imaging Support Worker (level 2-4)
- Limited Orthotic Practitioner (level 2 and 3)
- Occupational Therapy Support Worker (level 2-4)
- Physiotherapy Support Worker (level 2-4), technician (level 2-4)
- Radiography Assistant (level 2-4)
- Rehabilitation Assistants / Therapy Assistant / Care Assistant (level 2-4)
- Speech and Language Therapy Assistants (level 4)
- Technical Instructor (Level 3-4) Generally this is a higher level than a support worker
have seen advertised, you are advertising yourself to an organisation which you have identified as a suitable employer for your given career aspirations. Speculative CVs must always be accompanied with a good covering letter.

Another function of a CV is to aid you when you complete application forms because it provides you with a written catalogue documenting your education and employment history. You should always complete the application form in full. You should not write ‘see CV’. Your CV can be submitted with your application form.

There are many different views on what needs to be included in a CV and the type of presentation.

There are some essential pieces of information you must include, such as:

- Personal details
- Education / Qualifications
- Employment / Key Responsibilities / Skills
- Additional Information / Achievements
- Referees

i) Personal Details

This section includes your name, address and telephone number. It is also advisable to include your mobile number and email address if you have them. It is not necessary to add your age, marital status, children or nationality. Nor do you need to state that you have a work permit.

ii) Education / Qualifications

Include:

- A list of your qualifications with details of the dates, subjects taken and level.
- Non employment related qualifications, such as First Aid certificates.
- If you have used the National Recognition Information Centre for the United Kingdom (NARIC) for a comparison then include the result.
- A description of your training. For example, if you trained at university level you could include brief information on the syllabus and your final year project. It is advisable for you to familiarise yourself with the terminology of your particular profession and use this language in the CV. Doing an internet search or reading university prospectuses should provide you with information on these matters.

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13 Alternative Roles in Healthcare Science

- Anatomical Pathology Technician / Assistant (Level 2 and 3)
- Cardiac Physiologists (level 4) plus in-service degree
- Cardiographer (level 2 & 3) entry GCSEs
- Clinical Perfusionist (level 4+) in-service degree
- Critical Care Technologist (level 4)
- Cytoscreener (level 2-4) entry GCSEs
- Gastrointestinal Physiologist (level 4+) In-service degree
- Gastroenterology Technician (level 2 and 3)
- Hearing Therapist (level 5)
- Medical Illustrator (level 4+) HND needed, in-service degree
- Medical Laboratory Assistant (level 1 and 2)
- Medical Physics Technician (level 3 and 4)
- Medical Technologists and Assistant Technical (level 1-4) in-service training
- Neuropsychology Technician (level 4) entry with A levels.
- (level 5) entry with degree
- Pharmacy Technician (level 3,4,5 and 6) level 3 entry with GCSEs
- Pharmacy Assistant (level 2)
- Phlebotomist (level 1+)
- Phlebotomists can progress to be a team leader / department manager
- Rehabilitation Engineers (level 4)
- Respiratory Physiology Technician (level 2 and 3)
Do not include:

- Primary or secondary school education if it was a very long time ago.
- An account of the education system in your country.

Remember the key is to make your CV as straightforward and comprehensible as possible so that employers are not confused or disinterested in the information you provide. Otherwise, you risk an employer disregarding it because it is too obscure or too long.

iii) Employment / Key Responsibilities / Skills

You need to write your employment history in reverse order with the most recent job first. For example:

1999-2005  Head of Biomedical Science,
            Harare University Hospital, Zimbabwe

and not

1996-1999
1999-2005
nor

2005-1999
1999-1996

State the position you held, the name of the organisation and its location. A full address is not necessary. You must also include a few sentences or bullet points stating the duties and responsibilities you held. Use verbs to describe the tasks that are active and assertive and start with the larger responsibilities first. Use complete sentences and do not use ‘etc.’ This looks lazy and is not informative. If you have specialist skills make sure you list them. Again, remember that it is acceptable to include skills you have gained through voluntary activities.

iv) Additional Information / Achievements

Here you can include information about additional skills or achievements that do not fit into the other sections but which strengthen your description of yourself as a suitable employee. You might include non-employment-related experiences which demonstrate a particular aptitude. For example, language skills, First Aid training, Health and Safety training or if you are the chair or member of a voluntary organisation.

v) Referees

You should include the contact details of two referees. Alternatively, you can state ‘references available upon request’. This would be the preferred method if you were making a speculative application. It is best to use your last two employers. Alternatively, you could use a course tutor (if you have one), your GP or the head of your local place of worship if s/he knows you. If you are involved in any voluntary activities, you could use these contacts as a referee as well, for example if you are a volunteer at your child’s school or a member of the Parent / Teachers Association PTA.

14.2 Optional Sections

i) Personal Statement

This is a short paragraph which you can include at the top of your CV. In the personal statement you give a brief summary of your career aims. The purpose of this is to give the employer an immediate picture of yourself before s/he begins to read the actual CV. There are differing opinions on the use of personal statements and while some employers like them, others do not. You need to use your own judgement as to whether you think a personal statement would be useful. The essential factor is not to make the personal statement too long otherwise the employer will be put off and will not read it. Five or six sentences are usually enough.

ii) Interests

This section is optional. If you chose to include it then only include interests that you would be able to talk about fluently if you were asked about them at an interview. Try to put specific interests rather than general ones, for example ‘I am a keen swimmer and I regularly compete at competition level’ rather than ‘I like different types of sports’.

The most important thing to remember about writing a CV is that you must feel comfortable with the way you have presented the information. You may need to ‘sell yourself’ which might feel strange at first but this is a necessary feature of today’s CVs especially when you are competing against hundreds...
of other applicants. Try to keep the CV short. Three pages should be the absolute maximum. If it is longer than three pages the employer is unlikely to read it. Remember there is not one single way to write a CV.

14.3 Different Styles of CV

- Chronological
- Functional
- Targeted

Depending on your employment history, you could choose to present the information in different styles.

i) Chronological

If you have had a history of continuous employment with no gaps you could choose the chronological style. This involves listing your employment with the present or most recent job first and working backwards. This is the standard way of presenting your CV.

ii) Functional

A functional CV is appropriate if you have not had a continuous period of employment or your employment has been very varied and does not follow on logically from one post to the next. In this style of CV you would emphasise your skills, both paid and unpaid. The employment section can therefore be briefer.

iii) Targeted

For every job that you apply for you will need to alter your CV so that it highlights those skills and competencies which are specifically sought. You may need to stress particular achievements to show that you match the job specification or you may need to delete other sections which aren’t strengthening your case.

14.4 Presentation

Once you are satisfied with the contents of your CV you must ensure that you present the information in the best possible way. It is worth investing time in this aspect of preparing your CV. When you consider that employers may have hundreds of CVs to process then a CV which has an untidy appearance may be the one that is not read.

14.5 Useful Suggestions

Write in paragraphs rather than continuous text.

CVs should be printed on white paper. Use font size 14 for headings and then 12 for the rest of the text. Maintain the same size and style of font throughout. If you use bold to highlight text do so sparingly, for example to emphasise headings rather than using a size 14 font.

Be consistent. If you have used two line spacing between titles and texts in one section then apply the same rules throughout the CV. Similarly if you have used indents for the text then maintain the indents throughout.

Always do a spell check. Maintain the same tense and voice throughout the document. For example, you must not alternate between present and past tense and active and passive voice. This upsets the flow of the text making it difficult to read. It also shows that you have not made the effort to write the text with your audience in mind.

You do not need to write ‘CV’ as your title; Instead, you can write your name. You may choose to put boxes around different sections to emphasise them more clearly.

Use a good quality printer and good quality paper to print your CV. Try not to make your CV too long. Three pages should be the maximum.

14.6 Other Sources of Information

There are many books and websites on this topic. Remember, you may also need to seek advice from a careers adviser at a refugee advice centre for further guidance. You can also ask friends and colleagues to give you feedback on your CV. It may be necessary to do several revisions of your CV before you are satisfied with it. It may also be necessary to adapt your CV for specific job applications.

The publications which are listed in the ‘employment sections’ of the following are not intended specifically for refugees or Allied Health Professionals but you can adapt the information to suit your needs:

‘Connect CV Solutions’ by Anne Rutherford and Catherine Moore. Published by Cheshire Guidance Limited.
If you are offered the opportunity to find out more about the post in the job advertisement, contact the employer after you have received the application pack and before you complete the application form. This way you will be better informed about the post before you complete the application form.

15.1 Presentation

Read everything that is sent to you and follow instructions, such as writing in black ink or using capital letters.

If your handwriting is difficult to read then type the information on separate sheets to which you will refer in the application form.

If you are using the original application it is a good idea to photocopy it first and then complete it as a practice before completing the original.

15.2 Content

You need to demonstrate in the application form how you meet the criteria of the person specification. This will be done in the section referred to as ‘personal statement’ or ‘supporting statement’. If you are asked whether you are able to work under pressure do not say: ‘I am able to work under pressure’. Instead, you could write: ‘Working under pressure has been a key part of my present job. There have been many occasions when I needed to produce work of a high standard within a short period of time in order to meet the targets’, and then give a specific example. This does two things: It shows that you understand the skill, which is needed, and that you have experience of performing this skill. Also, make sure that for each point on the person specification you give a paragraph that can be easily cross-referenced. For example:

1. Ability to cope under pressure

1. I am learning all the time how to cope with stressful situations at work and I understand and appreciate that this is integral to the work.

The same format is used for completing the standards of proficiency for the HPC.

Use the National Academic Recognition Information Centre for the United Kingdom (UK NARIC, www.naric.org.uk) to state the equivalence of your...
qualification. Alternatively, you could briefly describe your training including secondary education and the topics you have covered.

Where there are areas in which you lack necessary skills, experience or knowledge, you could draw on examples from your private life. Alternatively, you could acknowledge the absence of the desired trait and express your motivation to overcome this.

The style of language you use is important. You must use positive, assertive and dynamic language. 'I know' rather than 'I think'. 'I believe' rather than 'I feel'. Essentially, you are trying to 'sell yourself' to the panel who will be reading your application.

16.1 Other Sources of Information

‘How you can get that job: Application forms and letters made easy’ by Rebecca Corfield. Published by Kogan page.

‘Your job search made easy: Everything you need to know about applications, interviews and tests’ by Mark Parkinson. Published by Kogan Page


www.rose.nhs.uk

17 Interviews

If you are short-listed for an interview it means that the interviewer believes you can do the job. It is now down to you to prove in the interview that they really have picked the right candidate.

Remember the three P’s for successful interviews.

Preparation, Practice and Performance

17.1 Preparation

i) Read everything sent to you in the application pack. It will contain important information about the organisation which you will need to know and can demonstrate by mentioning in the interview.

ii) Research the organisation by doing an online search. Read any e-magazines or newsletters that they may have and subscribe to them if this is possible, or visit the organisation.

iii) Find out whether you are expected to give a presentation in the interview and if so, how long will it be and what type of medium will you be expected to use.

iv) If you have a portfolio make a photocopy of the original and take this with you to the interview.

v) Write down a list of questions you think may be asked at the interview.

vi) Write down a list of questions you want to ask at the interview.
17.2 Practice

i) Do a mock interview with a careers adviser, a tutor or a friend who can act the part of an impartial interviewer.

ii) Practice talking about yourself and your achievements out loud to yourself and to others who know the purpose of the exercise. Ask a friend or colleague to help you.

17.3 Performance

i) Usually two or more people will interview you. This is called a panel interview. The interviewers will probably take it in turns to ask questions and they will probably be taking notes throughout the meeting.

ii) Arrive early for the interview. You need time to orientate yourself to the new environment and you may need time to visit the bathroom or get yourself a drink.

iii) It is a good idea to take a bottle of water with you and keep it in your bag.

iv) Dress smartly. A suit is best. If you do not have a suit then wear your smartest clothes. Make sure you feel comfortable in what you are wearing.

v) Make sure you are well presented. For example, have a hair cut if this is necessary and in the case of men arrive clean shaven. If you are a woman who wears make-up then do so in moderation. Nails should be clean and shoes polished. It is important to pay attention to the details because they will create an overall impression that needs to be as favourable as possible.

vi) When you first meet with the interview panel follow their lead and if they offer to shake hands with you then it is polite for you to do the same. It is worth noting that it is a part of the UK culture to expect a handshake at the beginning and/or end of the interview.

vii) It is also customary to make eye contact with the interview panel. Try to smile at the person who greets you. This will instantly create a friendly and positive impression.

viii) Not all interviewers are practised in the skill of conducting interviews. However, a good interviewer should be doing his/her best to put you at ease. It is recognised that people are anxious and that they need to be relaxed in order to perform well.

ix) The first couple of minutes of the interview may be spent engaging in small talk, questions about your journey or perhaps about the correct pronunciation of your name. These are known as ‘ice breakers’. If, on the morning of the interview, you did witness an unusual event such as a car accident then it would be acceptable to let the panel know this information, as it would help explain your state of mind. If you are going to be late for an interview, it would be polite to let the panel know this beforehand. Remember to take their contact details with you.

x) A good interviewer should then go on to introduce the panel members and explain the format of the interview, for example how many questions you will be asked and how long the interview will last.

xi) The opening questions are usually fairly straightforward, such as ‘tell us about your career to date’ or ‘describe a typical day’. It is important that you remain focused and answer the questions with relevant information instead of giving general information about yourself. The interviewers recognise that you may be nervous at the start of the interview and deliberately ask this type of question, which they believe you should find easy to answer, so that you can talk about yourself with confidence.

Thereafter, the questions you will be asked will be based on the job specification and job description. They will expand on areas such as the level of your skills, experience and knowledge. You may be given scenario questions, such as ‘what would you do if a patient lost control and collapsed?’

xii) When you answer the questions you need to be specific and you need to give plenty of examples. If you do not understand the question do not be afraid to ask for repetition or clarification. Take time to think about the questions; you do not have to race to answer them. You can give yourself thinking time by repeating the start of the question - for example: ‘What did you do at work today?’ ‘Today at work I…’

Keep in mind that everything you say should be relevant and needs to be making a valid point. Pay attention to the sound of your voice - don’t allow it to become too quiet or too monotonous. Engage your audience by maintaining good eye contact. Try not to use your hands for too many gestures.
Appendix 1

Professional bodies

Ambulance Service Association
Friars House
157-168 Blackfriars Road
London
SE1 8EU
Tel: 020 7928 9620
Fax: 020 7928 9502
Email:asadirect@aol.com
www.ambex.co.uk

British Association of Art Therapists
Mary Ward House
5 Tavistock Place
London
WC1H 9SN
Tel: 020 7383 3774
Fax: 020 7387 5513
Email: baat@ukgateway.net
www.baat.org

Institute of Biomedical Science
12 Coldbath Square
London
EC1R 5HL
Tel: 020 7713 0214
Fax: 020 7436 4946
Email:mail@ibms.org
www.ibms.org

Society of Chiropodists
and Podiatrists
1 Fellmongers Path
Tower Bridge Road
London
SE1 3LY
Tel: 020 7234 8620
Email: enq@scpod.org
www.feetforlife.org

Association of Clinical Scientists
c/o Association of Clinical Biochemists
3rd floor
130-132 Tooley Street
London
SE1 2TU
Tel: 020 7940 8960
Fax: 020 7403 8006
Email: admin@assclinsci.org
www.assclinsci.org

British Dietetic Association
5th Floor
148/9 Great Charles Street
Queensway
Birmingham
B3 3HT
Tel: 0121 200 8080
Fax: 0121 200 8081
Email:info@bda.uk.com
www.bda.uk.com

British Association for Dramatherapists
41 Broomhouse Lane
Hurlingham
London
SW6 3DP
Tel/Fax: 020 7731 0160
Email:gillian@badth.demon.co.uk
www.badth.ision.co.uk

Association of Professional Music Therapists
26 Hamlyn Road
Glastonbury
Somerset
BA6 8HT
Tel/Fax: 01458 834919
Email:APMtffic@aol.com
www.apmt.org.uk

College of Occupational Therapists
106-114 Borough High Street
London
SE1 1LB
Tel: 020 7450 2332 (careers line)
Fax: 020 7450 2299
www.cot.co.uk

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xiii) At the end of the interview, you may be asked if you have any questions. It is a good idea to have a few. Perhaps all the questions you wanted to ask were already covered during the course of the interview, in which case you can say this. The types of questions you ask may be to enquire when you will hear about the results of the interview or whether there will be an induction programme if you are successful in being appointed. Do not ask questions about your performance in the interview or anything unrelated. At the end, make sure that you thank the interview panel and say goodbye politely before leaving the room.

17.4 After the Interview

i) Reflect on the interview you have had. Write down an assessment of how you think you have done, such as what went well and what could have been better. Write down the questions you were asked. This will be a useful preparation for future interviews if you don’t get the job this time round.

ii) Give yourself a treat. Interviews are not easy and you need to boost your confidence with the knowledge that you performed a challenging aspect of the job selection process.

iii) If you are not offered the job do not be disappointed. The experience of doing the interview will have been very worthwhile. You could telephone the organisation and ask for feedback on your performance so that you know what you need to be aware of for next time.

17.5 Other Sources of Information

‘The Perfect Interview’ by Max Eggert. Published by Arrow Business Books
‘Successful Interview Skills: How to Present Yourself’ by Rebecca Corfield. Published by Kogan page
www.rose.nhs.uk
Appendix 2

Health Professions Council

The Health Professions Council
Park House
184 Kennington Park Road
London
SE11 4BU

International Registrations
Tel: 020 7840 9804 or 0845 300 4720
Fax: 020 7840 9803
Email: international@hpc-uk.org

Main switchboard for all other enquiries
Tel: 020 7582 0866
Fax: 020 7820 9684
Email: info@hpc-uk.org

The HPC are open Monday-Friday 8am-6pm

Appendix 3

Strategic Health Authorities / Workforce Development Confederations

Return to Practice Co-ordinators

The return to practice co-ordinators will be the first person you need to contact to find out more information about how you can return to practice in the UK. Each district may have different arrangements. You will need to be patient, and please be aware that it may be necessary to make further enquiries. In some cases, you will be given contact details for local trusts.

The contact numbers here are either the direct numbers of the Return to Practice Co-ordinators or the central switchboard numbers for the SHA/WDCs. If the numbers change you will need to call directory enquiries for the new contact details or obtain them from the internet.

Avon, Gloucestershire and Wiltshire
Tel: 01249 858500

Bedfordshire and Hertfordshire
Tel: 01234 313810

Cheshire and Merseyside
Cheshire Office
Tel: 01925 406100
Merseyside Office
Tel: 0151 285 2234

County Durham and Tees Valley
Tel: 01642 352950/1

Devon and Cornwall
Tel: 01392 253971

Dorset and Cornwall
Tel: 01935 384000

Greater Manchester
Tel: 0161 237 3690

Association of Operating Department Practitioners
PO Box 1304
Wilmslow
Cheshire
SK9 5WW
Tel: 0870 746 0984
Fax: 0870 746 0985
Email: office@aodp.org
www.aodp.org

British Orthoptic Society
Tavistock House North
Tavistock Square
London
WC1H 9HX
Tel: 020 7387 7992
Fax: 020 7387 2584
Email: bos@orthoptics.org.uk
www.orthoptics.org.uk

Chartered Society of Physiotherapy
14 Bedford Row
London
WC1R 4ED
Tel: 020 7306 6666
Fax: 020 7306 6611
Email: careersadviser@cpsphysio.org.uk
www.csp.org.uk

British Association of Prosthetists and Orthotists
Sir James Clark Building
Abbey Mill Business Centre
Paisley
PA1 1TJ
Tel: 0141 561 7217
Fax: 0141 561 7218
Email: admin@bapo.com
www.bapo.com

British Psychological Society
St Andrew’s House
4B Princess Road East
Leicester
LE1 7DR
Tel: 0116 254 9568
Fax: 0116 247 0787
Email: enquiry@bps.org.uk
www.bps.org.uk
Email: mail@bcp.org.uk
www.bcp.org.uk

society of Radiographers
207 Providence Square
Mill Street
London
SE1 2EW
Tel: 020 7740 7200
Fax: 020 7740 7204
www.sor.org

Royal College of Speech and Language Therapists
2 White Hart Yard
London
SE1 1NX
Tel: 020 7378 1200
Fax: 020 7403 7254
Email: postmaster@rcslt.org
www.rcslt.org

Association of Operating Department Practitioners
PO Box 1304
Wilmslow
Cheshire
SK9 5WW
Tel: 0870 746 0984
Fax: 0870 746 0985
Email: office@aodp.org
www.aodp.org

British Orthoptic Society
Tavistock House North
Tavistock Square
London
WC1H 9HX
Tel: 020 7387 7992
Fax: 020 7387 2584
Email: bos@orthoptics.org.uk
www.orthoptics.org.uk

Chartered Society of Physiotherapy
14 Bedford Row
London
WC1R 4ED
Tel: 020 7306 6666
Fax: 020 7306 6611
Email: careersadviser@cpsphysio.org.uk
www.csp.org.uk

British Association of Prosthetists and Orthotists
Sir James Clark Building
Abbey Mill Business Centre
Paisley
PA1 1TJ
Tel: 0141 561 7217
Fax: 0141 561 7218
Email: admin@bapo.com
www.bapo.com

British Psychological Society
St Andrew’s House
4B Princess Road East
Leicester
LE1 7DR
Tel: 0116 254 9568
Fax: 0116 247 0787
Email: enquiry@bps.org.uk
www.bps.org.uk
Email: mail@bcp.org.uk
www.bcp.org.uk
Hampshire and Isle of Wight
Tel: 01962 893737

Leicestershire, Northants and Rutland
Tel: 0116 295 7500

London North Central
Tel: 020 8272 5550

London North East
Tel: 020 7655 6714

London North West
Tel: 020 7756 2777

London South East
Tel: 020 7593 0100

London South West
Tel: 020 8545 7132

Norfolk, Suffolk and Cambridgeshire
Tel: 01223 597576

North and East Yorkshire and North Lincolnshire
Tel: 01904 724574

North England
Tel: 0191 2106400

Nottingham
Tel: 0115 9123344

South Derbyshire
Tel: 0133 2786645

Shropshire and Staffordshire
Tel: 01785 220028 ext: 5823

South Yorkshire
Tel: 0114 2263352

Thames Valley
Tel: 01865 336926

West Yorkshire
Tel: 0113 295 2151

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2. www.nhscareers.nhs.uk
Tel: 0845 6060655
This publication is a tailored guide for overseas trained Allied Health Professionals and Healthcare Scientists who wish to find employment in the National Health Service. It is intended for the refugee community however much of the information is relevant for a non-refugee, overseas audience as well.

It is written in a clear style and uses case studies to personalise the experiences of new employees to the NHS. Much of the information can be further researched by visiting the websites referred to throughout the guide.

Some of the topics covered are:
- the Health Professions Council registration procedures
- a career framework for the NHS
- alternative careers for Allied Health Professionals and Healthcare Scientists
- practical guidance on job applications, CV writing and interviews

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