Consultation

The purpose of this consultation is to seek views on how best to co-ordinate and integrate training and guidance services for refugee healthcare professionals in London.

NHS Employers, on behalf of the Building Bridges project, is seeking views and comments from stakeholders on how best these services can be delivered in London, through a series of key questions outlined on page 12.

Responses should be submitted by 3 December 2007 to Diana.cliff@nhsconfed.org or lars.isaksen@nhsemployers.org or posted to:

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A summary of the responses received will be published on the NHS Employers website at www.nhsemployers.org/buildingbridges

For further information please contact Diana Cliff using the contact details above.

Acknowledgements

This document has been prepared with support and contributions from members of the Building Bridges steering group
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Executive Summary

This consultation puts forward a proposal for the co-ordination and integration of training and guidance services for refugee health professionals in London.

The Building Bridges partnership was developed as a response to growing concerns about the sustainability and quality of training and guidance available for refugee healthcare professionals in the UK. The partnership works with financial sponsors, employers, regulators, professional bodies and training providers.

We have a moral and social obligation to provide initial support and equality of opportunity to refugees, with employment playing a major role in improving health and social cohesion. Although the NHS is currently experiencing an oversupply of medical graduates and newly qualified healthcare professionals in some disciplines, this could change in future years. Refugee healthcare professionals in the NHS can provide a valuable resource, representing cost efficiency in training and increasing workforce diversity.

Central to this proposal is the need to give employers confidence in the competence and capability of refugee healthcare professionals to deliver high quality patient care. As with all other healthcare workers, refugee healthcare professionals must be able to demonstrate clinical competence and have excellent communication skills. This proposal aims to ensure that the right services are available to provide this.

This proposal seeks to ensure that services for refugee health professionals in London are co-ordinated and integrated.

The Building Bridges project proposes the formation of a London refugee healthcare professionals’ development centre and this consultation specifically seeks views on how this can best be delivered. Three models have been put forward: a single NHS-based solution; a lead organisation with multiple delivery agents; or an umbrella group of organisations.

Background

The purpose of this consultation is to seek views from a wide range of London stakeholders on how best to co-ordinate and integrate training and guidance services for refugee healthcare professionals in London.

Since 2006 the Mayor of London has been responsible for strategic leadership of refugee integration work in London. To assist this work the Board for Refugee Integration in London (BRIL) has been advising the London Mayor on the development of a draft strategy for refugee integration in London: ‘London Enriched’.

This strategy supports the development of ‘a world-class integrated centre in London for refugee healthcare professionals, across major specialisms, which would support them in:

1. adapting and developing their skills for UK application
2. brokering employment opportunities to make full use of those skills.’

This vision of an ‘integrated centre’ forms the basis of the proposal for forming a London refugee healthcare professionals’ development hub which would co-ordinate activities across the capital.

Building Bridges was developed as a response to growing concerns about the sustainability and quality of training and guidance services for refugee healthcare professionals in the UK. Initially led by the British Medical Association and Royal College of Physicians, the Building Bridges steering group was formed in 2005 from a number of key stakeholders.

Building Bridges is currently hosted by NHS Employers with funding from the Home Office, Employability Forum and the Partnership for refugee employment through support, training and online learning (PRESTO).
Integration and co-ordination of training and guidance services in London

This proposal aims to co-ordinate and integrate London services for refugee healthcare professionals by:

- ensuring consistent training and guidance through their pathways back to employment
- ensuring sustained employer engagement
- maintaining multiple points of access for refugee health professionals across London using standardised processes
- avoiding duplication and avoid gaps in the provision of training and guidance services
- providing an evidence base at each stage of
- securing sustainable funding of core infrastructure
- enabling partners to play to their strengths and develop specialist expertise

Three key features of the proposed service will help to achieve this:

- a single and well specified pathway against which services are commissioned, which will reduce duplication, enable organisations to specialise, prevent sudden or undetected gaps in provision and provide an evidence base of effective practices.
- a single reliable source of information about refugee healthcare professionals to enable training capacity and placement planning. Further information on the proposed database to support this is available on the NHS Employers website (www.nhsemployers.org/buildingbridges).
- a single coordinating ‘body’ working closely with employers to ensure that guidance and training services reflect their needs.

The refugee healthcare professionals’ development hub

The formation of a London refugee healthcare professionals’ development hub to deliver these objectives is integral to this Building Bridges proposal.

We are seeking views from stakeholders across London on which organisational model is most suitable to deliver these key functions and secure the best possible outcomes for employers and refugee health professionals in the city. The three options are.

- A single NHS based solution
  This option is based on the example of Reache North West. The Reache centre is based at the Salford Royal NHS Foundation Trust. The centre provides a comprehensive package of training and support from initial assessments through to clinical placements for all healthcare professions. For details see their website: http://reache.wordpress.com.

- A lead organisation with multiple delivery agents
  A single organisation would lead the development hub delivering key services in-house. The lead organisation would also mange service level agreements with other training and guidance service providers.

- An umbrella group of organisations
  A group of organisations would be responsible for identifying need and delivering services through a partnership arrangement. Individual organisations would work collaboratively within a defined protocol that sets out commissioning arrangements and the roles and responsibilities of individual partners and advisory groups.
The case for change in London

London is estimated to be the home of more than half the refugees that settle in the UK. It is therefore important to have well integrated services in the city to assist refugee healthcare professionals to establish a clinical career in the UK.

The Royal College of Nursing estimates that there are 231 refugee nurses, only 18 per cent of whom are working in nursing. The Refugee Doctor Programme Evaluation Network and the BMA/Refugee Council estimate that of the known 1151 refugees doctors resident in London, a maximum of 188 are working in the NHS as doctors.

Over the past few years funding from the NHS, Department of Health and European Social Fund for projects supporting refugee healthcare professional back to employment has been reduced while the NHS recruitment market has changed, meaning employment opportunities are more limited and competition for jobs more intense. Through the co-ordination of existing refugee services Building Bridges aims to level the playing field for refugee healthcare professionals by equipping them with the necessary skills and competences to secure employment in this competitive recruitment markets.

Dr. Maeve Keaney, Director of the Reache Centre, has outlined some of the benefits of employing refugee healthcare professionals, including:

- Most refugee healthcare professionals remain in the UK for the rest of their working lives. This high retention rate represents a good return on investment.
- Unemployment amongst refugees is estimated by the Greater London Assembly to be well above 30 per cent. By employing refugee healthcare professionals in the NHS we provide an increasingly diverse workforce, and increase the economic potential and health of individuals and their families.
- The training required to enable refugee to return to practice takes a shorter time and costs less than training a new healthcare worker from scratch. The Employability Forum estimates it costs £2,000 to provide training to enable a refugee nurse to apply for registration, compared with £36,000 over 3 years to train a nurse from scratch. The Migrant and Refugee Communities Forum estimates it costs around £137,000 to train a dentist in the UK compared with an average £15,000 to assist refugee dentists into the NHS. For doctors the difference could be as great as between £25,000 for supporting refugees to get back to practice, compared with the DH estimate of around £250,000 - £300,000 to provide a UK medical student with training up to the end of the Foundation Programme.

Meeting the needs of employers

Central to this proposal for London is the need to give employers confidence in the ability of refugee healthcare professionals to deliver high quality patient care.

The Building Bridges partnership aims to deliver the highest standards of training and assessment services along the whole range of services used by refugee healthcare professionals. In doing so it needs to work closely with employers to match their changing demands. Employers expect refugee healthcare professionals to demonstrate clinical competence, capability, communication skills and cultural awareness and to meet all the professional and employment regulations required to work in the NHS.

Refugee healthcare professionals will need to compete in open competition for NHS jobs. And the provision of training opportunities will not guarantee employment.

The active involvement of employers at every stage of the refugee healthcare professional’s pathway back to practice is fundamental to achieving this.
Pathways to employment and practice

Despite the reduction in the number of refugee service providers across London, there is still evidence of service duplication and varying standards across different programmes. Having a single and well specified pathway against which services are organised will enable a reduction in the duplication of services and allow organisations to specialise as appropriate. The Building Bridges proposed pathway for refugee healthcare professionals involves 8 stages from initial identification through to language training and pre-employment support such as CV writing and interview skills. Appropriate signposting and careers advice from specialist careers advisory services is crucial to each of these stages.

Case studies illustrating the role that service providers play in providing information, advice and guidance through to training programmes can be found on the NHS Employers website.

Figure 1  Pathways of progression for refugee health professionals

1. Identification by service providers
   Mapped preferred service providers providing IAG – multiple entry points

2. Standard assessment tool embedded within the protocol

3. Language and communication skills

4. Re-qualification and professional registration

5. Pre-employment support and advice

6. Employment support, advice and tracking

7. Orientation and careers advice

8. Alternative careers training
The pathway to employment for refugee doctors

<table>
<thead>
<tr>
<th>Pathway stage</th>
<th>Refugee Doctors</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Identification by service providers</td>
<td>Multiple entry points are needed for refugee doctors to be identified and to access information, advice and guidance. These entry points include the BMA, Sunrise Programmes, local community organisations and charitable trusts. The ROSE website (<a href="http://www.rose.nhs.uk">www.rose.nhs.uk</a>) provides information on relevant services.</td>
</tr>
<tr>
<td>2. Standard assessment tool</td>
<td>Building Bridges is proposing a standard assessment tool is developed to ensure that each individual doctor, no matter which point they enter the pathway, receives the same quality of assessment and referral, ensuring that no needs are missed and information is consistently collected.</td>
</tr>
<tr>
<td>3. Language and communication Skills</td>
<td>Key language courses would include English for Speakers of Other Languages (ESOL) and International English Language Testing System (IELTS) in addition to courses on medical English as run by Southwark and Barnet Colleges. Language and communication skills would also form part of each subsequent stage of the pathway to ensure that doctors maintain and improve their communication.</td>
</tr>
<tr>
<td>4. Re-qualification and professional registration</td>
<td>Structured Professional and Linguistic Assessment Board (PLAB) courses and study clubs enable refugee doctors to register with the General Medical Council (GMC). For example, courses provided by Queen Mary’s Medical School at Barts and the London NHS Trust.</td>
</tr>
<tr>
<td>5. Pre-employment support and advice</td>
<td>Pre-employment support and advice needs to include clinical experience and attachment schemes. These schemes should involve educational input enabling participants to understand and develop appropriate competences. Standard recruitment and selection criteria and an agreed timetable and curriculum are required.</td>
</tr>
<tr>
<td>6. Employment support, advice and training</td>
<td>The employment support, advice and training stage of the pathway should incorporate job search, CV and interview skills.</td>
</tr>
<tr>
<td>7. Orientation and careers advice</td>
<td>Ongoing orientation and careers advice should continue along the pathway to, and possibly beyond, employment. Services included in this pathway should include careers advice, delivered by specialist advisers including alternative careers advice, and draw on linkages with Job Centre Plus and mentoring schemes such as Time Bank.</td>
</tr>
<tr>
<td>8. Alternative careers training</td>
<td>Alternative careers training needs to include an assessment of experience and Accreditation of Prior Experiential Learning (AP(E)L) conducted by specialist advisers, and the use of work placement programmes such as those developed by the Refugee assessment and guidance unit at London Metropolitan University.</td>
</tr>
</tbody>
</table>

Statistics and service providers

There are 387 refugee healthcare professionals in London who are actively pursuing their professional examinations to return to practice in addition to 215 that have obtained professional registration, undertaken work experience and are considered to be ‘job ready’, but have yet to secure employment.

Table 1 indicates the number of refugee healthcare professionals who have sought assistance from refugee service providers.
Table 1  Estimated number of refugee healthcare professionals in London

<table>
<thead>
<tr>
<th>Pathway Stage</th>
<th>Doctors</th>
<th>Nurses</th>
<th>Dentists</th>
<th>AHPs/OHPs</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not passed IELTS and not undertaking IELTS/ESOL training</td>
<td>107</td>
<td>NA</td>
<td>NA</td>
<td>NA</td>
<td>107</td>
</tr>
<tr>
<td>Undertaking IELTS/ESOL training</td>
<td>161</td>
<td>18</td>
<td>NA</td>
<td>6</td>
<td>185</td>
</tr>
<tr>
<td>Passed IELTS and undertaking professional examinations / alternative training</td>
<td>176</td>
<td>NA</td>
<td>26</td>
<td>NA</td>
<td>202</td>
</tr>
<tr>
<td>Obtained professional registration and undertaken work experience – considered to be ‘job ready’</td>
<td>197</td>
<td>NA</td>
<td>18</td>
<td>NA</td>
<td>215</td>
</tr>
<tr>
<td>In NHS employment</td>
<td>189</td>
<td>21</td>
<td>13</td>
<td>NA</td>
<td>223</td>
</tr>
<tr>
<td>Undertaking alternative careers, training or other relevant work experience / training</td>
<td>NA</td>
<td>41</td>
<td>11</td>
<td>9</td>
<td>61</td>
</tr>
<tr>
<td>Total Number</td>
<td>830</td>
<td>80</td>
<td>68</td>
<td>15</td>
<td>993</td>
</tr>
</tbody>
</table>

Table 2 shows the organisations currently providing services for refugee healthcare professionals across the NHS London region for each stage of the return to practice pathway.

Table 2  Current provision of training and guidance in London

<table>
<thead>
<tr>
<th>Pathway Stages</th>
<th>Doctors</th>
<th>Nurses</th>
<th>Dentists</th>
<th>AHPs/OHPs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identification</td>
<td>BMA, RAGU, PRAXIS, RIJ, MRCF, RWA</td>
<td>RCN, RAGU, PRAXIS, RIJ, RWA</td>
<td>BDA, MRCF, RAGU, PRAXIS, RIJ</td>
<td>RAGU, PRAXIS, RIJ</td>
</tr>
<tr>
<td>Assessment</td>
<td>RAGU, PRAXIS, RIJ, MRCF, RWA</td>
<td>RAGU, PRAXIS, RWA</td>
<td>RAGU, PRAXIS, MRCF</td>
<td>RAGU, PRAXIS</td>
</tr>
<tr>
<td>Language and Communication</td>
<td>Barnet, Southwark and, Westminster colleges, RWA, PRAXIS</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Re-qualification and/or professional registration</td>
<td>QMUL, NCLC, MRCF, RAGU, RWA</td>
<td>PRAXIS, RAGU, RWA</td>
<td>MRCF, RAGU</td>
<td>RAGU</td>
</tr>
<tr>
<td>Pre-employment</td>
<td>London Deanery, RIJ, RWA, Praxis, MRCF, RAGU, QMUL</td>
<td>PRAXIS, RWA, RAGU</td>
<td>MRCF, RAGU</td>
<td>PRAXIS, RAGU</td>
</tr>
<tr>
<td>Employment</td>
<td>London Deanery</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Orientation and Careers Advice</td>
<td>RAGU, PRAXIS, RIJ, QMUL, RWA</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alternative Careers Advice and Training</td>
<td>RAGU, PRAXIS, RIJ</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Strategic Policy Lead</td>
<td>BRIL, LORECA, PRESTO, NHSE</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Key:
Governance arrangements

Building Bridges recommends that the co-ordination of service providers in London should be led by a commissioning group. The proposed terms of reference of the group are:

- commissioning the London refugee healthcare professionals’ development hub
- ensure that refugee healthcare professionals’ training and guidance services meet current educational and regulatory standards and the needs of employers
- ensure that long-term recurrent funding is secured and that best value for money is delivered across all commissioned services
- promote the benefits of refugee employment to healthcare providers in London
- reduce cultural, organisational, regulatory or legal barriers to refugee healthcare professionals’ development and employment in London
- lead evaluation and improvement work to ensure effective use of resources committed towards refugee healthcare professionals in London
- ensure that London has a comprehensive and reliable database for collection of key statistics such as numbers of refugee healthcare professionals, geographic distribution, stage in pathway to employment etc.
- maintain effective links with networks supporting refugee healthcare workers in other parts of the UK including representation at the national board.

Building Bridges recommends membership should include key stakeholders such as employing organisations, regulatory bodies, educationalists, the London deanery, professional bodies and membership agencies and representation from the Board for Refugee Integration in London (BRIL). Others may, at the discretion of the Chairman, be co-opted to the group or invited to attend meetings as and when required. In addition, the chairs of the service providers group and the refugee health professionals’ advisory group would also sit on this group.
Figure 2  Building Bridges governance framework for London

NATIONAL LEVEL

National Context:
Home Office: Model for integration of services in England

UK Board (England, Scotland, Wales)

REGIONAL CONTEXT

Board for refugee integration strategy for London

LONDON LEVEL

Commissioning Group
Membership to include representation from: employers, NHS London / London deanery, LORECA, BRiL, JCP, Home Office, regulatory bodies, DH, Professional bodies.

Training and guidance provider group
Membership to include all current service providers

RHP advisory group
Membership to include nominated refugee healthcare professionals

London refugee healthcare professionals’ development hub
Consultation questions

NHS Employers, on behalf of the Building Bridges partnership, is seeking the views of key stakeholders across London on these proposals, in particular answers to the following questions:

• What are your views on the strengths and weaknesses of the proposal for the co-ordination and integration of training and guidance services for refugee healthcare professionals in London and, specifically, the proposed development hub?

• Are there any alternative ways in which refugee healthcare professionals can be supported back to employment?

• What are the strengths, weaknesses, risks and opportunities for each of the models put forward for the London refugee healthcare professionals’ development hub?

• How can the London development hub best ensure that it meets the needs of employers?

• How would open and transparent leadership be ensured?

We also welcome any feedback, comments or questions that you feel are not covered by the points above.

Please submit your response by 3 December 2007 by e-mail to Diana.cliff@nhsconfed.org or lars.isaksen@nhsemployers.org or by post to:

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Further information

For further information on the Building Bridges initiative, case studies, information on the partners and further reading, see the NHS Employers website at www.nhsemployers.org/buildingbridges
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• pay and negotiations  
• recruitment and planning the workforce  
• healthy and productive workplaces  
• employment policy and practice.

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Published October 2007
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