During boxing training sessions head protection is regularly worn and is now a feature of the Olympic Games. In countries where headgear is compulsory there has been a reduction in the number of facial cuts and knockouts. Controlling the type of sparring and limiting the number of fights in a boxer's career has been suggested to reduce the risk of cumulative damage. In one survey the risk increased after 40 fights. In addition, the use of padded or sprung flooring protects against serious injury in combat sports.

Prevention of secondary brain damage depends on recognising the risks of certain types of injury and ensuring that medical aid is sought. Some sporting events are attended by a doctor but in many the referee or trainer must learn what to do. Education in this topic is currently being addressed by the National Coaching Foundation and supported by many of the governing bodies of sport.

The photograph of the riding accident was taken by John Lloyd Parry, that of the boxing match is from George Outram Newspapers, and that of the injured rugby player is reproduced with permission of Colorsport.

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The ABC of Sports Medicine has been edited by Greg McLatchie. This paper has been edited in conjunction with J B King, director of the academic department of sports medicine at the London Hospital Medical College.

Postgraduate training for overseas doctors in Britain

Stella Lowry, Heather Cope

Foreign doctors, other than those from the European Economic Area, who want to train in Britain have to satisfy registration and immigration requirements before they can take up a post. The General Medical Council administers the registration regulations. These are quite separate from the immigration formalities, which are handled by the Home Office. The rules on both are complicated, and doctors should seek advice early to ensure that unnecessary difficulties do not add to the inevitable stresses associated with moving to a new country and working in a strange system.

Foreign doctors wanting to train in Britain have three problems to overcome before they can begin. They must obtain appropriate registration with the General Medical Council; they must satisfy the immigration requirements; and they must find a suitable job. The problems of finding a suitable job are discussed on page 1627 in this issue.¹ Registration and immigration are discussed here.

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BMJ 1994;308:1624-7

Role of the General Medical Council

The General Medical Council (GMC) has been set up by the British government to maintain the registers of medical practitioners and to regulate the medical profession. The system of registration is governed by act of parliament.

Every doctor will need to hold some form of registration with the council before beginning any work or training that involves clinical contact with patients. For medical work that does not involve direct patient contact it would be the prospective employer

who would advise whether registration is needed or not.

It is unwise to assume that you will be eligible for registration without checking with the council. Potential trainees should get in touch with the council well in advance for advice about registration—six months or more is sensible. Organisations in Britain that sponsor candidates for training may deal with the council on behalf of the candidates, but it is best for candidates to confirm this with their British sponsor.

The council will want to know the name of the medical school you studied in, the university which awarded you the degree, and the relevant dates. It will want to know what experience you have obtained since qualifying. This information should be sent to the council by post. You should also mention the name of your British sponsor, if you have one. In case you have had previous correspondence with the council you should quote your reference number. If you are not sure how to describe your qualifications and experience, write to the council to ask for an information sheet.

Once the council has these basic details, it will advise you of your status in relation to registration. A few qualifications awarded overseas are considered to be on par with British qualifications and are recognised for full registration. These include qualifications from Australia, Hong Kong, New Zealand, Singapore, South Africa, and the West Indies. Many more, such as those from India and the United States, are acceptable for limited registration. Doctors holding such qualifications need to pass a test which assesses their professional and linguistic abilities, or to be exempted from it, before being considered for limited registration. Some primary medical qualifications awarded

overseas are not accepted for any form of registration and the council is happy to advise on the status of any particular qualifications. In addition, qualifications awarded in non-Western forms of medicine are not accepted for registration. Note that a doctor who is a British citizen but who qualifies, for example, in India is by law an "overseas qualified doctor" for the purpose of registration in Britain.

The PLAB test

The test run by the Professional and Linguistic Assessments Board (PLAB) is a test of medical knowledge and use of English (box). In addition to holding the necessary qualification, the doctor must have at least 12 months' clinical experience in teaching hospitals or hospitals approved for internship training before applying to take the PLAB test. Thus those doctors who have qualified but have not completed their internship will not be considered eligible by the council to take the PLAB test. Doctors who are sponsored under the Overseas Doctors' Training Scheme are eligible for exemption from the test.

Doctors who have failed the test are not normally considered as suitable candidates for exemption from it. If there is a possibility that you will be sponsored, you may prefer not to take the test until your plans are clear.

Evidence of qualifications and experience

The council will need to see original documentary evidence of your primary medical qualifications with your application to take the PLAB test or, if you are given exemption, with your application for registration. The requirements are set out in the notes which accompany the application forms. In broad terms, you should be prepared to bring with you to Britain the originals—not photocopies or copies attested as true copies—of the diploma confirming the award of your primary medical qualification. If you qualified in India, Pakistan, Bangladesh, or Sri Lanka, where one university may have a number of medical colleges affiliated to it, you will also need a certificate from your medical college that sets out the dates between which you studied there and the date on which you passed the final examinations. The council's notes go into more detail about these items and about the additional documents needed in certain circumstances—for example, if the name in which you qualified is not the same as the name in which you are applying to take the test or for registration.

The council does not routinely request certificates of doctors' experience overseas but may do so if it

Fees for taking the PLAB test and for registration

For first attempt at the PLAB test	£425
To resit the PLAB test	£325
For first grant of limited registration, after passing the PLAB test	£300
For first grant of limited registration with exemption from the PLAB test	£400
To renew limited registration for one year after the initial 12 months	£70

Note: These fees are changed by the GMC from time to time. You must get in touch with the GMC for up to date information

requires clarification of details. In that case, any certificates provided must be originals, not copies.

Limited registration

If you pass the PLAB test, information about limited registration is sent to you. A doctor must have been selected for employment in a suitable post before applying for limited registration.

Once limited registration has been granted, you will receive a certificate which specifies the scope of your employment and the dates on which registration starts and finishes. The council will also send you information about your responsibilities as a medical practitioner registered in Britain.

The total length of the period or periods of limited registration granted to any one doctor may not exceed five years. The council normally grants limited registration only to cover employment in approved hospital training posts.

Sponsorship

Sponsorship means that a British organisation like a royal college has agreed to undertake the responsibility for the training of the overseas doctor throughout the term of the doctor's training. The doctor must possess a qualification which is acceptable for limited registration. Limited registration can then be granted to such a doctor without him or her having to pass the PLAB test.

For sponsorship through one of the royal colleges' Overseas Doctors' Training Schemes you will need to have been recommended to the royal college by an overseas sponsoring organisation with which the college has an established link. You will also need to meet any other conditions that the college has specified for sponsorship.

The council also accepts sponsorship by the British Council, the Commonwealth Scholarship Commission, or the organisers of certain other training schemes that the council has considered and approved for this purpose. Until recently the council accepted sponsorship by individual consultants. It no longer does so. A consultant in Britain who wishes to sponsor an overseas doctor for training here is now advised to get in touch with the appropriate royal college and to organise the sponsorship through the college. Each college has its own set of requirements which help it to decide whether or not to act as the candidate's sponsor.

Sponsored doctors should have completed overseas—after the internship experience described above—at least two further years' clinical experience. This should include at least one year in the specialty in which the doctor is to train in Britain. Experience overseas in general medicine is accepted as a basis for training in most medical specialties—cardiology or neurology, for example. Similarly, general surgery is accepted for

The PLAB test

The test includes:

- A written English examination
- An examination in the comprehension of spoken English
- A multiple choice question examination of medical knowledge
- A clinical problem solving examination
- An examination of candidates' ability to recognise clinical signs using photographic material
- An oral examination conducted by two medical examiners with language advisers present

Tests are held 13 or 14 times each year at centres in London, Edinburgh, and Glasgow

The first five examinations listed above are held on the first day; oral examinations are held on the second or third days

Useful addresses

For advice about registration and the PLAB test:

General Medical Council,
Overseas Registration Division,
44 Hallam Street,
London W1N 6AE

For general advice about postgraduate training and working in Britain:

National Advice Centre for
Postgraduate Medical Education,
Central Information Service,
British Council,
Medlock Street,
Manchester M15 4AA

Royal College of Physicians of
London,
11 St Andrews Place,
London NW1 4LE

Royal College of Surgeons of
England,
35-43 Lincoln's Inn Fields,
London WC2A 3PN

Royal College of Surgeons of
Edinburgh,
Nicholson Street,
Edinburgh EH8 9DW

Royal College of Physicians of
Edinburgh,
9 Queen Street,
Edinburgh EH2 1JQ

Royal College of Physicians and
Surgeons of Glasgow,
234-242 St Vincent Street,
Glasgow G2 5RJ

Royal College of Anaesthetists,
48-49 Russell Square,
London WC1B 4JY

Royal College of Obstetricians and
Gynaecologists,
27 Sussex Place,
London NW1 4RG

Royal College of Ophthalmologists,
Bramber Court,
2 Bramber Road,
London W14 9PQ

Royal College of Pathologists,
2 Carlton House Terrace,
London SW1Y 5AF

Royal College of Psychiatrists,
17 Belgrave Square,
London SW1X 8PG

Royal College of Radiologists,
38 Portland Place,
London W1N 3DG

Faculty of Public Health Medicine
of the Royal College of Physicians
of the United Kingdom,
4 St Andrews Place,
London NW1 4LB

Commonwealth Scholarship
Commission,
Association of Commonwealth
Universities,
John Foster House,
36 Gordon Square,
London WC1H 0PF

Immigration and Nationality
Department,
Home Office,
Lunar House,
40 Wellesley Road,
Croydon CR9 2BY

International Department,
British Medical Association,
Tavistock Square,
London WC1H 9JP
(BMA members should approach
their local office in the first
instance)

training in surgical specialties such as chest surgery or urology. But a doctor wishing to train in anaesthetics, orthopaedics, paediatrics, psychiatry, obstetrics and gynaecology, or pathology must have spent a year overseas in that specialty.

Advice for senior doctors from overseas

Much of the advice in the preceding paragraphs is addressed to young doctors from overseas—in other words, doctors who are still in the process of completing their postgraduate specialist training. Other routes to registration may be available for doctors who have reached consultant level overseas, depending on their intentions regarding practice in the United Kingdom. It is not possible to offer general advice that is reliable in each doctor's case, but the GMC is happy to advise such doctors on an individual basis.

What the GMC cannot do

As already indicated, the GMC cannot organise sponsorship. Nor can it arrange employment or organise accommodation for new arrivals. On occasion doctors ask the GMC to act for them in their dealings with the Department of Immigration, but it has no power to do so.

Immigration law and doctors in training

Foreign doctors wanting to train in Britain can be divided into two main groups for the purposes of immigration status. Those from the European Economic Area—the 12 countries of the European Union plus Austria, Finland, Iceland, Norway, and Sweden—have the right to move freely within the area. They do not have to comply with any immigration formalities, although they are advised to apply to the Home Office for a residence permit within six months

of their arrival. This helps to confirm their status within the country.

Doctors from countries outside the area have to comply with immigration formalities. They are advised to contact the British embassy, high commission, or consulate before leaving their own country. Queries arising after they arrive in Britain should be made to the immigration and nationality department of the Home Office (address in box).

Undergraduate students from overseas

Before discussing how immigration law affects doctors in postgraduate training it is worth mentioning a few points of relevance to undergraduate students, many of whom will decide to remain for further training after qualification. Students from countries outside the European Economic Area must satisfy the immigration authorities that they are registered on a full time course (at least 15 hours of daytime study a week in a recognised educational establishment), that they can meet all of their living and education expenses, and that they intend to leave the country at the end of the course. Medical students should remember that their preregistration year counts as part of their studentship, and they are entitled to complete it in this country. They should, however, contact the Home Office as they will need a different stamp in their passports. In practice, the rule on intention to leave is not enforced very strictly, and many overseas nationals graduate from British medical schools and stay on for postgraduate training.

Postgraduate training

The "Immigration Rules" for doctors from countries outside the European Economic Area wanting to train in Britain are summarised in the health circular HC(FP)(85)14.² This document is currently

under review and new guidelines on the application of the immigration rules within the NHS are expected within the next few months, but it is likely that these will represent a tightening up of the existing arrangements rather than the introduction of anything very different.

Overseas doctors may work in training grade posts in British hospitals for up to four years in total. They must intend to leave the country at the end of this time. Doctors in the vocational training year of a general practitioner training scheme should hold a work permit issued under the training and work experience scheme, details of which are given in the health circular.² Until recently, doctors who had completed their four years of "permit free" stay were usually able to extend their stay, often by obtaining a work permit to allow them to continue in training posts. Since September 1993 interim arrangements have operated,³ pending the publication of an updated health circular, and it is now no longer possible to obtain a work permit for a hospital training grade post. (Overseas doctors in NHS career grade posts require work permits, and principals in general practice or doctors providing private medical services must obtain prior entry clearance to gain self employment status. The regulations governing these are also contained in the health circular.² These sections are not known to be under review.)

Tightening up the rules

It is likely that the new health circular will lead to strict enforcement of the four year maximum aggregate period that may be spent in permit free training. There may, however, be opportunities for doctors to extend their training in exceptional circumstances. Under the current interim arrangements doctors may apply to the Home Office for an extension of their permit free status if they can show an exceptional educational need. The application must have the support of the relevant postgraduate dean, who is asked to state that the doctor has a specific educational goal, has made reasonable progress during training so far, and is likely to achieve the stated goal within the additional time requested. Applications that are not so supported are not likely to

be considered. Any service needs of the unit in which the doctor wishes to work are not taken into account when the application is assessed.

Implications of the new regulations

The recent tightening up of the four year maximum for postgraduate training means that overseas doctors must think carefully about what they want to achieve during their limited time in Britain. Those who arrive with only vague ideas about what they want to do, spend some time in unrelated senior house office posts while they adjust to their new home, and then need several attempts at their college examinations will find that they have almost run out of time just when they want to settle down to some higher training in their chosen specialty. In future, overseas doctors may be better advised to postpone their trip to Britain until they are eligible to take up registrar posts or to come only if they are on an approved training scheme organised by one of the royal colleges and designed to give them useful training within the four year entitlement. The pros and cons of such schemes are discussed further in an accompanying article (p 1627).¹

Indefinite leave to remain (settled status)

Some foreign doctors and medical students may be entitled to settled status in the United Kingdom—for example, those who are married to a British citizen or who have at least one grandparent born here. Doctors who have worked in Britain with a work permit or under self employment status for at least four years may be entitled to apply for settled status. Time spent on a permit free basis does not usually count toward settled status, but doctors or students may apply for settled status under the long residence concession if they have lived in Britain in any capacity for at least 10 years.

1 Richards T. The Overseas Doctors Training Scheme: failing expectations. *BMJ* 1994;308:1627-31.

2 Department of Health and Social Security. *Employment of overseas doctors and dentists in the United Kingdom*. London: DHSS, 1985. (HC(FP)(85)14.)

3 NHS Management Executive. *Consultation on proposals concerning the control of the immigration status of overseas doctors and dentists undertaking postgraduate training in the UK*. Leeds: NHSME, 1993.

The Overseas Doctors Training Scheme: failing expectations

Tessa Richards

The Overseas Doctors Training Scheme needs appraisal. Set up 10 years ago to improve the quality of postgraduate training that overseas (non-European) doctors receive in Britain, the scheme has been popular, but it is questionable how far it has achieved its aims. If Britain is to continue to employ large numbers of overseas doctors in training grades, both through the scheme and through independent arrangements, the apparent mismatch between their expectations and the reality of what Britain offers must be tackled.

The Overseas Doctors Training Scheme has acquired a bad name. Criticised by the Overseas Doctors Association, and in a "personal view" in the *BMJ* by one of the very people it was set up to help, it has been accused of being "one of those well intentioned training programmes which has failed to live up to expectation."^{1,2}

Although the scheme works well for some overseas doctors, others are dissatisfied with the postgraduate training they receive in Britain. This dissatisfaction is

by no means confined to those on the Overseas Doctors Training Scheme. Only about 40% of overseas doctors come to Britain under its aegis, and the remainder probably experience more problems. Most of the dissatisfaction stems from not being able to find a job in the desired specialty at the "appropriate" level. Dissatisfaction also stems from alleged racial discrimination. In the past year another problem has surfaced. Legislation has been proposed to tighten existing regulations and stop overseas doctors extending their four year, work permit free training. Although this has yet to be introduced, some overseas doctors are facing professional and personal difficulties as applications for work permits or extensions to permit free status have been refused.³

This article is based on my discussions with the royal colleges, the General Medical Council, and doctors who are on the Overseas Doctors Training Scheme. As well as outlining why the scheme was set up, how it works, and what the problems are, I discuss the broader issues of why overseas doctors come to Britain,