Winds of change: New UK immigration rules and future of surgical training for overseas graduates

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Sir,

By now, I am sure most of your readers will be aware of the new United Kingdom government rules that in effect, will jeopardise the career of thousands of doctors of Indian origin, currently seeking work or already working in Britain. The Department of Health announced in March this year that from July 2006, all doctors wishing to work in the UK from outside the European Union will need to have a work permit [1]. This will end the existing permit-free training arrangements for all international medical doctors (IMGs). This will also mean that individual NHS Trusts that want to employ such a doctor will have to prove, before hiring, to the UK Home Office, that they could not fill up the vacancy with a graduate from the UK or European Union [1]. The fact of the matter is that this law was brought in surreptitiously, without prior consultation, and no distinctions have been made amongst those who have passed the Professional and Linguistic Board Examination (PLAB) and are still without a job and those who have already entered the system and are in some stage of their training, mostly in Senior House Officer (SHO) grades [2, 3].

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Like all other disciplines, this has serious implications for Indian nationals who desire to benefit from surgical training in UK. In effect, it is virtually curtains for those who have passed their PLAB Test and have not yet secured any surgical posts yet, as there is very little chance that they will be able to get a training post in the future and climb up the steep training ladder in a highly competitive speciality like Surgery or its allied sub-specialities. For those who are already in SHO posts, either as a stand alone or part of the soon-to-be-disbanded Basic Surgical Rotation Programmes, it will become increasingly difficult for them to further their training and secure a coveted training number that will enable them to move on to the fiercely competitive Higher Surgical Training posts.

However, these momentous changes are not solely the result of the newly imposed immigration law. The entire postgraduate medical education in the UK is being radically revamped through the implementation of the government led Modernising Medical Careers (MMC) programme which, at its heart, proposes seamless training from graduation to achieving completion of higher specialist training [4]. These reforms in training programmes leaves the current bunch of junior surgical trainees guessing as to where they would actually fit in the new system and now the priority has shifted from career progression to a matter of survival in the system, which most of the IMGs thought was over after they managed to get the initial breakthrough in the rare-as-gold-dust job market. Needless to say, with the abolition of the traditional hierarchal grades, new IMGs from India aspiring to come to Britain in the hope of further surgical training do not have any realistic chance of fitting into this new streamlined infrastructure. The recent change of government rules, suspiciously co-incidental in its timing of implementation, and smacking of opportunism, callousness and prejudice, seems to be the final nail in the coffin for overseas graduates.

It is interesting to note how much the situation has changed since the publication of an excellent article in your journal on the difficulties of acquiring surgical training in the UK, some time back in 2004 [5]. The UK is now producing more doctors than they ever did before, thanks to the new injection of government funds into building more medical schools all over the country, and currently, supply outstrips demand. As a result, IMGs are suddenly no longer welcome, and though it is difficult to predict whether this situation will lurch back to the all-to-familiar shortage of workforce personnel prevalent in the NHS as predictable cycles, the current scenario certainly makes UK a very hostile place for those in India who might have contemplated coming over to gain some British experience in the surgical disciplines. Going by our experience of talking to a considerable number of prospective trainees hanging around the fringes of the fast dwindling job-market in the UK, we would certainly implore all our junior colleagues in India to indefinitely postpone any tentative plans of travelling to

Britain with the prospect of gaining further surgical training in this country. Honestly, what good is it to spend huge sums of money, waste significant time and leave family, friends and peace of mind to travel to a country which does not wish you to be there?

References

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