The West Midlands LETB Policy
for
Clinical Attachment Placements
for
International Medical Graduates (IMG)
Non UK/EAA Members Only
Introduction

The West Midlands LETB and the Trust Hospitals in the region receive many requests from overseas doctors who wish to observe clinical practice in the NHS. The following document outlines a corporate West Midlands LETB policy and procedure for handling such requests.

A clinical attachment is defined as a period of time when a doctor is attached to a clinical unit, with a named supervisor with the broad aims of gaining an appreciation of the nature of clinical practice in the UK and observing the role of the clinical team in the NHS. This includes learning about the legal, ethical and cultural contact of clinical practice as outlined in the GMC’s booklet “Good Medical Practice”.

Doctors mainly come to this country to either take PLAB or have already taken PLAB and are trying to enter training in the NHS. There are other groups of doctors, such as refugee doctors, overseas medical students and some, more senior doctors who come out of interest to observe UK practice in specialist units.

Clinical attachments can provide two advantages to the overseas qualified doctors, namely

1. An attachment gives an insight into working within the NHS and the UK medical, legal and cultural traditions.
2. An attachment is the only way overseas qualified doctors (especially refugees) are able to get a UK consultant reference, which is almost essential for getting a job.

A large number of doctors looking for clinical attachments have direct or indirect connections with Trusts and will try to arrange attachments through these connections.

The purpose of this policy is to have a consistent approach across the West Midlands region in the organisation of formal, structured and suitable placements at Trusts which can be evaluated and monitored.
Selection Criteria

In order to apply for a clinical attachment the below criteria must be met.

If you do not meet the criteria you should not apply to West Midlands LETB for a clinical attachment.

IMG must:

1. Not already have had a clinical attachment placement or worked in the NHS
2. Have passed both PLAB 1 and 2
3. Have passed all parts of IELTS at 7.0 or above for EU / non EU doctors
4. Be resident within the West Midlands at the time of application
5. Have graduated no more than 4 years ago

These 5 criteria are non-negotiable and apply across all applications for clinical attachments within the West Midlands.
1) **Duration and Timing**

A clinical attachment placement should be for a maximum of up to twelve weeks. Applicants need to have passed PLAB Part 2 and IELTS at a minimum score of 7.0 and demonstrate good communication skills in English.

Clinical attachments will be limited to one per specialty at any one time. Clinical attachments will not normally commence in August or December. These times coincide with the induction period of new trainees and annual/Christmas holidays; therefore, it would not be practical for Consultant trainers to take a clinical attachment.

2) **Organising Placements**

Doctors need to contact a Trust in the West Midlands region and locate a Consultant who would be happy to have you attend.

Requests for clinical attachments from individuals or appropriate Trusts should be forwarded to the West Midlands LETB. The LETB may be able to assist on occasions with ‘matching’ the applicant’s request against the register of clinical attachment placements.

Arrangements may be made, if this deemed necessary, by the LETB for the applicant to be interviewed by a panel of Clinical Tutors, Associate Postgraduate Dean and a HR representative from the LETB.

3) **Permitted Activity**

Doctors who are on Clinical attachments have observer status, similar to a medical student.

Clinical attachments should be working under the supervision of the supervising consultant or a trained member of his team.

Clinical attachments are allowed to:

- Take a history
- Perform a clinical examination under the supervision of his consultant or a member of his team

They are not permitted to:

- Perform intimate examinations on patients (PR or PV)
- Perform catheterisation of male or female patients.
- Request investigations (laboratory/radiological).
• Prescribe any treatment or administer any medication.

Clinical attachments must comply with the Trust’s policy on patient confidentiality and respect patients’ cultural needs. They will be advised of the requirement for the patient’s prior informed consent and the right to decline to be observed.

Doctors on clinical attachment will be expected to attend relevant teaching sessions. A comprehensive timetable will be issued at the beginning of their attachment.

4) **Induction**

The doctor should meet with the education supervisor and be introduced to the relevant staff.

- The conditions of the clinical attachment should be made clear to the doctor and a copy given in writing to him/her.
- An identification badge should be worn at all times in the hospital / PCT.
- The doctor should also be made aware of the Trust’s / PCT policies on Health and Safety, Fire, Equal Opportunities, Alcohol, Smoking and any others which are relevant.

5) **The role of the Supervising Consultant**

The supervising consultant would be provided with the necessary support and training from the LETB.

The consultant supervisor should meet the doctor at the start of the attachment to discuss arrangements and to identify what the aims and objectives are of the clinical attachment. The details of this meeting will be documented and a copy should be kept in the trainee’s educational portfolio. There should be a further meeting at the end of the attachment to establish whether the aims and objectives have been achieved.

The West Midlands LETB will provide the necessary documentation for the appraisal and assessment process and will provide the appropriate training whenever it is necessary.

6) **Accommodation**

Where possible, the Trust may be able to offer rented accommodation at a charge, but it is not obliged to do so. Doctors will be expected to arrange their own accommodation.
7) **Evaluation and Monitoring of Placements**

It is expected that both the Educational Supervisor and the doctor will provide a report at the end of the placement. Structured forms will be provided by the LETB.

8) **The Role of Medical Personnel and Postgraduate Centre Managers**

Following the recruitment to the clinical attachment placements, Medical Staffing and the Postgraduate Centre Managers will be informed of the doctor’s details and the start date for information only. Clinical attachment placements are **unpaid** but doctors will be issued with honorary contracts by the Trust. The trusts are advised to perform pre-employment checks e.g. occupational health and CRB, on IMG who have been allocated to their units. **The fees for CRB and occupational health clearance should be paid by the IMG.**

9) **Indemnity**

This will be provided by the host Trust for the clinical attachment placement.

10) **Refugee Doctors**

A small number of the clinical attachment placements will be reserved for the refugee doctors to meet their special needs.