

SUSHRUTA JOURNAL OF HEALTH POLICY & OPINION SUSHRUTA JOURNAL OF HEALTH POLICY & OPINION

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The National Health Service (NHS) is going through the worst crisis in its history and its services are under unprecedented pressure bed occupancy, with 19 out of 20 beds occupied, is above 95%¹, ambulance response times and waiting times at A & E are at a record level, and the elective waiting list stood at a record 7.2 million in 2023.² Even though there has been an increase in recruitment in recent years, 21% more doctors and 16% more nurses, as compared to five years ago, the latest figures indicate that September 2022 recorded the highest number of staff vacancies – 1 in 10 posts were unfilled (9.7% of the workforce). ³ A record number of people resigned in the 12 months leading to 2022- 148,460 or 10.8% of the workforce resigned as compared to 9.1% resignations in the 12 months leading to 2019. Staff burnout, work-life balance, and worsening working conditions since the start of the pandemic are some of the reasons.⁴

There is an urgent need for training and recruiting new staff into the NHS and the service is experiencing some of the highest vacancies on record. International medical graduates (IMGs) continue to remain a key part of the NHS medical workforce. United Kingdom (U.K.) medical graduates joining the U.K. medical workforce rose by 2% in the last five years compared to a 121% rise in IMGs. Of the doctors who joined the workforce in 2021, 50% were IMGs and 39% were UK graduates. ⁵ This highlights that IMGs form a major component of the medical workforce and suggests a future trajectory whereby they will become further embedded within UK healthcare systems.

A long-term approach to ensure a sufficient and skilled workforce in NHS is a challenge that needs to be at the core of the workforce implementation plan. However, even though a sustainable long-term workforce strategy is urgently needed, ethical recruitment of doctors from overseas can partially address the recruitment gap, critical for the delivery of safe patient care.⁴

BAPIO Training Academy solutions

British Association of Physicians of Indian Origin (BAPIO) is a national voluntary organisation established in 1996 with a commitment to the principle of providing high-quality patient care through the NHS. BAPIO actively promotes the principles of diversity and equality with the aim of "Empowering doctors and dentists to be beacons of leadership and professional excellence." Over the years, the association has grown in stature and influence. It is represented through active divisions covering all the English Regions as well as Scotland, Wales, and Northern Ireland. It is now one of the largest organisations of its type in the country. BAPIO is a non-party political membership organisation, recently registered as a charity. It actively contributes to the cause of promoting access to better health care globally and responds to aid victims of natural disasters in the world.

BAPIO Training Academy (BTA) is an arm's length body of BAPIO, and its strategy is to promote professional and clinical excellence. BTA has led the way in finding innovative solutions to the healthcare sector's workforce crisis in the UK. Its global initiatives to enable skilled doctors to join healthcare organisations across the UK in various sectors help in the identification of talent internationally, upskill health professionals, work through sustainable recruitment processes, include GMC sponsorship and connect to educational programs with professional development. BTA strives for quality through education and training to enable better patient care across specialties. The programs provide continued professional development, medical indemnity, pastoral care, and liaison to streamline the journey. BTA's innovative offers reduce locum spending, identify worldwide talent, and provide an effective solution to workforce needs impacting patient care. BTA model of engagement involves working collaboratively with NHS healthcare services, universities, regulators, politicians' governments and global partners. It is critical to the success and sustainability of healthcare systems. It is this whole system approach that has allowed for the development of innovative workforce initiatives to address workforce crises and improve the provision of quality healthcare services.

Workforce Development

BTA has established partnerships with at least 24 NHS Trusts for the workforce development of doctors, nurses, and allied health professionals. BTA's innovative projects have been recognised and now working with NHS England to support the winter pressure crisis, development of the primary care workforce and wider workforce development initiatives across the country. Through BTA's programs, more than 65 international medical doctors have gained GMC registration and working across NHS healthcare services across various specialties including emergency medicine, paediatrics, OBG, neurology and psychiatry. These doctors are now working in hospitals and units where there are significant gaps. A skilled safe workforce providing care at a point when there are significant healthcare workforce shortages is a massive benefit to safe patient care.

The clinical fellow's program has also enabled NHS organisations to reduce locum spend. The unique 2+2 program wherein doctors complete 2 years of training in their home countries adhering to UK education and training standards followed by 2 years in the NHS healthcare services has started showing results; more than 5 doctors have also started their year 3 in the NHS and at least another 30 are anticipated to commence year 3 in the UK imminently. This has the potential for significant savings over the next 5 years including clinical excellence and a sustainable healthcare workforce. Additionally, BTA has partnered with Higher Education sectors, and UK and global Universities to address the higher education needs that support developing healthcare professionals fit for the 21st century. The programs have in-built independent quality assurance processes to ensure early identification and swift resolution of any concerns to maintain the highest standards of program delivery.

Clinical excellence with a sound understanding of strategy, resource management, leadership and healthcare management can only further strengthen the workforce capability. The educational programs including university accreditation and continued professional development provide an opportunity for ongoing development for individual doctors, nurses, and allied healthcare professionals to be future senior clinicians. As we tackle waiting lists, resource constraints and workforce gaps, BTA's programs enable a unique offer to deal with the demands crippling organisations across the UK. Feedback from stakeholders and healthcare professionals is resoundingly positive.

Improvements in staff experiences, resources, and delivery

BTA programs have supported significant cost savings for organisations in reducing agency locum spending which then can be spent on patient care or further workforce development. Gains to the organisations include highly skilled medical staff who can meet the needs of various communities and current and future healthcare needs. These doctors with either postgraduate qualifications or through the in-house 2-year training program (2+2) enter relevant clinical specialities providing high-quality patient care. Estimated locum costs across the NHS are being analysed and are expected to be significantly high savings. This is reflected in partnership with NHSE, 24+ NHS Trusts and other healthcare sectors. Partnership in the UK and globally is increasing at a rapid pace due to BTA's innovative program where clinical excellence and development of a capable and sustainable workforce are at the core of its mission.

BTA program strives to transfer knowledge and skills between the UK and other parts of the globe, mainly South Asia. BTA has contributed to upskilling programs for overseas doctors, nurses, and allied healthcare professionals. BTA's work transcends across borders – nationally and internationally.

References

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