



Royal College of
General Practitioners

Fit for the Future

Opening the door to
international GPs



Introduction: the issue

General Practice is facing a workforce crisis. We have a falling number of Full Time Equivalent (FTE) GPs looking after an increasing number of patients with ever more complex needs. On average in England, as of July 2022, GPs look after 2,247 patients - 16% more patients than in 2015.

Over 40% of all trainee GPs are International Medical Graduates (IMGs). If we are serious about meeting the Government's 6,000 additional GP target in England and meet the demand across the devolved nations, we need as many of these trainees as possible, to remain in the UK and work as qualified GPs.

The NHS invests significant resources into training these doctors, both in terms of funding (GP training costs approximately £50,000 per trainee per year), and in terms of trainer time and expertise. In return, IMGs make invaluable contributions to the NHS.

Once they complete their training, most of these IMGs will need to find a practice to sponsor their visa, or they will be forced to leave the country. This is because GP training takes three years to complete, and it is only after five years that IMGs can apply for Indefinite Leave to Remain. This problem is unique to general practice as other medical specialty training takes a minimum of five years to complete.

What we are hearing from our members

We have heard from our members that many IMGs find the process of getting a visa stressful and are anxious that they may be forced to leave the country. From our survey of International Medical Graduates across the UK, we found of those that who responded:

- Around half (49%) of all IMG trainees have difficulties with the visa process
- Around 30% of all IMG trainees consider not working as an NHS GP because of difficulties with the visa process.
- 17% are considering leaving the UK entirely

If these figures are representative, that would mean there are 1,165 potential GPs who are in danger of being lost to NHS general practice.

To support these IMGs, the Chair of the RCGP Professor Martin Marshall and Vice Chair Dr Margaret Ikpoh co-signed a letter asking the Home Secretary to take action to improve the visa process for IMGs. To make the biggest impact we gave the opportunity to co-sign this letter to all our members and we were overwhelmed with the response: **4,353 GPs** added their name to the letter.

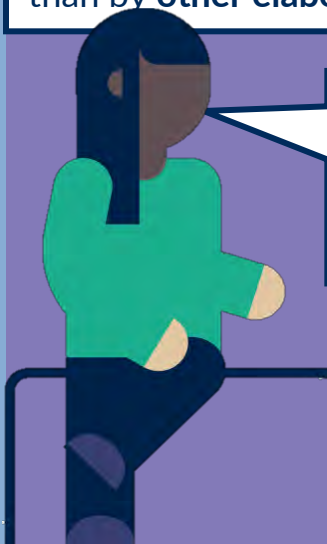
We also heard from over 500 IMGs who wanted to share their stories with us. Below are some of the stories they told us alongside stories from GPs about the difficulties they have faced as employers trying to navigate the process:

Leaving the UK



"GP in training, with 2 kids, **seriously thinking about moving to Canada at the end of the 3 years** because the practicality of getting a sponsor / obtaining a visa / buying a home (without having that certainty of visa) makes the process not seem too worth it. **Really enjoying training and life in the UK otherwise, but unfortunately the process to stay may just not be the best decision for me and my family.**"

"Myself and my spouse are IMG GP trainees finishing training in a matter of weeks and we have got 2 lovely children settled in school and the local community. **At this time when GPs are needed in the UK, we find that we both need further sponsorship to remain in the UK to work as GPs or else we are faced with the option of leaving the UK or responding to recruiters in Canada, Australia etc who are openly and aggressively recruiting GPs from the UK. As a family we are left with a few weeks to find sponsorship or leave - a loss to the UK of 2 fully trained GPs from my family alone,** for reasons that appear to be easily resolvable. One would have thought it easier and better to boost GP numbers by retaining newly trained workforce via modifying an immigration clause than by **other elaborate, laborious or tortuous means?**"



"I am a ST3 IMG. Despite being passionate about GP training I am not looking forward to CCT as I will have to **rush to find jobs or will have to leave country** as my visa expires on CCT date. Please help us out."

Leaving general practice



I am an IMG due to [gain] CCT in about a years' time. At the time of CCT I'll still require a sponsor to remain in the UK as I only will be eligible for ILR 9 months after then. **I have noticed with dismay the stress colleagues that had been in my similar situation have had to go through and in fact some of them having to literally leave primary care to pick up hospital jobs as many practices do not offer visa sponsorship for qualified GPs.**"

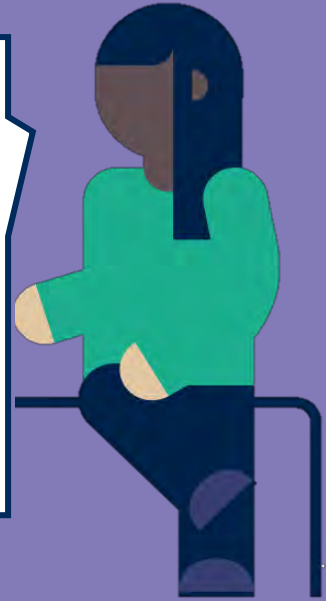
"I am a GP trainee and in my first year of specialty training and because of the need to look for a sponsor at the end of my training **I am already considering leaving GP training** to another training such as Internal Medicine which by the time I complete my training would enable me to apply for an indefinite leave to remain. Yet if left to choose, I prefer to work as GP rather than the other internal medicine specialties."



"I am an IMG GP Trainee ST2 currently in Scotland. After completion of my training, I have 1 year left to fulfil the 5-year criteria for applying for ILR in the UK. I worry and wonder how I will get the sponsorship for that 1 year. **I might have to take up a middle grade post in the hospital in some department for a year after qualifying as a GP to get sponsorship.** The severe shortage of doctors and GPs in the UK is no surprise. The uncertainty has definitely had a major impact on my stress levels."

Stress and Anxiety

"Visa and sponsorship requirements after training has been a source of anxiety to me. I was meant to complete training in 09/2023 but due ILR in 11/2023. The 2 months in between requires that I get a sponsor which may require my moving from my current place of residence. I have had to take on an extended post to extend my training completion date so that I do not require a visa. **No GP should go through this or be forced to move their family because of this.**"



"I have a Syrian passport. I am in the UK on a tier 2 visa, and NOT an asylum seeker. **I am very worried that after I finish training, I will be facing deportation to a country with ongoing civil war.** Additionally, my Syrian passport will expire before my training ends, the Syrian embassy in the UK remains closed and I am unable to renew it. **This situation is very stressful to me obviously.** I hope we can do something about it."

"As an IMG within the last one year of qualifying as a GP I feel **tremendous anxiety on a day-to-day basis** about the challenges there are in securing a visa to work in GP practices post qualification, so much so that I am considering taking up a role as a hospital doctor or private hospital RMO after qualifying as a GP."



Employers



"More than 65% of our ST1 intake locally are IMGs, but **very few practices are visa sponsors due to how onerous the process is.** We desperately need these **trainees** to be able to stay locally and continue the enormous contribution they make to our healthcare system which is currently going through a major recruitment problem."

"I hold responsibility for ensuring high quality GP training in Cornwall. We support many international as well as UK doctors to complete this training. **Our international doctors are brilliant, passionate resourceful and intelligent people who have significant disadvantages to overcome to complete this demanding training.** It is heart breaking to see the additional burden placed on them at qualification as they wrestle with the visa system. The visa system needs to recognise the value of these doctors to the UK and actively support them to remain here, not make it more difficult."



"I am a GP training programme director with a **genuine concern for our trainees who face such stress and anxiety about being made to leave the country** if they don't pass their final exam or find a permanent role in advance of finishing training. **Training is challenging enough for our trainees without this added uncertainty and demand on their mental health and finances.**"

What can be done?

The RCGP has taken several practical steps, working with NHS bodies throughout the four UK nations, to help GPs from other countries to get visas and the support they need to settle in the UK.

We have developed dedicated advice and guidance to support our members in obtaining a visa. Furthermore, we are working closely with the NHS to deliver a series of events that provide further support to both trainees and practices wishing to navigate the visa process.

There are, however, 8,166 GP practices in the UK. For them all to become visa sponsors it will cost the NHS over £4 million. The process takes up to eight weeks and we have heard from some practices that it can take much longer. Most practices will only start the process when they know they have an IMG they want to recruit. This wait can cause significant stress and anxiety for IMGs. Usually, an IMG needs a new, sponsored visa very soon after finishing their training, and this means there can be very tight timelines involved in completing the process of becoming a sponsor and subsequently the IMG applying for a visa.

The response we have heard from IMGs and employers shows that although the actions we have taken have helped, this is a problem that can't be solved by piecemeal actions alone. Encouraging more practices to become sponsors will help, but what we really need is action by the Home Office to completely remove the stress and anxiety that too many IMGs face. That is why 4,353 GPs have signed our letter asking the Home Secretary to take action.

To solve this problem the Home Secretary could choose one of the following options:

Offer IMGs the opportunity to apply for indefinite leave to remain in the UK on successful completion of GP specialty training.

Create a new Post Medical Training Visa which would allow trainees to stay in the UK for two years in a similar way to the current Graduate Visa.

Work with the NHS bodies in each of the four nations to create overarching umbrella bodies who can act as sponsors for all IMGs.

EITHER of the above options would remove most of the problems highlighted in this report, cut unnecessary bureaucracy, and help the Government hit its target of an additional 6,000 GPs working in the NHS in England.

We are calling for this change as part of our [Fit for the Future campaign](#) which sets out the need for a wider recruitment and retention strategy that will go beyond the target of 6000 more GPs, backed by a £150 million annual GP retention fund and an increase in the number of GP training places by at least 10% year on year.

Glossary

- **IMG - International Medical Graduates** - A physician who has graduated from a medical school outside of the country where he or she intends to practice.
- **CCT - Certificate of Completion of Training** - A certificate of completion of training confirms a doctor has completed an approved UK training programme and is eligible for entry onto the Specialist Register or GP Register.
- **ILR - Indefinite Leave to Remain** - If you are a foreign national and you are granted Indefinite Leave to Remain, you will have permission to live and work in the UK without restriction.
- **RMO - Resident Medical Officer** - A medical officer who has obtained full registration and who has completed the equivalent of at least one year of full-time clinical experience.
- **ST (1/2/3) - Speciality training** - ST 1 or 2 refers to doctors in their first couple of years of training. ST3 refers to doctors at a higher stage of specialty training.