Managers Guide for Overseas Nurses

OSCE preparation and Pastoral Support ver. 2
# Table of Contents

- **Background** .......................................................................................................................... 3

- **Overseas Nurses’ Journey** ..................................................................................................... 3
  - Language Competency .............................................................................................................. 3
    - Language Tests ..................................................................................................................... 4
  - Test of Competence ................................................................................................................. 4
    - OSCE Information .................................................................................................................. 5
      - Approved OSCE Test Centers ............................................................................................ 5
      - OSCE Training Programme ............................................................................................... 6
      - What happens on the day of the OSCE? ............................................................................ 6
      - Waiting for the results and next steps ................................................................................ 6

- **Pastoral Support: Useful tips** .................................................................................................. 7
  - First day on the job .................................................................................................................. 7
  - Off duty .................................................................................................................................. 7
  - Sickness ................................................................................................................................. 8
  - Annual leave .......................................................................................................................... 8
  - Cultural differences ............................................................................................................... 8
    - Good practice example ........................................................................................................ 8
  - Practice support ..................................................................................................................... 9
  - Welfare support ..................................................................................................................... 9
  - Training and Development .................................................................................................... 9
  - Personal Development and Career Planning (includes appraisals and revalidation) .......... 10
  - Feedback and evaluation ........................................................................................................ 10

- **Useful information and Resources** ....................................................................................... 11
  - English Language Requirements ........................................................................................... 11
  - Nursing and Midwifery Council (NMC) ................................................................................ 11
    - Computer Based Test (CBT) ............................................................................................... 11
    - NMC approved OSCE test centers .................................................................................... 11
  - NHS Employers ....................................................................................................................... 12
  - Health Education England (HEE) .......................................................................................... 12

- **Appendix** .............................................................................................................................. 13
  - Appendix 1: “Connecting Cultures” .................................................................................... 13
Background

The purpose of this guidance is to support a pan-London approach to international nurse recruitment that meets with best practice principles and ensures both the overseas nurse, and the employing organisation have a positive experience of the recruitment and employment process, which should be efficient and effective in its nature. This managers’ guide will prepare managers and staff working with overseas nurses to provide OSCE preparation and pastoral support in the clinical environment. This version 2 comprises of the original content from version 1, with additional useful information based on feedback and evaluation from the original version.

Overseas Nurses’ Journey

To have a better understanding of the overseas nurses, here is a summary of their journey. The diagram below from the NHS International Recruitment Toolkit shows a summary of the registration and immigration process for an overseas nurse who is out of country and will be sponsored under Health and Care Visa to work in the UK.

Candidates can apply for a Health and Care Visa with up to 5 years validity, although 3 years is more common. It is dependent on the Trust which length of stay they choose to employ the overseas nurses for.

Language Competency

The NMC requires information about overseas nurses’ English language ability to make sure they can practise safely and effectively. All nurses seeking registration should show that they meet the standards the NMC have set and provide evidence for one of the following:

- recently achieved the required score in one of the English language tests accepted by the NMC – must achieve the required score in each of the four skills of reading, writing, listening, and speaking.
• a pre-registration nurse, midwife or nursing associate qualification which was taught and examined in English.

• recent practice of at least one year in a majority English speaking country.

**Language Tests**

IELTS (International English Language Testing System) is an NMC requirement if the overseas nurse did not train in an English-speaking country, or if the programme was not taught in English. It is also required by the Home Office for the visa application process. This test assesses general language skills in all subjects.

The Overseas nurse must ensure they achieve the following grades:

- Grade 7.0 or above in Speaking, Listening, Reading
- Grade 6.5 or above in Writing
- Overall grade of 7.0

The OET (Occupational English Test) which assesses language skills more specific to healthcare workers has been accepted for NMC registration. Candidates listen to patient consultations, workplace conversations and medical talks; read a range of healthcare-related texts; write a referral letter; and participate in role play as a nurse. OET is scored from A (best) to E. The NMC accept OET on Paper, OET on Computer and the OET@Home.

The overseas nurse must ensure they achieve the following grades:

- At least a grade C+ in the Writing section, and
- At least a grade B in the Reading, Listening and Speaking sections

**Test of Competence**

The Nursing and Midwifery Council (NMC) introduced a Test of Competence (ToC) for internationally registered nurses and midwives in October 2014. Nurses and midwives trained outside of the European Union (EU) / European Economic Area (EEA) are tested for their clinical competence and knowledge through a two-part process in order to gain registration in the United Kingdom (UK), including achieving language capability requirements. The ToC assesses candidates against the current UK pre-registration standards and is practice-specific, including Adult Nursing (RN1), Mental Health Nursing (RN3), Learning Disability Nursing (RN5), Children’s Nursing (RN8) and Midwifery Nursing (RM).

The NMC have launched a new ToC in line with the Future Nurse Standards and the changes were implemented in August 2021.

The two parts of the ToC process include:

- **Part one** - Computer-Based Test (CBT) which is accessible around the world for applicants to access in their home countries. The CBT comprises 115 questions and is split into two parts:

  A. Numeracy Test – consists of 15 short-answer questions requiring a numerical answer
  B. Clinical – 100 theory assessment multiple choice questions
Candidates will receive a pass or fail result for each part of the test: Part A (Numeracy) and Part B (Clinical). If they fail, they only need to re-sit the part that they have failed. They have a maximum of three attempts as part of one application.

**Part two –** Objective Structured Clinical Examination, commonly known as the OSCE (which is always held in the UK at one of the approved test centers).

Candidates must complete the entire UK registration application process within two years of passing part one which is their CBT. If a candidate is unable to do this, they will need to re-sit the CBT and begin a new application.

Once in receipt of the CBT result the NMC then requires the Overseas nurse to submit a range of documents. A decision letter is received once NMC are satisfied with their checks. The decision letter grants the Overseas nurse to apply through UKVI (United Kingdom Visas and Immigration) for sponsorship and a visa as a skilled migrant worker under Tier 2. Overseas nurses have up to 12 weeks from employment start date noted on their certificate of sponsorship with the employing organisation to sit the OSCE exam. They can be legally employed as a pre-registration candidate during this preparation time.

**OSCE Information**

The OSCE is based on UK pre-registration standards. The Nursing and Midwifery Council brought some amendments to the OSCE and changes were implemented in August 2021. Its new structure comprises ten separate stations instead of six. Four stations continue to be linked together around a scenario and relate to four stages of the nursing and midwifery care process:

- **Assessment**: holistic patient-centered
- **Planning**
- **Implementation**
- **Evaluation**

Four of the six remaining stations will take the form of two pairs of two linked stations, which test practical clinical skills. The remaining two stations are for assessing the nurse's professional values and critical appraisal of research and evidence and associated decision-making. These two stations are both written stations.

**Approved OSCE Test Centers**

There are three universities which are approved OSCE test centers, providing a choice of four locations to sit the OSCE: Ulster (Derry-Londonderry), Northampton, Brookes (Oxford and Swindon). From February 2022, there will be two additional OSCE test centres: Northumbria University and Leeds Teaching Hospitals NHS Trust. Each of the universities offer the OSCE in the different fields of nursing and midwifery.

Please see the ‘Useful Information and Resources’ section for the university links and for more information on the examination and the required preparation.
OSCE Training Programme

The first OSCE must be taken within 12 weeks of the overseas nurse arriving into the UK. The overseas nurse has up to three attempts on one NMC/visa application. The OSCE will may be booked by the relevant hospital International Recruitment Lead and the date is fixed unless the date is changed within three weeks of that time. If the overseas nurse is sick, they should provide a medical certificate and the test can be re-booked. The date of OSCE depends on availability at the relevant test-center.

The overseas nurse will be learning the knowledge and skills to meet the NMC standards for delivering healthcare. Some of the policies used within the organisation may be referenced at this stage, but for clinical skills it is expected that the Royal Marsden Manual of Nursing Procedures standard is followed.

Outline of the programme

There are many different models that organisations are delivering their programme. Check within your organisation on which approach is used. Some organisations outsource their OSCE training to assist with ICS requirements.

What happens on the day of the OSCE?

Each organisation uses a different approach re travel arrangements and support on the day. Transport may be organised by the organisation or left for the individual to book themselves. The overseas nurses may wish to travel together to and from the test center. Some organisations arrange for a chaperone to attend with the overseas nurses as stress levels may run high and they may require some support managing any last-minute nerves or emotions pre or post OSCE. The examination is approximately four hours in duration.

Waiting for the results and next steps

Once they have taken the examination they will need to wait for the results. This normally takes up to five working days and the overseas nurse will receive these results by e-mail. They will need to inform the relevant recruitment lead for their organisation and their ward/department manager of the result. Depending on the result there are different pathways for the manager to follow:

**Pass** - The overseas nurse will notify their manager of their pass. It is their responsibility to pay their NMC registration fee. It can take 5 days for the OSCE test centre to notify NMC of the exam results. Once notified, NMC will aim to assess the registration application within 30 days. When the overseas nurse is in receipt of the confirmation of their registration and their PIN (personal registration number) they will need to inform the international recruitment lead and the ward/department manager. Arrangements will need to be made to change them from their current banding to a Band 5 position.

**Fail** - Normally it is due to nerves or something minor. It is no reflection of their clinical practice. They will be given reasons why they were unsuccessful and what happens next depends on the number of stations that were failed (see below).

Many of the candidates want to re-book the OSCE as soon as possible. The candidate must wait at
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least ten days between the original test date and the re-sit. It will need to be established when the re-sit will take place and the arrangements for the individual and their on-going support and preparation for the re-sit. The manager will be informed of the examination date and will need to ensure the ward off-duty is amended accordingly.

Failed up to seven stations across both the APIE and/or skill stations

This will require a re-sit at 50% of the cost of the OSCE. The candidate will only need to re-sit the stations that were failed. If the candidate needs to re-sit the APIE (Assessment, Planning, Implementation and Evaluation) station(s) they will be given their original paperwork from the APIE stations that they passed in their previous attempt, in order to complete the re-sit stations in sequence.

Failed eight to ten stations across both the APIE and skill stations

Will require a re-sit at 100% cost. The candidate will need to re-sit the APIE station(s) that they failed, and the skill station(s) failed. The candidate will be given the same scenario and original paperwork from the APIE stations that they passed in their previous attempt in order to complete the re-sit stations in sequence.

Full fail (3rd attempt: Re-sit) – Fail on any station on the third attempt

Six months will need to elapse before the candidate can re-apply to the NMC.

If the overseas nurse does not pass the OSCE it is a difficult time for the individual and they may require lots of support. Please understand for many of them they have not previously failed anything, so it is a huge knock to their confidence. Please bear this in mind when they are working clinically and allocating them with patients if possible. Please contact the International Recruitment Lead or relevant Practice Educator as a resource for any support or advice that may be required.

Pastoral Support: Useful tips

First day on the job

Welcome your overseas nurse to your area and provide your own local induction as normal. Like any new starter, joining a new team can be a daunting experience and having a good induction can help ease the anxiety experienced during this period. If a new starter has a good induction, they are more likely to remain working in that role for a longer period. You may also want to consider having a poster of your new nurse on the staff notice board with a photograph welcoming them to the ward.

Off duty

Avoid giving heavy workload and irregular shift patterns until the overseas nurse is more established and in receipt of their PIN. They would have been working very hard learning for the previous 3 to 4 weeks so they will be tired getting used to working again.
Sickness

Often coming to a new country with a different climate can make the overseas nurse more susceptible to illness. Particularly in the first 3 months keep an eye on sickness as it may also be a trigger for stress. It is useful to signpost them to wellbeing services offered by the Trust to help them deal with the life changing event of moving from another country. There are also external wellbeing hubs that can offer support where needed, such as talking therapy or counselling. Furthermore, the NHS have introduced a confidential staff support line for people potentially facing significant stress, and it is free to access seven days a week.

Annual leave

Many overseas nurses may not have received annual leave before, so this needs clearly explaining what your local process for booking leave. Please note that annual leave accrues from when they arrive in the UK and this will need to be the first day on health roster.

Cultural differences

The way nursing is delivered can be different around of the world, therefore the overseas nurse may not know what the expectations of nursing are in the UK. It is good practice to set expectations during the induction period and gently reinforce if you notice they are not meeting these expectations. Some examples include:

- Infection control policies - bare below elbows
- Uniform laundering rules
- Nurse and doctor relationships

It may be the case you are working with an experienced overseas nurse, however due to the cultural differences in how nursing may be delivered, it should not be taken for granted that they will know everything that an experienced nurse who trained in the UK would know. It is good to make other staff members aware of this too.

In addition to the differences in nursing practice, it is useful to acknowledge that overseas nurses come from very diverse cultures which can mean that one unacceptable norm in British culture may be a usual approach in another. Culture forms the foundation of an individual's identity and can determine the way they communicate with colleagues and patients and deal with situations. Understanding these differences will help ensure that culture will not be a hindrance in establishing a good working relationship with the overseas nurse.

Good practice example

Trust 1: Royal United Hospitals Bath NHS Foundation Trust have developed a 'Managers Guide in Supporting International Nurses' that provides not only an overview of the overseas nurses' journey into becoming a registered nurse in the UK, but also their common cultural practices, mannerisms, language, and holidays. Their list of examples of cultural diversity can be found in appendix 1.
**Practice support**

Most NHS organisations will have practice educators/practice development team. If you have any concerns about the overseas nurses' practice, we recommend referring to this additional resource as soon as possible.

**Welfare support**

Encourage your overseas nurse to join professional networks in the organisation to help them with integration. Some examples networks include:

- BME groups
- LGBT Network
- Overseas nurse networks

Remember to include them in social events in your teams such as Christmas parties, away days/team building days.

**Professional indemnity arrangement**

It's a legal requirement for NMC registered nurses to have an appropriate indemnity arrangement in place for when they practise in their professional capacity. We recommend that you remind the overseas nurse of this requirement and encourage them to join a union.

**Training and Development**

The end of OSCE preparation is just the beginning of their journey working within the organisation. They will need to receive ongoing development through an agreed period of support and adaptation to working in the UK and within their service.

**Preceptorship**

There should be a period of preceptorship for the newly registered overseas nurse with an opportunity for a more bespoke version of preceptorship taking into consideration that some of the nurses may have considerable clinical experience. The NMC strongly recommends that all new registrants have a period of preceptorship when commencing employment including anyone who has entered a new part of the register and those newly admitted to the register from other European economic area states and other nation states.

Where an overseas nurse is newly qualified and has no previous clinical experience then the nurse must be offered a place on the Trust's usual preceptorship programme alongside other newly qualified nursing staff. This should also apply to those overseas nurses that have not practiced clinically within the previous 12 months.

Preceptorship arrangements should be agreed as part of their personal development plan and career planning conversation at the recruitment stage and documented in their personal development guide.

A period of preceptorship will help the newly registered overseas nurse develop the confidence to practice competently and ensure they are familiar with and can meet their obligations under the NMC Code. During this period the nurse should be supported by an experienced practitioner so that they can develop their confidence as an independent professional, and to refine their skills, values and
behaviors. This is especially important for the overseas and newly qualified nurse to ensure they are able to provide effective patient-centered care confidently.

**Personal Development and Career Planning (includes appraisals and revalidation)**

Personal development and career planning support the concept that learning is a lifelong activity and that setting goals can help individuals to achieve career and personal aspirations. Personal development planning helps strengthen the capacity of learners to reflect upon their own learning and achievement and to plan for their own personal, educational and career development; it also motivates them to improve their skills which ultimately supports improvements in the quality of patient care.

Employers should be committed to offering learning and development opportunities for their staff providing access to training to extend individual’s range of skills and knowledge to support their staff in taking on new responsibilities and to support career progression. As part of this process staff should be offered an annual personal development review and a personal development plan should be agreed.

For overseas nurses, as with all nurses, midwives and nursing associates registered with the NMC, personal development includes the requirement to revalidate every three years to be able to maintain their registration with the NMC. Revalidation is straightforward and helps demonstrate that the nurse is practicing safely and effectively, allowing them to reflect on the role of the Code in their practice and to demonstrate that they are 'living' the standards set out within it.

The professional development workbook for overseas nurses that has been developed as part of this best practice guidance provides an outline on next steps in relation to post registration considerations and revalidation, and what the overseas nurse should expect as part of their post UK registration personal and career development. The workbook includes information on Continuing Professional Development (CPD) requirements and outlines the development and career conversations that commenced on pre-employment, which may include specialty training aspirations; post UK registration conversations should build on these.

**Feedback and evaluation**

While it is recommended for employers to capture the overseas nurses’ experience 6 months after their arrival to the UK, it is also good practice for the managers to provide feedback on the newly appointed overseas nurses.

**Good practice example**

**Trust 1: Great Ormond Street Hospital NHS Foundation Trust** host monthly ward managers meetings which are held by Nursing Workforce. In these meetings, key stakeholders are often invited (Education and Recruitment) in where feedback and key themes of our International Nurses experiences are regularly discussed. This allows managers to reflect on their experiences to ensure plans are put in place to make sure their pastoral care is at the highest quality.
Useful information and Resources

English Language Requirements

Occupational English Test (OET) - This is a test of English for Healthcare. Candidates listen to patient consultations, workplace conversations and medical talks; read a range of healthcare-related texts; write a referral letter; and participate in role play as a nurse. OET is scored from A (best) to E. Nurses must ensure they achieve the following grades: at least a grade C+ in the Writing section, and at least a grade B in the Reading, Listening and Speaking sections. The NMC accept OET on Paper, OET on Computer and the OET@Home.

International English Language Test (IELTS) - This is a test of Academic English. Candidates listen to conversations in everyday and education settings as well as an academic lecture; answer questions on a range of academic texts; write a data report and an academic essay; give a presentation and answer questions on both familiar and abstract subjects. IELTS is scored from 9.0 (best) to 0. In the UK nurses need a score of 7.0 in listening, reading, and speaking and a score of 6.5 in writing.

Nursing and Midwifery Council (NMC)

Visit the NMC website for further information about joining the UK register and for information around the NMC nursing exam blueprint.

Computer Based Test (CBT)

For more information, please read the CBT candidate information booklet.

NMC approved OCSE test centers

Visit the university websites for further information for candidates and trainers:

- University of Northampton
- Oxford Brookes University (Oxford campus and Swindon campus)
- Ulster University (Northern Ireland, Derry-Londonderry).
- Northumbria University
- Leeds Teaching Hospitals NHS Trust

On these sites you will find:

- The Candidate Journey Map
- A Candidate Information Booklet
- Top Tips booklets for each field of nursing and midwifery
- Mock Scenarios for each field of nursing and midwifery
- Marking Criteria for each field of nursing and midwifery
- Information about costs, how to book the exam and location maps
- Train the trainer course contact details.
Each test center has its own on-line learning platform which candidates can access for information and guidance on OSCE documentation and support materials including observation charts used in the examination, reading lists specific to field of practice, Weblinks, e-books (accessed via the digital library) and individual station template examples.

**NHS Employers**

Series of films to support overseas nurse transition:


https://www.youtube.com/watch?v=wSq6PTKVwf8&index=2&list=PLrVQaAxyJE3cV_yq4gamiFN A-yUxEw555

**Health Education England (HEE)**

HEE has launched a [series of films](https://www.nhsemployers.org/news/2018/02/new-resource-launched-to-support-transition-into-uk-nursing-practice) for overseas nurses and their trainers to help support transition and integration into UK practice.

The new resource consists of several training videos aimed at familiarising overseas nurses to UK clinical environments, and to offer some insights and orientation to simulation-based clinical scenarios. The resource is intended to be a support at the point of registration and is not a guide to passing the objective structured clinical examination (OSCE) exam as part of the Nursing and Midwifery Council part 2 test of competence. It does however offer tips and signpost to references that may be beneficial in preparing for the OSCE exam.
Appendix

Appendix 1: “Connecting Cultures”

- They more commonly use “How are you?” instead of “Are you alright?”. If people ask them “are you alright?” they may at first feel like they do not look okay or there is a problem.
- Saying “Thank you” instead of “cheers!”
- Using Mister or Mrs plus surname is what they were strongly suggested to use as a sign of respect rather than just by addressing people by their first names.
- Breaks are a luxury time for them. So they always need prompting to go on breaks because they usually do not have the chance to take it.
- They are rice eaters! So they use spoon with fork rather than knife. They need something to scoop the rice.
- They don’t mean to be rude if they do not often ask questions when asked “do you have any questions?” as they usually ask someone else rather than the person asking the question.
- They don’t mean to be rude if they don’t talk when our attention is not called, they just feel uncomfortable joining in conversations.
- Also, when they are silent, it doesn’t mean they don’t agree or they are being rude. They may just be having a hard time expressing their thoughts. But they try to talk as much as they can.
- “Let’s eat!” you often hear them invite people to partake in their meal.
- When at work, they just hustle. They don’t normally check on others often. They are not used to asking colleagues how they are, where they spent their holiday, or how they spent their weekend.
- Nurses from India usually move their heads from left to right as a non-verbal yes rather than moving their head up and down.
- People who practice Muslim faith pray 5 times a day usually around these timings (6am; 1 pm; 3pm; 6:15pm and 7:35pm).
- Do you know your colleagues practicing the Muslim faith do not eat or drink (not even chew gum) during dawn until dusk during Ramadan. You might consider putting them on night shifts during this time.
- They love taking pictures and videos! It is their only way to get our families back home updated of how they are doing.
- Nurses from the Philippines value physical touch so they like to pat in the back or slap someone in the shoulder. They use this to show they are comfortable with someone at work. Their intention is in no way sexual or sensual. Whereas it makes a woman from the Middle East uncomfortable if you touch their shoulders.
- Female nurses practicing Muslim faith use Hijab to cover their hair and shoulders and may also feel uncomfortable if a male colleague would touch their shoulders.

Holidays to consider

<table>
<thead>
<tr>
<th>Country</th>
<th>Holiday</th>
<th>Dates</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tibet</td>
<td>14th Dalai Lama’s birthday</td>
<td>07 July</td>
</tr>
<tr>
<td></td>
<td>Losar (Tibetan New Year)</td>
<td>05 March 2022</td>
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</tbody>
</table>
### Philippines
- Christmas and New Year’s Eve
- Ash Wednesday
- Lent
- Their own birthdays
- Birthdays of their loved ones
- Filipinos usually celebrate it on the eve and will be happy to work 25 and 26 December as well as 01 January.
- 02 March 2022*
- March to April 2022* An estimated 92.5% of Filipinos are Christians
- They love to celebrate their birthdays
- They sometimes celebrate with their families virtually and even do their own little celebration here in the UK.

### Indians
- Onam
- Diwali (*Hindu*)
- 08 Sept 2022 *
- 24 October 2022 *

### Middle East
- Ramadan (*Muslim faith*)
  - Eid Al Fitr (*Muslim faith*)
    - Big feast to mark the end of Ramadan fasting
  - Eid al Atha (*Muslim faith*)
    - Commemoration of prophet Ibrahim’s absolute dedication to Allah
- Nurses practicing the Muslim faith will be abstaining from eating or drinking from dawn to dusk for 30 days. It is recommended for managers to direct these nurses to a multi-faith room or a quiet space for prayers.
- 02 April to 01 May 2022*
- 02 to 04 May 2022*
- 09 to 13 July 2022*

### Nepal
- Dasain (*Hindu and Buddhist*)
- Tihar Festival (*almost similar to Diwali*)
- 02 to 07 October 2022*
- 25 to 27 October 2022*

*Dates may vary each year.*