# Supporting Success for International Medical Graduates



# A TRAINERS GUIDE

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# Supporting Success for International Medical Graduates



Medicine is intrinsically linked to cultural norms and values, reflecting the unique societal context of each region. As a result, international medical graduates must adapt and relearn their practice to align with the cultural nuances of the new healthcare environment.

The training of international medical graduates presents unique challenges and rewards.

Identified difficulties include cultural integration, communication skills, and variations in medical culture, such as a paternalistic approach, and challenges related to accepting feedback and constructive criticism.

The rewards are - getting to know and appreciate a new culture and a different mindset, alongside the privilege of playing a role in the success story of the trainee.

We have focused on four main categories.

Cultural Integration and Inclusion	Communication	Patient-centred Consultations	Constructive Feedback
Awareness of challenges IMG faces to adapt to a new culture.	Techniques for overcoming language barriers	Understanding verbal and non-verbal cues	Cultural sensitivity in feedback delivery
Strategies for creating an inclusive training environment.	Importance of clear, non-idiomatic language	Promoting empathy	Structured feedback sessions
Activities to promote cultural challenges and understanding	Role-playing scenarios for practice	Shared decision making	Encountering a growth mindset through positive reinforcement

# **Resources:**

- 1. Resources for IMGs and IMG trainers in Scotland
- 2. Royal College of General Practitioners (RCGP) Resources
  - RCGP offers various resources including <u>online courses</u>, workshops, and publications tailored for GP trainers.

## 3. GP Training Websites

-Websites like <u>GP Online</u> and <u>GP Notebook</u> offer a range of resources including articles, case studies, and educational tools specifically designed for GP trainees and trainers.

# 4. Educational Journals

- Journals like "<u>Education for Primary Care</u>" and "<u>The Clinical Teacher</u>" publish articles and research on effective teaching methods and curriculum development in primary care.

#### 5. Medical Education Conferences

- Attending conferences such as the RCGP Annual Conference or the Association for Medical Education in Europe (AMEE) Conference can provide valuable insights into best practices in medical education and networking opportunities with other GP trainers.

# 6. Online Learning Platforms

-Platforms like <u>Health Education England</u> e-Learning for Healthcare offer online courses and modules covering various aspects of medical education and training.

## 7. Continuing Professional Development (CPD) Courses

-Engaging in CPD courses focused on medical education and teaching skills can help GP trainers stay up-to-date with the latest trends and techniques in training delivery.

# Fostering Cultural Integration and Inclusion



# Awareness of challenges International Medical Graduates (IMG) face to adapt to the new culture:

It's really important that we acknowledge the unique hurdles IMGs face as they adjust to a new culture and professional environment. By recognising these challenges, we can tailor support to meet their specific needs, helping them feel more at home in their new setting.

Some of the challenges they face -( not exhaustively).

- A Adjusting to New Medical Protocols: IMGs come from diverse medical backgrounds, which might differ significantly from what they find here. Adapting to new ways of doing things, from using different technologies to following unfamiliar patient care protocols, can be a big step for them. It is imperative that they have access to the protocols in place from the very beginning to get themselves familiarised with them.
- **D** Dealing with Loneliness: Moving to a new country can be lonely, especially if IMGs are far from family and friends. This loneliness can impact their emotional well-being, making it harder to focus and thrive professionally.
- **O Overcoming Cultural Differences**: Cultural norms vary widely, affecting everything from how disagreement is expressed to the approach toward hierarchical relationships in social life and in the workplace. Misunderstandings in these areas can lead to feelings of discomfort or even disrespect.
- **R Regulations** Understanding Local Regulations: The process of getting their qualifications recognised and learning the legal aspects of practising medicine here can be overwhelming and disheartening for IMGs. Likewise, understanding local laws and how life is organised in the new environment can be a stressful process.
- *N Navigating Language Nuances:* Even when IMGs are fluent in the language, they might find medical jargon, local slang, or regional accents tricky. This can make conversations with colleagues and patients more challenging than expected.

## **Strategies for creating an inclusive training environment:**

We should aim to cultivate a training environment that values and utilises cultural differences. This could involve creating opportunities for everyone to share their cultural backgrounds and experiences. Here are some ideas:

- Support Through Mentorship: Establish a mentorship program where seasoned local medical professionals mentor IMGs and can provide invaluable guidance. This support system can help IMGs navigate the cultural norms of their new professional environment and offer a friendly ear for their concerns.
- Open Lines of Communication: Regularly gathering feedback from IMGs about their integration experiences can really help us fine-tune our approach. It's a chance for IMGs to voice their needs and for us to adapt and improve our strategies.
- *Team Projects:* Encouraging IMGs and other staff to collaborate on projects can be a great way for everyone to work towards common goals and deepen mutual respect. These projects could be clinical or research-based, offering shared learning or fun things like bring food to work.

# Promote cultural understanding:

Organising social events, cultural competency workshops, or pairing IMGs with UK peers can help bridge cultural gaps and build camaraderie. <u>Facilitating international medical graduates'</u> acculturation: From theory to practice



# Communication

Communication is a fundamental skill in medical practice and difficulties with communication will impact the outcomes of the consultation.

While International Medical Graduates (IMG) are obliged to pass a proficiency test in English, this doesn't necessarily equate to being able to communicate effectively in the consultation and the broader medical context. Even between English-speaking countries, there are differences in the English is spoken and understood, including differences in meaning, idiom, nuance, verbal and non-verbal cues, what is and isn't appropriate to say in a given context, and social norms. IMGs will frequently identify these aspects of language as problematic, as opposed to limited vocabulary and difficulties with syntax.

Language proficiency requires verbal skills and nonverbal skills. These aspects are to be observed and improved where needed.

#### **Verbal Skills:**

- Using and understanding the language:
- Command of English pronunciation, accent, vocabulary, fluency, contextual meaning
- Understanding patient's pronunciation, intonation and use of idiom, slang and humour; nuances and cues

There is a 'thinking-translation' process to be considered where the trainee thinks in their native language and translates thoughts into English, which could delay response times and signal understanding. It takes time to overcome this.

#### Non-verbal skills:

- Body language
- Written fluency (<u>clarity with medical records</u> as per NHS guidance- the knowledge of what a
  high-quality record is about -complete, concise, accurate, relevant, accessible, and timely.
  MDU offers advice on how to keep good <u>records</u>.

# Strategies to overcome language barriers:

- Medical English tutoring lessons for trainees to explore
- Listen to podcasts of trainee preference to get familiarised with general English pronunciation, clean language usage, topics of local interest
- Listen to local radio programs
- Watching British television programs

# Importance of clear, non-idiomatic language:

 Website tailored to address <u>IMG communication needs</u> and offer resources on the language used in different clinical settings

## **Role-playing scenarios for practice:**

Bradford VTS website offers brilliant examples to explore.

Another great option is <u>OSCE revisions</u> on YouTube, with more than 1000 videos to choose from-important to note is that the medical information is at medicine student level.

- Viewing a substantial number of consultation videos is the most practical, easy-to-access and useful resource for enhancing communication skills.
- It facilitates a deeper comprehension of the UK's medical culture, patient expectations, and the role of physicians.
- It is an effective educational tool for observing and analysing the nuanced interactions and cultural dynamics in medical practice.

# Patient-centred consultations



International medical graduates must adapt and relearn their practice to align with the cultural nuances of their new healthcare environment.

They often come from cultural settings that value medic-centred consultations and a paternalistic approach.

To adapt to the UK's medical setting consultation style they will need to understand the value of:

- good communication
- empathy that requires an understanding of the cultural setting and doctor-patient relationships in UK culture
- shared decision-making skills

# **Understanding verbal and non-verbal cues:**

See communication resources

## **Promoting empathy:**

- Expression of Empathy is very intrinsic to one's culture observing how the trainee shows and displays empathy is an important step in successful training. In expressing empathy somrething that would be culturally inaproriate it's noticed, helping the trainee to recognise and ammend that it's very important.
- Watch real patient consultations and discuss how empathy was demonstrated, what empathic opportunities might have been missed, and how they might respond in similar situations.
- Role-playing exercises of different clinical scenarios with the trainee as a patient to help them understand the patient's perspective and feel what it might be like to be in a vulnerable position.
- Shadowing a Colleague: trainee to shadow a colleague recognised for their empathetic communication skills to observe effective empathy in practice
- *Mindfulness Moments:* Before entering the patient's room, providers take a brief moment to clear their mind of distractions and focus on being present and attentive to the patient's needs.

# **Shared decision-making:**

UK medical culture values patient at the ceter of the medical decision, a shared decision model of consultation is the norm. This might not be the same in the medical cultures of your IMG's.

It is therefore important for the IMG to understand the importance of shared decision plan, by providing information and explanations clearly and concisely, tailoring them to the patient's contex.

## **Decision Aids Examples:**

- Shared decision-making tool
- Shared decision-making (menstrual bleeding)
- 1. *Pros and Cons Lists*: a simple and clear tool to explore the advantages and disadvantages of different treatments for common conditions.
- 2. *Treatment Option Cards*: ask the trainee to research cards that list different treatment options for a condition along with simple pros and cons that a patient can physically handle and use as a visual aid in a discussion.
- 3. *Checklists*: Pre-appointment checklists (now more common in the e-consult era) that patients can fill out indicating their symptoms, preferences, concerns, and questions they have about potential treatments.

For providing information and explanations fluently and effectively, one useful way of becoming more practised is for the IMG to pick a topic, learn it and then say it out loud using their own words.

There are several ways in which this may be done:

- talking to a mirror
- audio recording and playing back, and repeating this until they not only 'get it right' but feel more comfortable saying it
- saying it to a relative or friend who can give them feedback on how it was said but also on whether they understood the information.

#### **Additional Resources:**

 A guide to understanding and managing performance concerns in international medical graduates



# Constructive feedback

The way we give and receive feedback differs significantly across cultures. When we prepare for feedback it is important to know these cultural differences - to avoid misunderstandings.

The general principles of giving effective feedback should always be followed, no matter the context.

It is very important not to hesitate to give feedback, due to worries about misunderstandings or being perceived negatively.

Feedback is crucial for learning and growth. By offering constructive feedback, the trainee is helped to improve and succeed. Avoiding this hinders their progress.

How to prepare a successful feedback session:

## **Establish Trust:**

- **Build Relationships:** The single most important part a trusting relationship. Recognise the **IMG background** and their strengths (see hello supervisor form)
- Encourage their strengths

## **Prepare for Feedback:**

- *Clear Expectations:* Clearly outline expectations and standards from the beginning to avoid ambiguity.
- **Self-Reflection**: Encourage IMGs to self-reflect on their performance and identify areas they feel the need to improve.

## **Delivering Feedback:**

- **Direct and Indirect Approaches:** it is useful to be aware of the cultural preferences for direct versus indirect feedback.
  - Discussing this before it is needed, is recommended. For some cultures, direct feedback is appreciated, while others might find it confrontational.
- *Positive Reinforcement*: Start with positive feedback, highlighting what the IMG is doing well before moving on to areas for improvement.
- *Specific Examples:* Provide specific, behaviour based examples rather than general comments to make the feedback tangible and actionable.

• **Shared Decision Making:** Involve the IMG in creating an improvement plan, ensuring they understand the feedback and feel part of the process.

#### **Follow-Up:**

- *Action Plan:* Develop an action plan with clear, achievable steps and timelines. This can include additional training, shadowing, or mentoring opportunities.
- *Ongoing Support:* continuous support and opportunities for IMGs to ask questions and seek clarification as they implement the feedback.

## **Encourage a Feedback Culture:**

- *Two-way Street:* Encourage IMGs to see feedback as a two-way street, where they can also provide feedback to trainers and peers, fostering a culture of open communication.
- *Normalisation*: Normalise the process of giving and receiving feedback as part of professional growth and not as punishment or criticism.

#### **Evaluate and Reflect:**

- *Reflective Practice*: Encourage IMGs to maintain reflective diaries/logs to reflect on the feedback received and the actions taken as a result.
- *Regular Check-ins:* Schedule regular follow-up meetings to discuss progress, reassess goals, and provide additional feedback.

## **Additional Resources:**

- Provide Resources: Share resources that can help IMGs understand feedback better and improve their performance, such as online modules or workshops.
- Improving feedback and reflections to improve learning
- Strategies for giving effective feedback
- Feedback in medical education a workshop report with practical examples and recommendations