



Feidhmeannacht na Seirbhíse Sláinte  
Health Service Executive

Oifig an Stiúrthóra Náisiúnta, Acmhainní Daonna  
Feidhmeannacht na Seirbhíse Sláinte  
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HSE HR Circular 021 /2012

4<sup>th</sup> December, 2012.

**To:** Each Member of Management Team, HSE;  
Each Regional Director of Operations, HSE;  
Each Regional Assistant National Director of Human Resources, HSE;  
Each Employee Relations Manager, HSE;  
Each CEO & HR Manager, directly funded Voluntary Hospital / Agency.

**Re:** a) English Language Competency for NCHDs  
b) Doctors registered on the Supervised Division  
c) Immigration Arrangements for non-EEA Doctors from 1 November 2012  
d) Clinical Observerships

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## **a) English Language Competency for NCHDs**

The extent to which Non-Consultant Hospital Doctors (NCHDs) were required to provide evidence of English language competency was previously set out in a memo from Andrew Condon dated 21<sup>st</sup> December 2010. This Circular updates the position.

### **1. Required language competency**

The ability to communicate clearly with patients and colleagues is a key requirement for all healthcare professionals. In the case of doctors providing clinical care to members of the public, the ability to communicate is particularly important.

Proficiency in the English language is therefore a core competency for NCHDs working in the Irish public health service.

Under Section 6 'Standard duties and responsibilities' of NCHD Contract 2010, NCHDs are required to be able to communicate effectively with patients and clients; and comply with statutory and regulatory requirements, corporate policies and procedures and human resource policies and procedures.

### **2. Previous requirements for non-EU/EEA NCHDs and Interns**

Previously, the Medical Council required that non-EU/EEA applicants seeking registration on the Trainee Specialist Division or the General Division of the Medical Register pass or be exempted from the academic International English Language Testing System (IELTS). An overall score of 7.0 was required.

Separately, the HSE required that persons taking up Intern posts from July 2011 who did not complete the entirety of their undergraduate medical training in the Republic of Ireland<sup>1</sup> must demonstrate their

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<sup>1</sup> Medical students who undertake their medical degree in a Medical School in the Republic of Ireland but who partake in short electives overseas or in Erasmus programmes overseas as a recognised and approved element of their medical degree are deemed to have completed their degree in an Irish Medical School and are not required to submit an IELTS certificate.

proficiency in the English language through the submission of certification from the IELTS. An overall score of 7.5 is required, with a minimum score of 7.0 in each domain of the academic test is required.

### 3. Medical Council no longer assess English Language competency prior to registration

However, Section 35 of the Medical Council's 'Guide to the Application Procedure and Registration Rules for Registration in the Register of Medical Practitioners' (August 2012) states:

#### "35. ENGLISH LANGUAGE PROFICIENCY

35.1 Under EU freedom of movement legislation, the Medical Council is not entitled to require evidence of English language proficiency from EU citizens, established in another member state, moving to Ireland to practise medicine. Employers should satisfy themselves that all medical practitioners employed by them have sufficient English language skills to perform their duties and communicate effectively with patients and colleagues. Paragraph 12.1 of the Medical Council's Guide to Professional Conduct and Ethics states: "If you do not have the professional **or language skills**....you **must** refer the patient to a colleague who can meet those requirements." If an employer finds that a registered medical practitioner does not have sufficient English language skills to practise medicine, they should make a formal complaint to the Medical Council. It may be considered professional misconduct if a medical practitioner is unable to communicate effectively with their patients and colleagues."

While the text references EU citizens, the Council no longer requires the IELTS from non-EU/EEA citizens. In effect, while the Council regard English language skills as necessary to practise medicine in Ireland, they are no longer assessing English language competency as part of the registration process for the General, Trainee Specialist or Specialist Division.

### 4. New requirements for NCHDs applying for training posts

Taking this into account, the HSE has required that all applicants applying for NCHD positions through the postgraduate medical training bodies must provide the following:

- i. confirmation of completion (in its entirety<sup>2</sup>) of a medical degree in a country where English is the primary language spoken by the vast majority of the people of that country.
- or
- ii. IELTS (International English Language Testing System Academic Test) Certificate with an overall band score of 7.5 and a minimum score of 7.0 in each of the four domains on the academic test.

All training bodies are required to enforce this requirement in considering applications for training positions on accredited training programmes.

### 5. New requirements for NCHDs applying for non-training posts

This requirement is also being applied to applicants for non-training posts. As of 15<sup>th</sup> October 2012, applicants for NCHD posts being recruited by HSE or HSE-funded hospitals or agencies who were not registered by the Medical Council in any of the General, Trainee Specialist or Specialist Divisions of the Register prior to 9<sup>th</sup> July 2012 must provide the following:

- i. confirmation of completion (in its entirety<sup>3</sup>) of a medical degree in a country where English is the primary language spoken by the vast majority of the people of that country.
- or
- ii. IELTS (International English Language Testing System Academic Test) Certificate with an overall band score of 7.5 and a minimum score of 7.0 in each of the four domains on the academic test. Further information regarding the IELTS and Irish test centres is available from <http://www.ielts.org>.

### 6. Application of a test where concerns arise regarding language competency

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<sup>2</sup> As per footnote 1

<sup>3</sup> As per footnote 1



At any time, should concerns arise regarding the English language competency of an NCHD and where the NCHD has not demonstrated English language competency under the IELTS, HSE and HSE-funded agencies may seek to assess the language competency using the IELTS. This applies to NCHDs in designated training posts and non-training posts. An IELTS certificate should be considered valid if it is obtained within the previous two years of the required date of submission to the employer.

As noted above, Section 6 of NCHD Contract 2010 requires that the NCHD be able to communicate effectively with patients and comply with corporate policy and procedures. Should the NCHD not obtain the required score under the IELTS, the Employer may wish to consider remedial or other action under NCHD Contract 2010.

## **b) Doctors registered on the Supervised Division**

The Medical Practitioners (Amendment) Act 2011 provided for the introduction of the Supervised Division of the Register of Medical Practitioners maintained by the Medical Council. To date, over 200 doctors have been registered on the supervised division and have been employed in positions in hospitals and services across Ireland.

The Act specifically highlights the requirement that the posts proposed to the Medical Council for the appointment of supervised division doctors must incorporate adequate arrangements for the supervision of the medical practitioner in the performance of his or her duties in the post, having regard to the level of experience of the practitioner.

The HSE has received some reports that in some cases, adequate supervision is not being provided to doctors registered on the supervised division and employed in positions in the Irish health service. This is a serious patient safety concern and could also affect the registration status of such doctors and, consequently, their ongoing provision of services.

All employing authorities must ensure that adequate supervision arrangements are provided to supervised division doctors by more senior colleagues in order to ensure that the legislative requirements associated with these posts are met and that patient safety is assured.

## **c) Immigration Arrangements for non-EEA Doctors from 1 November 2012**

The following sets out the immigration arrangements for Non-EEA Doctors recruited to the Public Health Service from 1<sup>st</sup> November 2012.

### **1. General issues**

Following a review of immigration registration arrangements in place since June 2010, the Irish Naturalisation and Immigration Service, the Department of Jobs, Enterprise and Innovation, the Department of Health and the Health Service Executive have agreed the following arrangements regarding employment permits and immigration registration for non-EEA doctors who are recruited to the Irish Public Health Service. These arrangements will be subject to review after 12 months.

### **2. Conditions**

Please note that failure to comply with these conditions may result in immigration permission being revoked:

- No doctor may take up employment in any capacity until he/she is registered with the Medical Council of Ireland.
- No doctor may take up employment in any capacity until he/she is registered with the Garda National Immigration Bureau and lawfully holds a Certificate of Registration (GNIB card).
- The Employment Permit arrangements where applicable must be complied with.
- Doctors employed in the State must ensure that they are tax compliant.

- All hospitals should satisfy themselves that the doctor has complied with the above requirements prior to engaging him/her in employment.

### 3. Immigration Registration Arrangements

The following arrangements apply as and from 1 November 2012.

Doctors who present to the Garda National Immigration Bureau or their local immigration registration officer on or after 1 November 2012 for first-time registration or renewal may be registered on production of the following documentation:-

- a valid passport
- a letter of appointment confirming a job/position in the **Public Health Service**
- original Certificate of Registration from the Medical Council (or where the Certificate of Registration is pending, a print-out from the Medical Council's Register endorsed by the HSE or employing hospital will be accepted).

On registration, Stamp 1 will be given for 2 years. **There are 3 exceptions to this -**

- Interns will be given Stamp 1 for 12 months.
- Doctors registered in the Supervised Division of the Medical Council's Register will be given Stamp 1 for 12 months.
- Doctors who hold Stamp 4 may be renewed on Stamp 4 for 2 years.

### 4. Employment Permits

Based on the Division of the Medical Council Register the following arrangements apply:

- Employment Permit required from the Department of Jobs, Enterprise and Innovation
  - Trainee Specialist Division - Internship Registration
  - Doctors in General Division (excluding Senior House Officers and Registrars)
  - Specialist Division
  - All doctors in private hospitals
- Employment Permit not required from the Department of Jobs, Enterprise and Innovation
  - Other doctors in the Trainee Specialist Division
  - General Division - Non-EEA non-Consultant Hospital Doctors with a job offer as a Senior House Officer or Registrar
  - Holders of immigration permission Stamp 4

The onus rests with the HSE/hospital to ensure that Employment Permit requirements are complied with.

### 5. Locum Doctors

These arrangements do not apply to locum doctors. The existing arrangements continue to apply to this category.

### 6. Private Hospitals

Doctors not working in the Public Health Service may be granted immigration permission for 12 months on proof of furnishing a contract of employment. Note that in some cases an Employment Permit may be required.

#### **d) Clinical Observerships**

The Department of Justice has advised the HSE that some doctors are entering the country without permission to work in the State and are being accepted by some hospitals to undertake non-employment clinical observerships. Such arrangements are not provided under the regulations governing working in the State, can cause issues with visas if such doctors are subsequently appointed to posts and, from a HSE perspective, raises concerns regarding patient safety since such doctors are not registered practitioners.

All hospitals are therefore requested to immediately cease the practice of allowing clinical observerships for overseas doctors where the doctor does not have explicit, documented permission - as per the Section B of this circular above - to work in the State.

**Yours sincerely,**

A handwritten signature in black ink, appearing to read 'Barry O'Brien', written over a horizontal line.

**Barry O'Brien**  
**National Director of Human Resources**