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The Complete Guide to Working in the UK for Indian Doctors



Why work in the UK?

Working in the UK is an appealing career option for many Indian doctors, just as Indian doctors are an attractive recruitment proposition for British hospitals and GP surgeries.

The reasons are cultural, historical and practical.

- Most Indian medical schools use similar textbooks and curriculums to the UK, which means knowledge and skills are largely transferable between the two systems.
- More than 20,000 doctors from India already practice in the NHS, providing a useful support network for new arrivals¹. Their cross-cultural awareness is particularly valued by those NHS organisations serving large, multi-cultural populations.
- The NHS is considered one of the top healthcare systems in the world² and there is high international demand for the knowledge and skills acquired by those working in it.



1. GMC: Licenced doctors by country of primary medical qualification
<https://data.gmc-uk.org/gmcddata/home/#/reports/The%20Register/World%20maps/report>

2. E. C. Schneider, D. O. Sarnak, D. Squires, A. Shah, and M. M. Doty, Mirror, Mirror: How the U.S. Health Care System Compares Internationally at a Time of Radical Change, The Commonwealth Fund, July 2017.
https://www.commonwealthfund.org/sites/default/files/documents/_media_files_publications_fund_report_2017_jul_pdf_schneider_mirror_mirror_exhibits.pdf

There has never been a better time to consider working in the UK as a doctor. The NHS currently has more than 9,000 vacant doctor posts³.

The UK government, in its workforce plan for the NHS, has admitted it is reliant on recruiting overseas doctors until 2023 at least. It has removed its Tier 2 visa cap for doctors and nurses wishing to work in the UK and there is pressure from employers to make the registration and language-testing process simpler and smoother for overseas doctors.

For doctors in India, this means enormous opportunities. Working in the NHS would provide highly desired skills, the potential to access high-quality education and training, diverse experiences and better pay.

An average doctor in India can expect between 1,200,000–2,000,000 rupees per annum, equating to approximately £13,500–£22,500.

In comparison, trainees in the UK earn between £27,000–£31,000 per annum for a 40-hour week.

Trainee specialists £37,000 to £47,000. Specialists earn between £39,000 to £73,000. Salaried GPs earn between £57,000–£87,000, although there is no upper limit. Consultants start on £78,000 per annum, rising to as much as £105,000. UK doctors are also paid extra for overtime worked, a 37% increase for nights worked and may receive weekend working and on-call allowances, depending on their contracts⁴.

The average cost of living in the UK for a family of four is about £30,000 per year, although London and south east England will be more expensive.

This level of disposable income, combined with the high conversion rate between pounds and rupees, means many doctors are able to build savings and send significant sums of money back to India.

3. NHS Improvement: Performance of the NHS provider sector for the year ended 31 March 2019
https://improvement.nhs.uk/documents/5404/Performance_of_the_NHS_provider_sector_for_the_quarter_4_1819.pdf

4. Health Careers (NHS)
<https://www.healthcareers.nhs.uk/explore-roles/doctors/pay-doctors>



United Kingdom

₹3,300,000—

₹9,300,000

Doctor salary
range

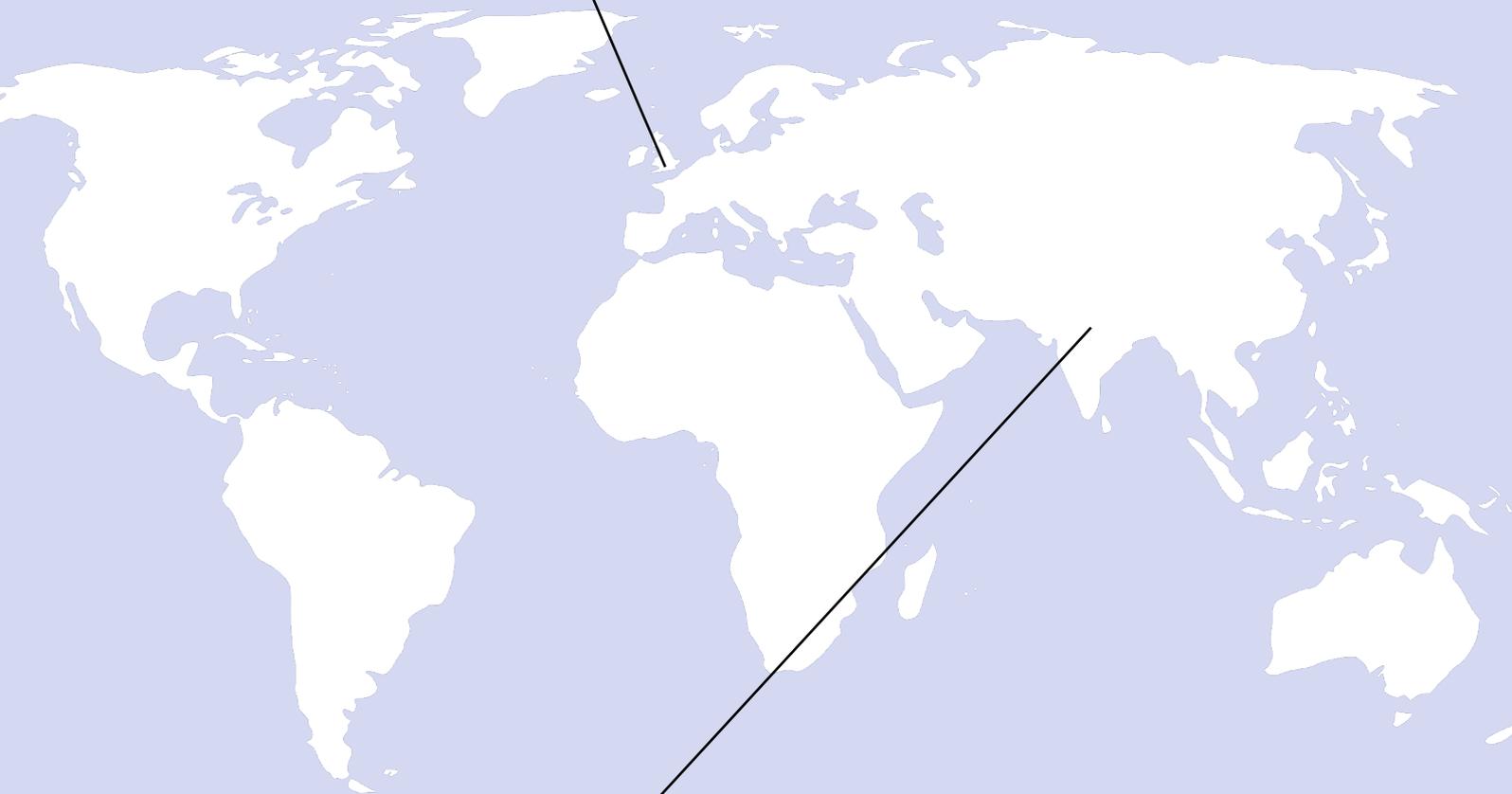
Approximately
£37,000—£105,000

₹2,600,000

Average cost of
living

Approximately
£30,000

Average cost of living in the UK includes rent and living costs for a family of four. Averages out figures for London/Manchester, both urban/suburban



India

₹1,200,000—

₹2,000,000

Doctor salary
range

Approximately
£13,500—£22,500

₹314,000

Average cost of
living

Approximately
£3,500

Average cost of living in India includes rent and living costs for a family of four. Averages out figures for Mumbai, New Delhi, and Chennai

How to get a job in the UK

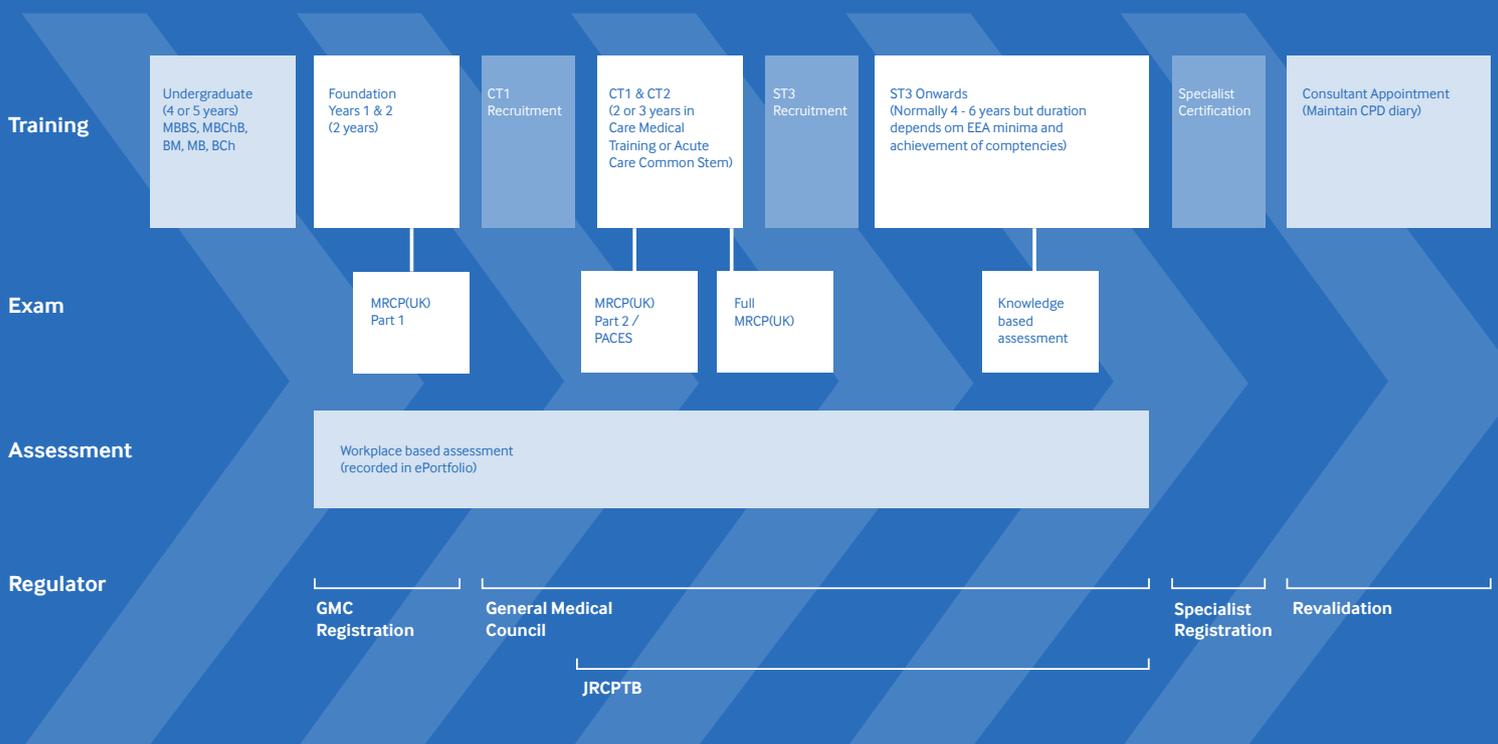
Many Indian doctors report feeling daunted by the process required to work in the UK. The process doesn't need to be unsettling and can be a lot easier to understand when it is broken down into steps. Here is a quick overview, which will be explored in more detail below:

1. Pinpoint where your training and skills best fit in the UK system.
2. Decide on your career goals while in the UK. For example, do you just want the benefit of the excellent training in the UK or would you prefer to live and work in the UK longer term? This will dictate which route you should take. Schemes offering training will help take care of General Medical Council (GMC) registration and visa applications but are usually time limited and doctors must return back to India.
3. Register with the GMC – this will usually involve an exam either with the GMC directly or via a training scheme. The process takes between 2 to 5 weeks to complete.
4. Find a job – you will not be allowed to practise medicine in the UK without your licence from the GMC, so it's unlikely you'll be able to apply without it.
5. Apply for your visa – visas where you are sponsored by an employer are called Tier 2 visas; those where you are sponsored through a training scheme are called Tier 5 visas.
6. Make sure you have saved enough money to get you through the transition period of arriving in the UK and your first pay cheque.

The UK medical training system

The diagram below shows how the medical specialty training process fits with registration process in the UK. It will also help you understand the various grades of jobs on offer in the UK.

The UK Medical Training System



[Click here to view the full size diagram](#)

GMC registration

Doctors are unable to work in the UK until they gain registration with the GMC. There are three types of registration – provisional, full and specialist/GP.

PROVISIONAL REGISTRATION

Provisional registration is only available to those doctors completing the first year of foundation training.

FULL REGISTRATION

Full registration is applied for at the end of the first year of foundation training.

Overseas doctors wanting full registration must:

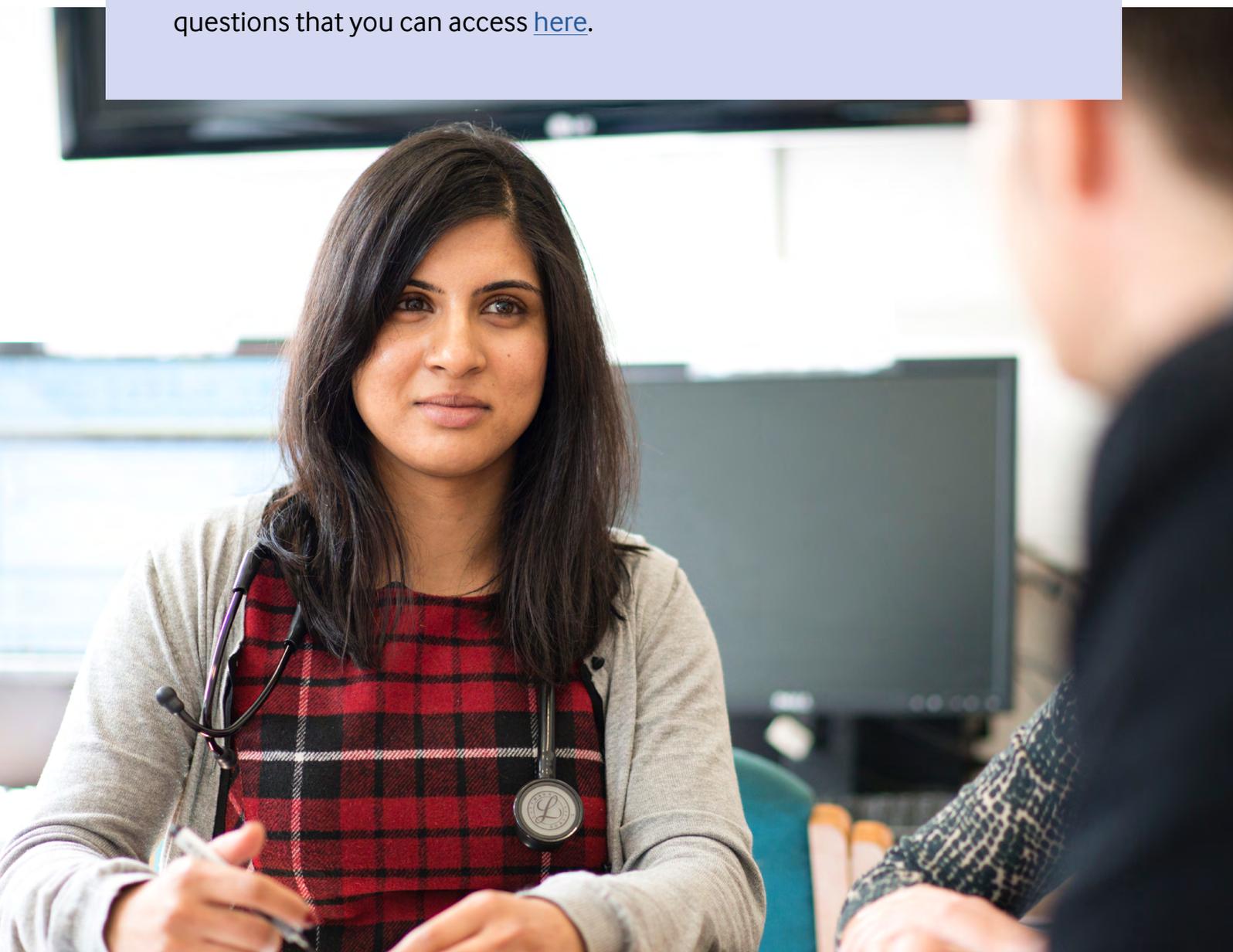
- Provide evidence of a degree awarded by a reputable institution and at least one year of internship experience. The internship must have lasted for a continuous 12 months with at least three months spent in medicine and three months in surgery.
- Have either a valid International English Language Testing System (IELTS) certificate (with a score of at least 7 in each area and an overall score of at least 7.5) or an Occupational English Test (OET) certificate (with a grade of at least 'B' in each testing area).
- Pass the Professional and Linguistic Assessments Board (PLAB) test. This will check that you know as much as and can do the same as a doctor starting the second year of their Foundation Programme training in the UK. You must apply for registration within two years of passing the PLAB test.

What does the PLAB test involve?

PLAB part 1 - PLAB 1 is a written exam made up of 180 multiple choice questions, which you must answer within three hours. Each starts with a short scenario followed by a question. You need to choose the right answer out of the five possible answers given. You can sit this in India at various locations, including Bangalore, Chennai, Hyderabad, Kolkata, Mumbai and New Delhi.

PLAB part 2 - PLAB 2 is an objective structured clinical exam involving live interaction with actors, mannequins and medical equipment. It's made up of 18 scenarios, each lasting eight minutes, and aims to reflect real life settings. Applicants are tested on skills around history taking, physical examination, formulating a diagnosis, establishing a rapport with patients and understanding of ethical principles. Part 2 tests run throughout the year at the GMC's clinical assessment centre in Manchester, UK.

The BMJ offer a PLAB exam revision module with over 1,200 revision questions that you can access [here](#).



SPECIALIST REGISTRATION

Overseas doctors can be added to the specialty or GP register without having completed the UK specialty training posts. This is known as the Certificate of Eligibility for Specialist Registration (CESR) route. Applicants must provide a detailed portfolio of evidence of experience, skills and knowledge, which is then assessed by the relevant Royal College as being equivalent to the current post-graduate qualification.

However, the evidence bundle can often be up to 1,000 pages in total and take 6–9 months to assess. The GMC is pushing to make the process more flexible and simpler so this may improve in the future.

Once on the GMC's register, a doctor's licence to practise is valid for five years.

Finding a Job

There are numerous routes to find jobs in the UK including:

1. Applying for jobs directly via specialist jobs websites, such as BMJ Careers.
2. Registering with a specialist recruitment agency for either permanent or locum work.
3. Winning a place on a specific programme focused on training posts, such as the Medical Training Initiative, run by The Academy of Royal Colleges, or the postgraduate training programme led by the British Association of Physicians of Indian Origin (BAPIO) in association with Health Education England.

Locum posts

A survey from NHS Employers of 45 organisations showed 16 of them recruited from overseas using an agency in 2018⁵.

However, Dr Ramesh Mehta, president of BAPIO, warns that some Indian doctors who arrive in the UK to work as locum doctors have reported being 'thrown in at the deep end' without being given any induction information or pastoral support.

Locum doctors often do not get the benefit of proper supervision nor any time to study for exams and there have been cases of doctors being paid lower rates than doctors working at an equivalent level in the same Trust.

"I would say those doctors who come to the UK to get postgraduate experience and skills must be careful about thoroughly checking these details before they accept locum positions," Dr Mehta warns.

However, the advantages are that the agency organises most of the logistical issues associated with GMC registration and finding work.

Schemes offering training posts

The swiftest career progression is linked to the successful completion of each training post. Training posts allow time for studying and exams and provide suitably qualified supervisors and mentors.

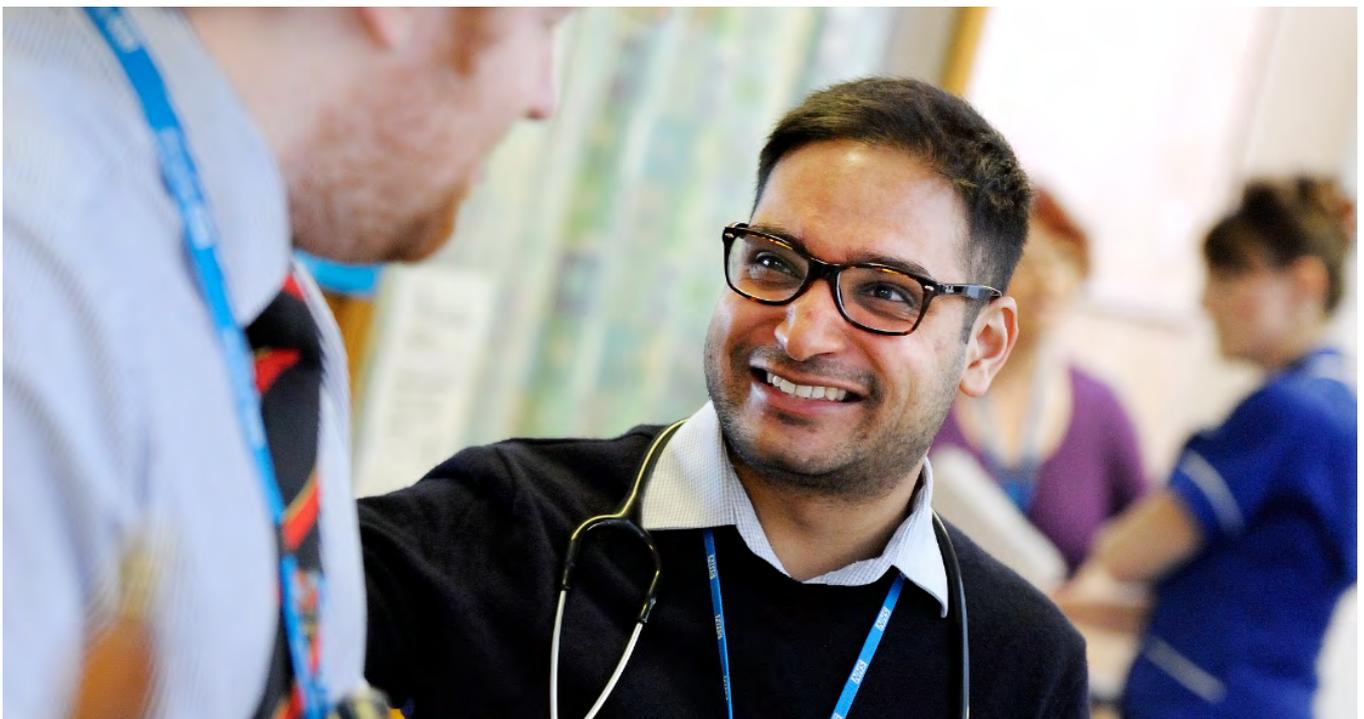
There are a number of schemes that offer training posts to overseas and Indian doctors. The most well-known is the Medical Training Initiative, run by the Academy of Medical Royal Colleges. Recruitment focuses on suitably qualified, overseas, postgraduate medical specialists. Often, they will already have passed

Part 1 membership exams for the Royal College of Physicians while in India. They are recruited to undertake a fixed period of training in the UK before returning back to their own healthcare systems.

BAPIO's postgraduate training scheme is on offer to those who have not achieved relevant postgraduate training in India and offers a route to gain both membership and fellowship in various specialties, as well as leadership and managerial training through a combination of posts in both India and the UK for fixed terms (between 2–4 years).

The advantage of these options is the high-quality education, the intensive preparation, mentoring and support provided to eligible doctors. The organisation running the scheme usually takes on all the logistical and administration details required for GMC registration and sponsors all visa applications.

However, most of these schemes operate on time-limited Tier 5 visas, which last only two years. The aim is to provide doctors with increased education and skills that can be taken back to benefit the Indian healthcare system.



Applying directly for posts via specialist jobs sites

Most employers are used to overseas doctors applying for vacancies and will conduct interviews to assess for themselves if an applicant has the skills and knowledge to undertake the job.

Most require GMC registration, or evidence the applicant is in the process of registering with the GMC.

Overseas doctors can apply for posts at any grade, provided they have the correct GMC certification, skills and experience. 'Non-training jobs' or 'locally employed doctors' are roles that work at Foundation Year (FY), Core Training (CT) and Specialty Training (ST) grades but do not count towards training experience.

These opportunities arise because hospitals often need more doctors than there are training posts in order to ensure they are fully-staffed. While a training post in a specialty may only last six months, non-training posts will not have a time limit.

If applicants are careful about ensuring the job they apply for has proper supervision, these jobs are a useful way to gain the experience and skills necessary to successfully apply for training roles, as and when they come up.

Top tips to finding a job in the UK

- Register with a job site, such as BMJ Careers, that focuses on medical vacancies and upload your CV.
- Set up job alerts to be notified about relevant jobs at the grade, location or salary level you are interested in.
- Ensure you have video conferencing facilities on your phone as many employers are happy to conduct a first interview via video link.
- Try and block-book second stage interviews so you can get them all done in a single trip to the UK. Most employers will be understanding and try to work with your timetable. This will also allow you to gain an understanding of the different areas of the UK and see the hospitals you may be working in.

Top tips for interviews

- Research and ensure you have a thorough understanding of the NHS. We have included a list of useful resources and links at the end of this document that should help.
- Employers will generally ask about your qualifications, skills and work experience. They may also ask questions about ethics and your understanding of clinical audit, clinical governance and research.
- Employers may also ask scenario-based questions and how you would approach typical cases, including emergency cases.

Immigration and visa processes

Once a job offer is made, you will need to gain your visa.

Most medical jobs need a Tier 2 visa, which requires sponsorship by an employer.

The employer will issue a certificate of sponsorship and this must be used to apply for permission to enter the UK. If any other new employment is sought, a new certificate of sponsorship will be required.

Depending on the salary level of the job, and the start date, the UK Home Office may also require applicants to provide evidence of additional available funds to support themselves and any dependents, in the UK.

If the application is successful, individuals will be granted leave to enter or remain in the UK for up to five years.

Doctors can apply to settle permanently in the UK after five years of continual residence, provided the employer still requires them and they have reached the minimum earning threshold of £35,800.

It should be noted that while this figure is correct as of September 2019 it may well change with time – you should always be sure to check the most recent information from Gov.uk [here](#)

Those transferring into training posts will have their visas sponsored by Health Education England or the relevant royal college, not their employer. Trainees will not need to apply for new sponsorship if they change employers/location in England during their training.



What's it like?

Two Indian doctors who have recently made the move to the UK talk about their experiences.

Dr Amey Tamhane



"I come from Pune, near Mumbai, and I work in ophthalmology surgery. I wanted to work in the UK because of the quality of the education and practice here. Quality of practice is not necessarily appreciated by patients in India who only care about the outcome. Also, I did not like having to make decisions about treatments that had to fit the budget of the patient.

To practice privately in India I have to buy my own equipment and in my field, that is very expensive. But without the best equipment it is difficult to provide high-quality care.

So I applied to the Medical Training Initiative (MTI) and had an interview in Delhi with Dr Parag Singhal where I was mostly asked about my surgical experience. After a few months, I was notified there was a specialty training place (ST3) available in Yeovil, a town in the south west of the UK.

I was interviewed by the consultant in the ophthalmology department and I liked the sound of what they were doing in Yeovil and so I was offered, and accepted, the job.

The MTI is a two-year programme but in that time I intend to do my exams to become a member of the Royal College of Ophthalmology which will help my application for a Tier 2 visa.

I've been working in the UK for just over a month now and so far the reality has lived up to my expectations. I think I was prepared very well by BAPIO and Dr Parag Singhal who have been really helpful and supportive and gave me a lot of confidence to make the move.

The way you practice with patients here is similar to India. The main difference I've noticed is that patients can't just make an appointment with a specialist doctor, they must be referred by their GP. I think perhaps this is better as I am only treating patients who need it.

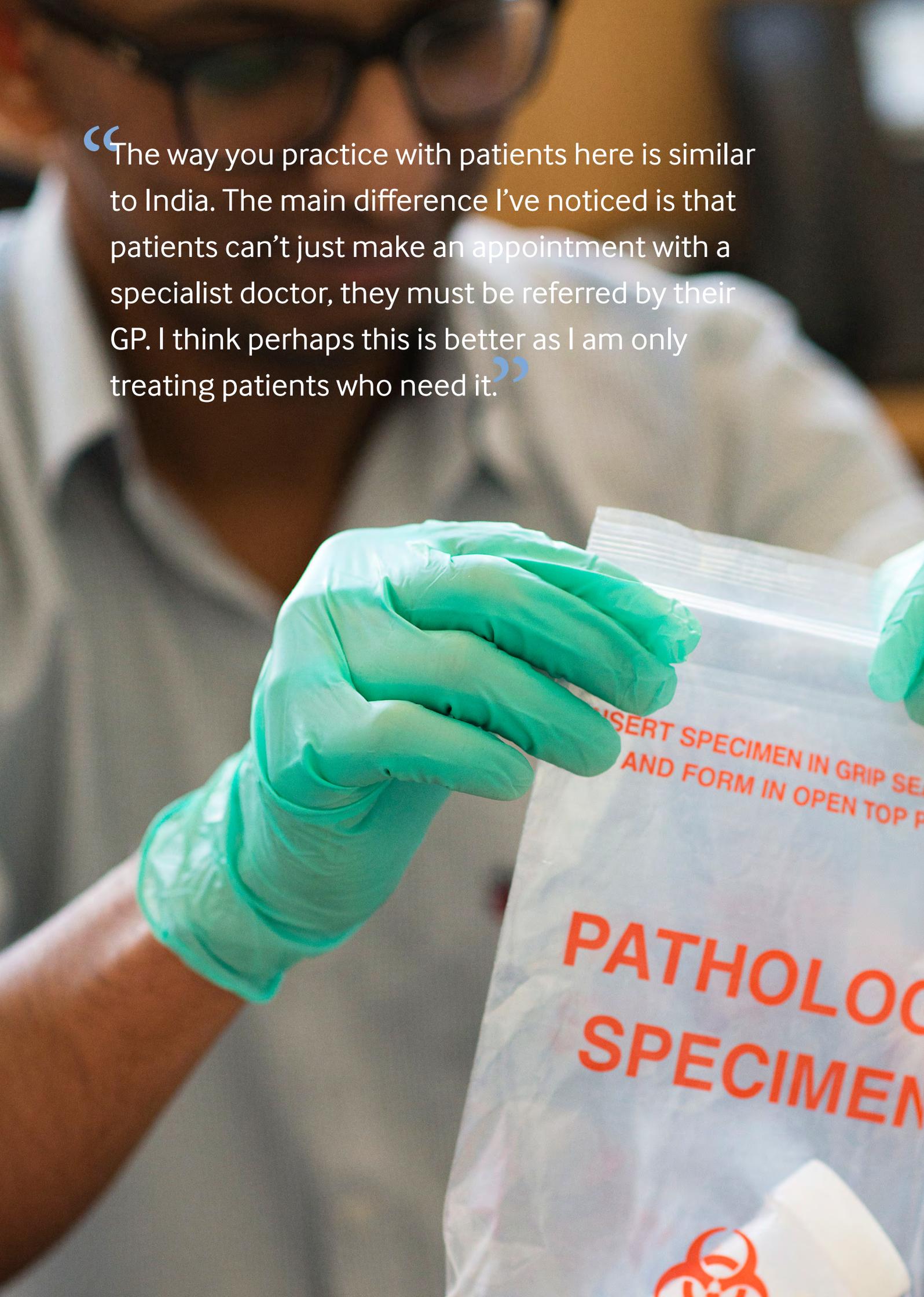
I do have one other colleague from India here and that has been a relief as there was someone I could talk to in my own language and share experiences. But I'm lucky that my wife also came with me on a dependency visa and she is currently looking for work.

I like Yeovil better than London. The weather is a bit warmer because it is further south and it's a smaller town so everything is quite close. We don't have to travel very far to get groceries or anything else we need. Our accommodation is much cheaper as well and it's a nicer environment – not so fast-paced.

My advice to anyone else considering the move is to decide on your long-term, 10-year plan for your career. Education and training was important to me, which is why I chose the MTI route but its designed so that once you have your training then you return to your home country.

I think the PLAB route is easier in terms of getting a job and is better if you are thinking you might want to stay longer but it takes longer to access training and career progression.”

“The way you practice with patients here is similar to India. The main difference I’ve noticed is that patients can’t just make an appointment with a specialist doctor, they must be referred by their GP. I think perhaps this is better as I am only treating patients who need it.”



Dr Abhishek Ray



“The NHS is one of the best systems in the world to train in because of the sheer volume and variety of work you can do in a supported and supervised environment. The salaries are also quite high here, which makes things easier and you can earn enough to send money home.

I had worked in India for about six years and did the first part of the Royal College exams so that I could become eligible for the MTI. I did the exam in India and the MTI matched me with a hospital Trust in the UK who interviewed me via skype. It was about 6–7 months after that that I started work for a hospital on the outskirts of London. The process can be much quicker but I needed to save for my visa application, as well as all the fees and the first month before I started earning properly.

That first month was quite difficult because the conversion rate is so high, but once I started earning, it became much easier. I’m in a core training (CT2) job. I started working in an acute medical unit and then rotated to a renal unit. I’m currently working in haematology. Eventually, I would like to specialise in gastroenterology but that will depend on training places and if I’m allowed to stay. My MTI visa is only valid for two years and they are quite stringent about that. If I was given a choice I would definitely stay.

I would say the medical side of things is very similar to India and most Indian doctors would not struggle with it. The main difference is that in the UK everyone wants you to practice safely, whereas in India you are expected to know everything as a doctor. Here, it’s expected you will have doubts and need to ask questions and speak to senior colleagues about things. They also have much more standardised systems of practice, such as the NICE guidelines and the GMC’s Good Medical Practice guidelines. In India, we do not have these, except in those diseases that are endemic, such as malaria and tuberculosis.

Also the social care aspect of care here is almost unheard of in India.

I have not struggled with too many things – except the cold. That was quite a shock! Otherwise, I felt quite well prepared. I particularly found the GMC workshop for overseas doctors really useful for explaining all the differences and what to expect.

There are always the bits and bobs that come with moving to a new country without your family – for example, having to do all the cooking and shopping while also working. Accommodation is expensive in the area I'm in but I'm still in hospital accommodation, which is a bit more affordable.

The main advice I would give Indian doctors considering the move is to keep an open mind and not listen to rumours. There are a lot of rumours in India about working in the UK and I would say only about 10% of them have any basis in fact and the issues are really quite miniscule in reality.

Also I would say they don't need to rush. Often, Indian doctors feel they have limited time and have to start aiming for training posts straight away but I think it is better to actually start with a non-training job and get really confident in it and then start looking for a training post.

Everyone has been very welcoming here – the colleges and the Trust have all been very supportive of me and I have not had to go too far to find those who speak my language – on the first day in my job the consultant who showed me round was from Kolkata, my home area in India.”

“The main advice I would give Indian doctors considering the move is to keep an open mind and not listen to rumours. There are a lot of rumours in India about working in the UK and I would say only about 10% of them have any basis in fact.”



Opportunities on offer

The number of job offers likely to be made to overseas doctors may depend on the specialty area. The NHS Employers survey found hospitals were mostly recruiting international doctors into core medical training, emergency medicine, radiology and both clinical and medical oncology.

Dr Mehta, as part of his work with BAPIO's postgraduate training scheme, says the areas with the most likely available training places for non-UK graduates are general medicine, psychiatry, gynaecology, obstetrics and paediatrics.

"Most Indian doctors are quite good in the theoretical and the practical skills, so depending on their experience, most would be looking to move to ST1-ST3 jobs. However, there are a lot of vacancies in the middle grades of specialty training between the ST3-ST5 where they are supervised by consultants but are the foot soldiers on the hospital floor doing the emergency work."



Why do doctors like practicing medicine in the UK? It can be safer

Many practitioners decide to come to the UK because the NHS offers free healthcare to everyone. For doctors this can allow the freedom to practice medicine in line with their own ethics and values and not a patient's ability to pay.

This is in contrast with India which has one of the lowest health budgets in the world and the system of private health insurance often means medics and families are forced to choose treatments to fit the patient's budget.

Many Indian doctors also dislike the corruption in the Indian healthcare system. Transparency International found it was one of the most corrupt in the world with kick-backs endemic and 59% of service users saying they had paid a bribe to access services. The same organisation has rated the UK as having one of the lowest bribery rates in the world.

In addition the UK has guidelines on best practice and the most cost effective treatments set by the National Institute for Clinical Excellence (NICE) to achieve standardised and high quality practice. This helps doctors feel safer in their practice.

Doctors also feel safer from violence in the UK. The Indian Medical Association has reported that 75% of doctors in India have experienced violence, compared to 15% of all NHS staff⁶.

Despite the pressure on NHS doctors this is still exceeded in India with one government doctor per 10,189 people in India compared with 2.8 doctors per 1,000 patients in the UK.

What I wish I knew before moving to the UK

The following tips have been collected by the BMJ, the British Medical Association and the GMC from doctors who have already made the move to work in the UK from India.

MEDICAL APPROACHES

- Patient confidentiality and consent is paramount in the UK. All treatments must be explained and consent sought before proceeding, including sharing information. This is different to India, where the family is often consulted and considered before deciding on treatments.
- The prevalence of care homes, nursing homes and intermediate care in the UK, and the interaction with social care and hospital discharge, may be confusing for Indian doctors where families often provide care for elderly loved ones.
- There are often differences in approaches to end-of-life care methodologies, particularly around resuscitation protocols and palliative care provision.
- The 'team' is very important in the UK. Multidisciplinary teams are often used to help patients with multiple needs and all contributions are considered equally valuable. The team may include nurses, occupational therapists and social workers. Nurses, for example, are highly trained and many can undertake minor clinical procedures without the supervision of a doctor.

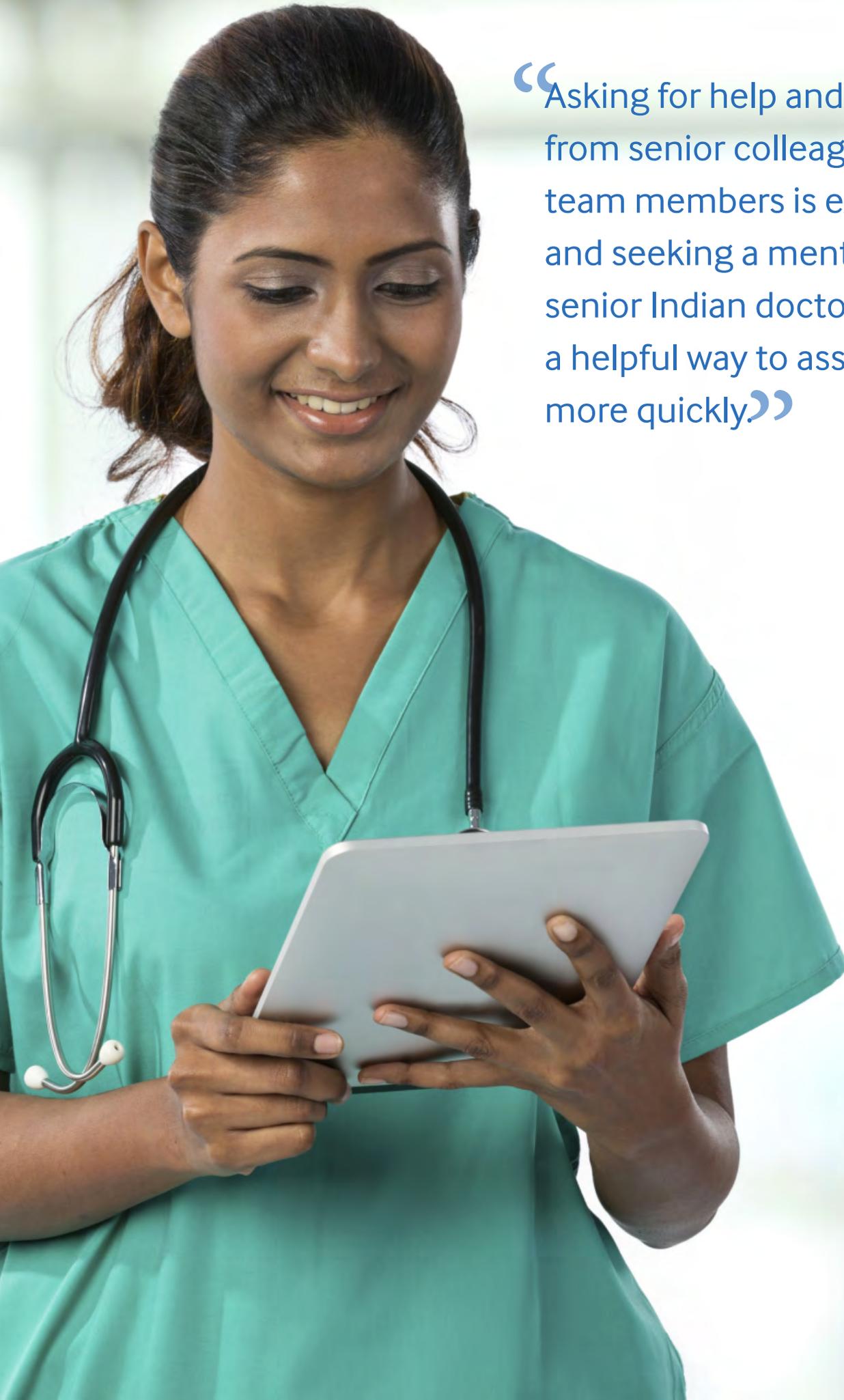
- Asking for help and guidance from senior colleagues and team members is expected and seeking a mentor among senior Indian doctors can be a helpful way to assimilate more quickly.
- In the UK, both clinical and non-clinical skills (such as communication with patients, empathy and negotiation) are considered important.
- Patients are often more 'educated' than in India and may want to debate treatments or information they have read about online. Patients will expect to be involved in decision making.

CULTURAL DIFFERENCES

- The UK tends to use a lot of abbreviations in both conversation and documents. Colleagues will assume you know what they mean unless you ask.
- Punctuality and saying 'please' and 'thank you' are considered important in the UK.
- Say 'sorry' only when you have something to be sorry about.
- Keeping eye contact with the person you are talking with is considered a sign of honesty and sincerity in the UK.
- Say 'no' if that is what you mean – being direct is often valued by patients and reduces the risk of misunderstandings.
- Accents will create problems. The UK has a wide variety of regional accents, some of which are very different to the traditional, English accent many Indian doctors might expect. Patients may also struggle to understand your own accent, particularly if you are working in rural areas. Encourage colleagues to correct you when you make mistakes, ask nurses or other colleagues to help if there appear to be particular difficulties with some patients. Practice using simple, non-medical language to help improve communication.

LIVING IN THE UK

- Watch lots of British TV. This will give you a good insight into the lifestyles and attitudes, as well as behaviour that would be considered taboo in India but may not be considered so in the UK. Seeing this first on TV could potentially save you embarrassment and clear barriers to interaction. It is also a good opportunity to hear different accents and try these out in the comfort and privacy of your own home.
- Do visit public libraries and local fairs and festivals. Most provide free internet access and are a great source of free information about the local area as well. They can also provide opportunities to meet local people and join local clubs and activities
- Don't bring too many clothes from India. Wait for the sales and buy them in the UK as they will be more suited to the weather.
- Do bring some food or treats from home. Taking them into work to share with colleagues can be a great way to break the ice and for colleagues to gain a better understanding of your cultural background.
- Do maintain contacts with friends and family back home. Using Skype or video calling can be a great way to relieve homesickness and their support will be invaluable, particularly in the first few months of living in a new country.
- Do explore. You may find other areas where you would prefer to live and work.
- Do take up a hobby or interest. This can be a good way to relax and de-stress, meet local people and make friends outside of work.



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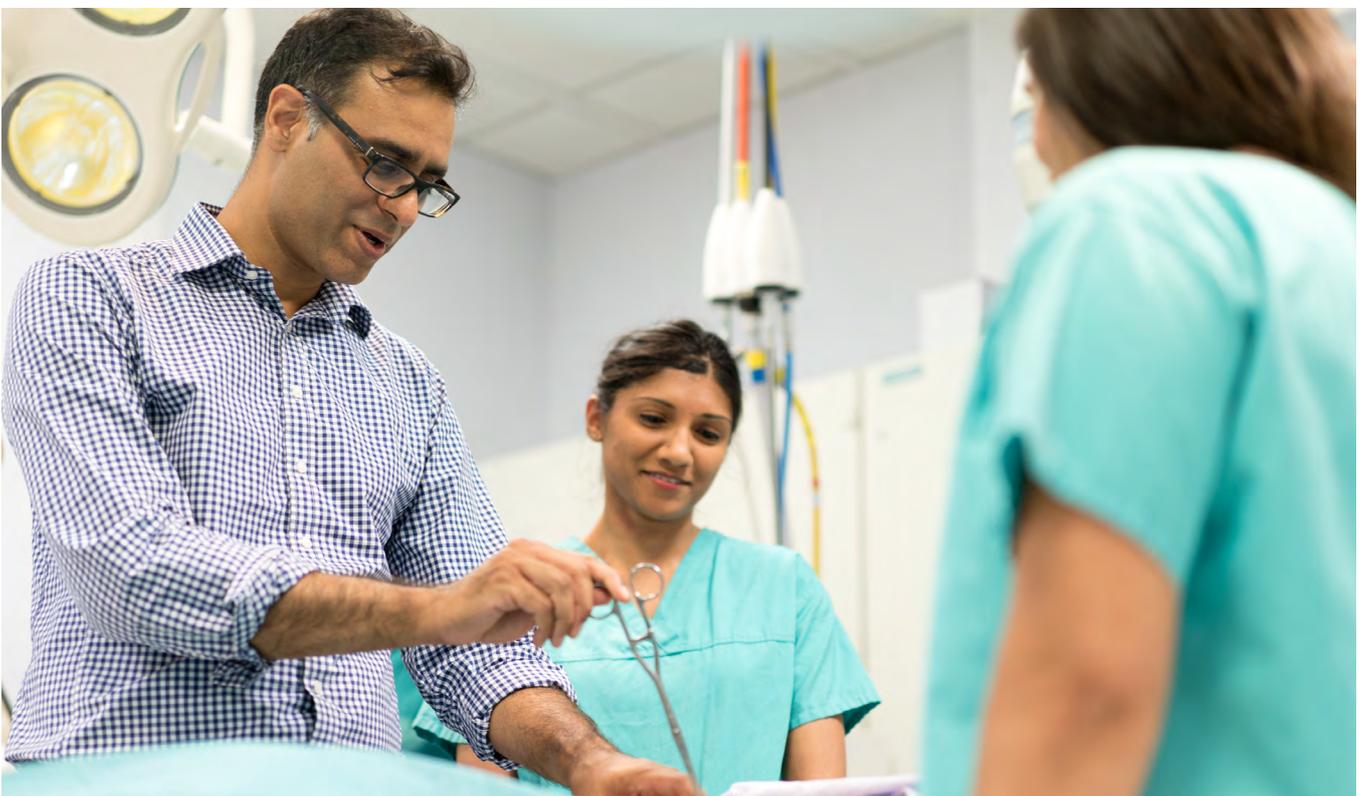
Conclusion

The UK has always been a popular destination for Indian doctors and at the moment their skills are in high demand.

If considering making the move, Indian doctors can be confident there are many others making the same journey and numerous doctors and organisations happy to help with any of the cultural differences and challenges that working in a new country throws up.

Associations such as BAPIO, the British Medical Association (BMA) and the Royal Colleges are all available to help doctors and often have dedicated sections on their websites devoted to international doctors, as does NHS Employers and the GMC.

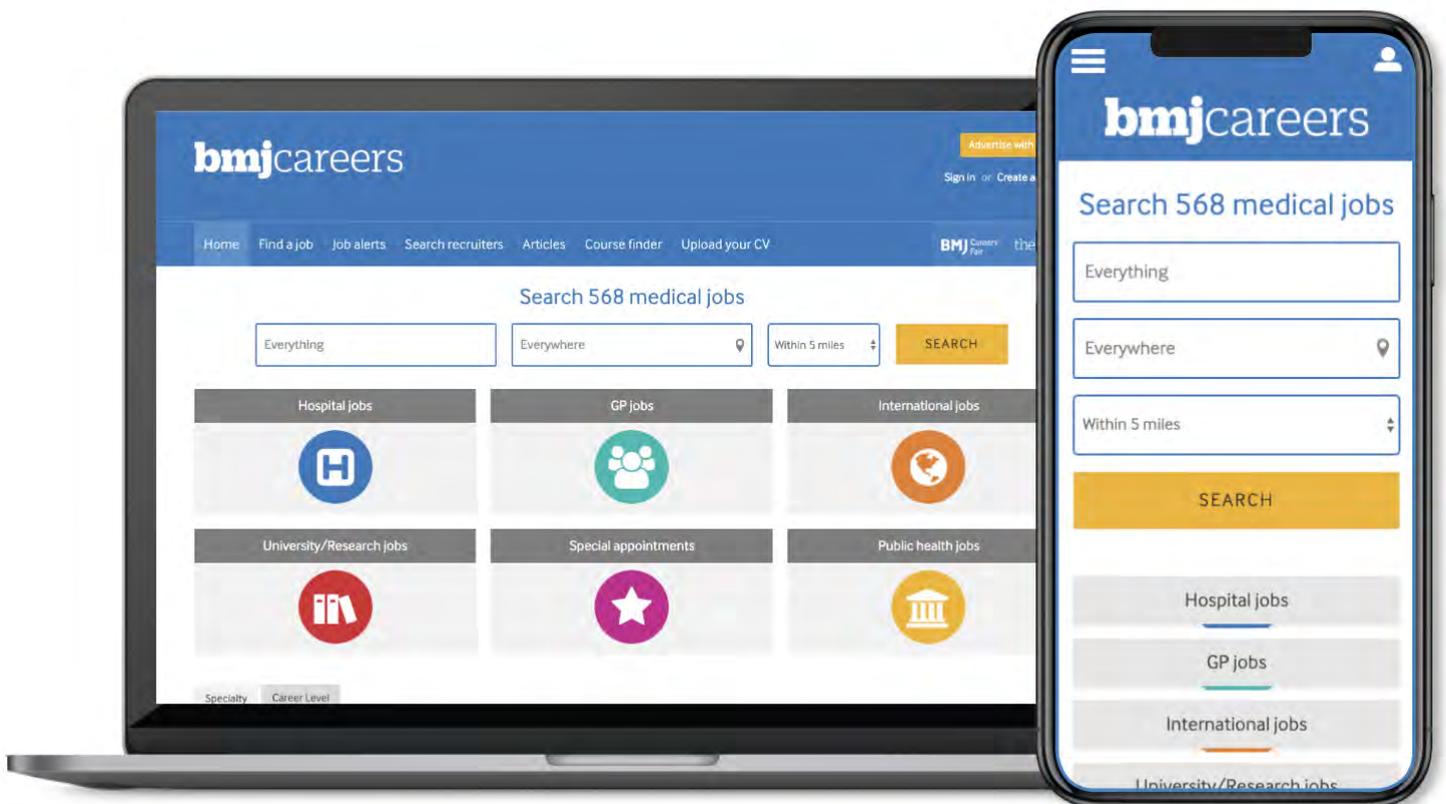
Working in one of the world's best health systems not only provides invaluable experience, skills and knowledge but boosts career prospects anywhere in the world.



On top of this, the favourable salaries and fairer systems of pay and working conditions, as well as greater respect, transparency and higher standards of living, are all significant compensations for the upheaval of moving and adjusting to a new country.

If you're ready to take the next step in your medical career in the UK then sign up to the BMJ Careers website for job alerts today.

Sign up for job alerts



Useful contacts & resources

Useful contacts

British Association for Physicians of Indian Origin (BAPIO)

<http://www.bapio.co.uk>

British Medical Association

<https://www.bma.org.uk>

General Medical Council

<https://www.gmc-uk.org/registration-and-licensing/join-the-register>

Academy of Medical Royal Colleges

<https://www.aomrc.org.uk>

NHS Employers

<https://www.nhsemployers.org/>

Working in the UK

BMJ Careers

<https://jobs.bmj.com/>

BMA: Life and work in the UK

<https://www.bma.org.uk/advice/work-life-support/life-and-work-in-the-uk>

GMC: Welcome to UK practice workshop

<https://www.gmc-uk.org/about/what-we-do-and-why/learning-and-support/workshops-for-doctors/welcome-to-uk-practice/doctors>

GMC: Virtual reality app Patient Journey to GP practice

<https://www.gmc-uk.org/about/what-we-do-and-why/learning-and-support/e-learning-resources/patient-journey-to-gp-practice>

GMC: Working as a doctor in the UK

<https://www.gmc-uk.org/registration-and-licensing/join-the-register/before-you-apply/working-as-a-doctor-in-the-uk>

Blog: Naseer's journey

<https://naseersjourney.com/>

Registration and post-qualification in the UK

GMC: What you need to know about the PLAB test

<https://www.gmc-uk.org/registration-and-licensing/join-the-register/plab>

GMC: Specialty specific guidance for CESR and CEGPR

<https://www.gmc-uk.org/registration-and-licensing/join-the-register/registration-applications/specialty-specific-guidance-for-cesr-and-cegpr>

Royal College of Physicians workshops: Navigating the CESR route

<https://www.rcplondon.ac.uk/education-practice/courses/navigating-cesr-route>

NHS Employers: Working and training in the NHS: A guide for international medical graduates

<https://www.nhsemployers.org/case-studies-and-resources/2014/08/working-and-training-in-the-nhs-a-guide-for-international-medical-graduates>

Visas and immigration advice

Gov.uk

<https://www.gov.uk/browse/visas-immigration>

Understanding the NHS

NHS England: An introduction to the NHS

<https://www.england.nhs.uk/participation/nhs/>

NHS Scotland: About NHS Scotland

<https://www.scot.nhs.uk/about-nhs-scotland/>

NHS Wales: About Us

<https://www.wales.nhs.uk/nhswalesaboutus>

NHS in Northern Ireland Health and Social Care

<http://online.hscni.net/home/hsc-structure/>

Kings Fund: How does the NHS in England work? An alternative guide

<https://www.youtube.com/watch?v=DEARD4I3xtE>

Understanding the NHS

<https://www.nhs.uk/NHSEngland/thenhs/about/Documents/simple-nhs-guide.pdf>

UK Cost of Living Calculators

<https://abcfinance.co.uk/blog/the-true-cost-of-living-in-uk-cities/>

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