

BMA

The BMA Refugee Doctor Initiative

A special package of benefits FREE from the British Medical Association to help refugee doctors establish their careers in the UK.



British Medical Association
bma.org.uk

The British Medical Association (BMA) is the trade union and professional organisation for UK doctors. We recognise the valuable contribution refugee doctors make to the delivery of health care services in the UK, and we have been involved in many initiatives – working with a broad coalition of other organisations – to help you pursue your career in the UK.

The **BMA Refugee Doctor Initiative** is a special package of free benefits, available to refugee and asylum seeking doctors as they seek to establish their careers in the UK.

Benefits include:

- **Free weekly subscription to *BMJ*** (including the *BMJ* Careers supplement), giving details of hundreds of NHS jobs.
- **Free weekly subscription to *BMA News*** and access to the news, views and analysis on the BMA website which covers a wide range of issues including medico-political and health stories.
- **Use of the BMA Library** – including access to the Medline Plus search facility via the internet or on computers at the library. The ebook collection is also a popular resource with over 1000 texts that can be accessed online.
- **Guidance notes and reports** on a wide range of subjects available online
- **Local BMA support** – staff within the BMA's local and national offices can advise you on contracts of employment and help you make contact with relevant education organisations. Your name can also be added to invitation lists for local BMA meetings. The BMA cannot provide careers advice, but we may be able to provide local sources of support. Doctors already registered with the GMC or who are entitled to GMC registration should join the BMA as full members to receive detailed employment advice.
- **Information and advice** from the BMA International Department. Under UK immigration legislation we cannot advise on asylum cases, but we can give general advice for international medical graduates wanting to work in the UK. This department also coordinates BMA activities and provides information on other projects to help refugee doctors: contact internationalinfo@bma.org.uk for more information.
- A confidential 24-hour telephone counselling service is available to refugee doctors and their families for personal, emotional, work or study related problems. Telephone 08459 200 169. Further information available at bma.org.uk/doctorsfordoctors

The BMA collects information on refugee doctors in the UK, and uses this to help ensure that appropriate help is offered in the right areas. All your details will be held in strict confidence, and not given to anyone without your permission. If you give your consent the BMA will share your anonymised information with organisations who have an interest in refugee issues in order to assist in the development of refugee services across the UK.

Am I eligible to join the initiative?

You are eligible to apply for BMA refugee membership if the following apply:

- You are applying for asylum in the UK and are awaiting a decision or,
- The UK has recognised you as a refugee, or
- You are a UK citizen but previously held refugee status in the UK

AND

- You have not registered with the General Medical Council but are seeking to do so

BMA Refugee Doctor Initiative application form

PLEASE COMPLETE IN CAPITALS

1. Personal details

Dr Mr Mrs Miss Ms Other (please specify) _____

Male Female Date of Birth ____ / ____ / ____

Family name _____ Full forenames _____

Postal address _____

 _____ Postcode _____

Email address _____

Telephone number _____ Mobile telephone number _____

Country of Origin _____ Date of arrival in the UK ____ / ____ / ____

What is the language you speak best? _____

Other languages spoken _____

Immigration status in the UK

Asylum Seeker Refugee Status Exceptional Leave to Remain Discretionary Leave
 Humanitarian Protection Status Indefinite Leave to Remain
 Other (Please specify) _____

In order to register for the BMA Refugee Doctor Initiative you must supply a copy of a letter from the Home Office confirming your refugee status or exceptional leave to remain or indefinite leave to remain or copy of your Standard Acknowledgement Letter (SAL) confirming that you have applied for asylum in the UK.

2. Qualifications and work experience details

Title of basic medical qualification (degree) _____
 Place of basic medical qualification: Institution _____
 Country _____
 Date of basic medical qualification ____ / ____ / ____
 Area of specialisation _____
 Title of specialist medical qualification _____
 Numbers of years worked in this specialty _____
 Country of specialist medical qualification _____
 Date of specialist medical qualification ____ / ____ / ____

For office use only: Qualification recognised by WHO? YES NO

3. Route to employment in UK

IELTS test taken YES NO Date ____ / ____ / ____

Overall score on IELTS test _____

Exempt from PLAB test YES NO
 Application in progress Don't know

Date exempted _____

PLAB test Part 1 passed YES NO Date ____ / ____ / ____

PLAB test Part 2 passed YES NO Date ____ / ____ / ____

Registered with GMC YES NO Date ____ / ____ / ____

GMC Reference/Registration Number _____

Employed in the NHS YES NO

Any other information? _____

Declaration

I hereby apply to join the British Medical Association Refugee Doctor Initiative. I understand that I will be required to inform the BMA when I gain registration with General Medical Council. I will then be eligible to apply for full membership of the British Medical Association. I understand that my place on the initiative will be reviewed after 5 years. I also declare that I am medically qualified and that my qualifications will enable me to register with the GMC once I have met the necessary requirements.

Signature: _____ Date ____ / ____ / ____

Data Protection Notice

By providing us with your contact details you are consenting to the BMA Group of Companies ("BMA") using your personal data (including sensitive personal data) for the administration of BMA and its partners' products/services, as well as for sending you marketing information about BMA and its partners' products and services by letter, SMS, telephone and/or email. If you would prefer not to receive marketing information regarding BMA or its partners' products and services please tick the relevant box(es). Our privacy policy (bma.org.uk/privacypolicy) is available for you to read, we would like to draw your attention to it if this is your first contact with the BMA and the BMA website. The BMA is committed to representing a membership that is reflective of the diverse medical workforce in which our members work. Please complete the following questions, and if there is any information you do not wish to share with the BMA please select 'prefer not to say' where indicated. For further information on the BMA's monitoring practices please see bma.org.uk/equalopportunitiespolicy

Signature:

Date / /

Ethnicity – How would you describe yourself?

Please choose one of the following five headings and tick the appropriate box to indicate your cultural background.

- White** English Northern Irish Scottish Welsh Other white background
- Mixed ethnicity** White and Asian White and Black African White and Black Caribbean Other mixed background
- Asian or Asian British** Bangladeshi Chinese Indian Pakistani Other Asian background
- Black or Black British** African Caribbean Other Black background
- Other** Arab Any other ethnic background Prefer not to say

Disability – Do you consider yourself to be a disabled person?*

*The Equality Act 2010 considers a person disabled if they have a physical or mental impairment, and the impairment has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities.

Yes No Prefer not to say

Nature of disability Learning disability Mental health condition Physical Sensory Other Prefer not to say

Sexual Orientation – What is your sexual orientation?

Bisexual Gay man Gay woman/lesbian Heterosexual/straight Other Prefer not to say

Once you have completed the application form and Direct Debit mandate please separate it from the rest of the leaflet, fold at the line indicated overleaf, moisten the gum strip at the bottom of the Direct Debit mandate and seal, so that the return address above is visible, before posting.

Business Reply Plus
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