

## English Language Training for overseas staff – an investigation

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### Introduction

This study will investigate whether providing English language support and training to International Medical Graduates and overseas staff would prove beneficial to the Trust.

The staff mix of CDDFT comprises diverse cultures from around the world. It is essential for overseas doctors outside of the European Union, whose first language is not English, to have passed an English Language Test. See below the table of requirements extracted from NHS Employers Good Practice Guidance for Employers, February 2012:

Regulator Contact details	Language requirements
General Medical Council	Requires an IELTS Academic overall score of 7.0, with minimum scores of 7.0 in speaking and 7.0 in listening, reading and writing. These scores must be achieved in a single sitting of the test. The IELTS Test Report Form must be no more than two years old when submitted. Under certain circumstances the GMC will consider evidence other than an IELTS certificate. Further information can be found on the GMC website.
Nursing and Midwifery Council	IELTS required score for overseas applicants is 7.0. The IELTS Test Report Form must be no more than two years old when submitted.

Given that they pass this test it has become apparent that some do struggle with communicational skills or conversational English in the workplace.

Other members of staff from overseas, whose first language is not English, do not require a specific language qualification in order to be employed by the organisation.

### Training

Staff training in the workplace has been an essential part of successful organisational functionality and has adapted over time in line with changes in economic climate and modernisation of organisations. The following definition was produced in the early 1980s:

*“A planned process to modify attitude, knowledge or skill behaviour through learning experience to achieve effective performance in an activity or range of activities. Its purpose, in the work situation, is to develop the abilities of the individual and to satisfy the current and future needs of the organisation”*

(Manpower Services Commission, 1981a, cited in Beardwell et al 2004)

Beardwell<sup>1</sup> deems that the above definition is no longer adequate in a world where organisations are in a constant state of transformation in a turbulent and rapidly changing economic environment. He states that “such a concept is too narrow for the modern organisation”.

Therefore, a more appropriate definition was introduced by Harrison<sup>2</sup> which although it was in the early 1990s, could be used in today’s world of organisations.

*“Development is the all-important primary process through which individual and organisational growth can through time achieve its fullest potential. Education is the major contributor to that process, because it directly and continuously affects the formation not only of knowledge and abilities, but also of character and culture,*

*aspirations and achievements. Training is the shorter term, systematic process through which an individual is helped to master defined tasks or areas of skill and knowledge to pre-determined standards. There needs to be a coherent and well planned integration of training, education and continuous development in the organisation if real growth at individual and organisational levels is to be achieved and sustained”<sup>2</sup>.*

Beardwell and Holden<sup>3</sup> set out reasons as to why it is appropriate to train and develop employees. This assignment has identified a connection with two of these reasons in line with CDDFT and the aim of this study:-

- “New employees are, in some respects like other raw materials – they have to be ‘processed’ to enable them to perform the tasks of their job adequately, to fit into their work group and into the organisation as a whole.”

In terms of training within CDDFT, the above reason is appropriate for employing new people that are new to the UK whose first language is not English.

- “People need training to perform better in their existing jobs.”

This statement is a representative of the current employees from overseas already working within CDDFT where it had been recognised that there was a barrier in their ability to communicate effectively with patients.

The following definition applies to this study because providing training and support for communication and language would benefit the organisation:

*“Human resource managers need to provide an environment in which the capacity to learn and adapt can be harnessed to benefit the organisation”.*<sup>3</sup>

## **Benefits and implications**

### *Benefits - costs*

The International Medical Graduate would feel supported and would be less likely to resign. “Any reduction in turnover cuts recruitment and training costs but action that reduces early leaving is particularly cost effective”<sup>4</sup>.

### *Implication - costs*

The cost of recruitment is quite substantial and so therefore, it would be more cost effective to retain current employees by offering support in order to prevent high staff turnover costs in recruiting and training. Thus by providing training and support the staff member would be less likely to leave.

### *Benefit – complaints*

Patients would feel more confident in consultations fully understanding communication and this will therefore, reduce the need for patients to complain about general lack of understanding due to the quality of English spoken and understood.

### *Implication - complaints*

Patients would be inclined to make a complaint if they had felt that they had not understood the communication with a staff member from overseas. When a patient chooses to have their treatment within CDDFT it would generate income. If the organisation’s reputation is at threat because of patient complaints, the organisation will have fewer patients which will result in less income and so job losses. Also, in particular, doctors training in the Trust generate income and if the Trust has a bad reputation for training and support, doctors will no longer choose to train here resulting in loss of income.

### *Benefit - staff*

Another benefit is that the staff member may feel that their needs are being met in line with

Maslow's Hierarchy of needs (see figure 1). In particular that their needs are being met. However, the Envision software website<sup>5</sup> states that in relation to Maslow's theory of needs, "in some cultures, social needs are placed more fundamentally than any others". (See figure 2. Lewis Model)

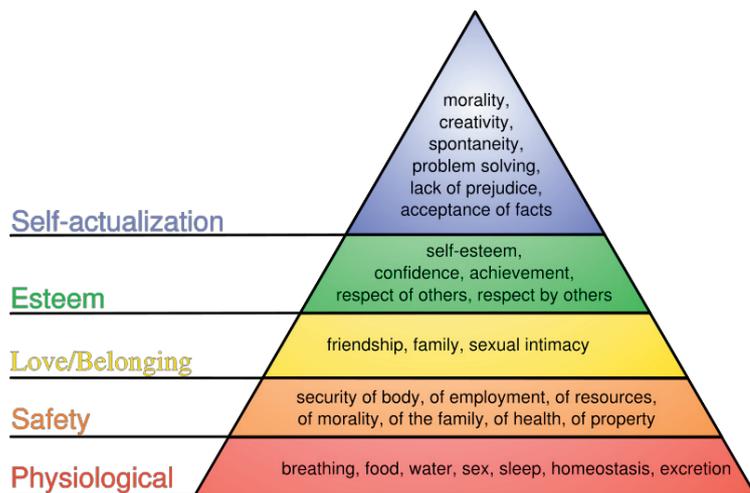


Figure 1. <http://dinamehta.com/blog/2007/10/18/social-media-strategies-lets-remember-maslow/>

## Communication

*"I talk to the trees, but they don't listen to me, I talk to the birds, but they don't understand"*.

Clint Eastwood, actor (lyrics from the musical 'Paint your Wagon')

Communication is about breaking barriers. All over the world people attempt to interact but are often misunderstood. Failure to communicate effectively can lead to unwanted costs and long term damage to an organisation's image and reputation which could be much more costly<sup>6</sup>. Wilson<sup>7</sup> identifies that communication errors were the leading cause of adverse events and were associated with twice as many deaths as clinical inadequacy.

It has been identified in prior primary research in the form of informal discussion and some feedback amongst staff that the organisation would benefit from some form of communication and language training and support being offered to its staff. Identification of language and communicational problems have been recognised via appraisal or by observations made in the workplace whilst working with colleagues or by supervisors or managers and in some instances, trainees identify that they have a problem and flag this issue with their line manager. Contact is then initiated with the training and development department to ask for such a course and currently the organisation does not provide such a course or support.

According to Burnard<sup>8</sup> cultures, like societies, differ from one another. He states that because each culture differs it is wrong to say that any given one is correct. He gives an example that mutual eye contact with a senior colleague is considered to be rude in parts of the Middle and Far East, thus it should not be thought that someone from these regions who

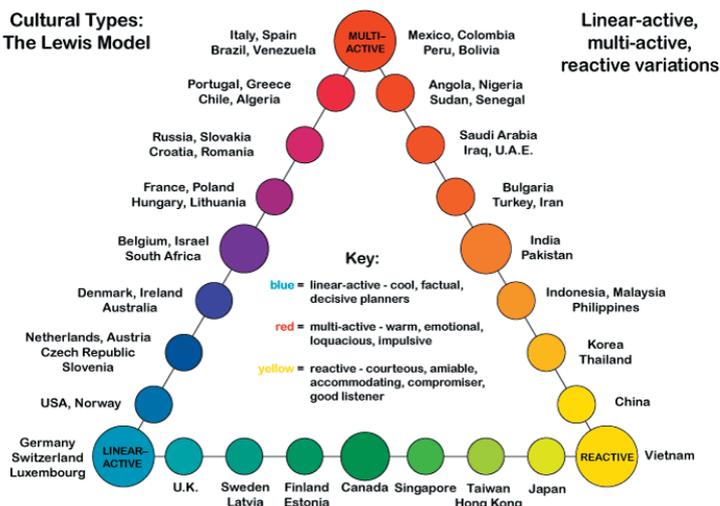


Figure 2. <http://www.best-career-match.com/cross-cultural-communication.html>

does not make direct eye contact is being rude or inattentive. When considering this example within CDDFT, this study has identified that this situation is difficult to manage from an NHS point of view in that the organisation cannot educate the entire population of 520,000 patients in order for them to understand the cultural communication difference of overseas hospital staff but should consider training its staff to understand cultural communication and to help them carry out their job more effectively.

## Culture and Communication

*“The learned, shared and transmitted knowledge of values, beliefs and life ways of a particular group that are generally transmitted intergenerationally and influence thinking, decisions and actions in patterned or in certain ways”<sup>9</sup>.*

It is essential that organisations understand the potential problems of cross cultural communication and make a conscious effort to overcome these problems. In cases where communication problems arise from limitations in the person’s public speaking skills, trainers could help improve the situation.

Areas of cross cultural misunderstanding within communication patterns involve speech styles and listening habits. The Lewis Model of cross cultural communication (figure 2) was formed and this Model is based around three categories; Multi active, Linear active and Reactive (figure 3)

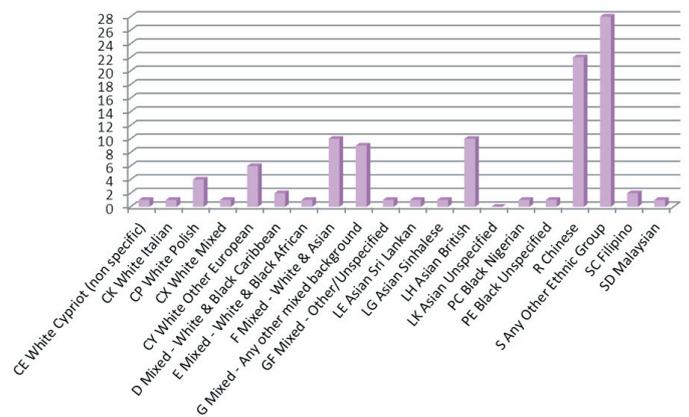
If you take this model into consideration when considering the possible implications of communicational difference, it might assist understanding of the communicational needs of specific cultural groups of staff. But everybody should be treated as individuals and everybody has their own personalities. We cannot ‘tar everybody with the same brush’ but we can take some guidance from the Lewis Model.

The chief characteristics for Multi active:	The chief characteristics for Linear active:	The chief characteristics for Reactive:
<ul style="list-style-type: none"> <li>• Family</li> <li>• Hierarchy</li> <li>• Relationships</li> <li>• Emotion</li> <li>• Eloquence</li> <li>• Persuasion</li> <li>• Loyalty</li> </ul>	<ul style="list-style-type: none"> <li>• Facts</li> <li>• Planning</li> <li>• Products</li> <li>• Timelines</li> <li>• Word deed</li> <li>• Correlation</li> <li>• Institutions</li> <li>• Law</li> </ul>	<ul style="list-style-type: none"> <li>• Intuition</li> <li>• Courtesy</li> <li>• Network</li> <li>• Common</li> <li>• Obligations</li> <li>• Collective Harmony</li> <li>• Face</li> </ul>

**Figure 3.**

## English as a Foreign Language

CDDFT employs around 8,500 staff from many cultures. Secondary research has been extracted from Electronic Staff Record as at 31<sup>st</sup> March 2012. As we can see from the chart below (figure 4), there are many for whom English is not their first language:-



**Figure 4.**

Secondary research also took place by extraction of statistics from the Equality and Diversity annual report. The annual report shows that there had been a 46% increase of employment in staff from overseas over 2010/2011. These statistics confirm that it makes sense for CDDFT to offer training in an English language support

programme and communication for new staff whose first language is not English.

Castledine<sup>10</sup> reports that one of the problems of introducing nurses from overseas, where they have only a basic grasp of the host country's language, is that it can lead to problems in the delivery of quality nursing care. He goes on to say that "we should be supervising and continuing to educate and help foreign nurses become more aware of our culture and language".

## Conclusion

In terms of overseas staff, Maslow's hierarchy of needs may not apply due to the fact that differing cultures may have a diverse perspective on what their physiological needs are compared to people of the same culture of Maslow the theorist.

Because language learning is a transferable skill it is recognised both from an organisational point of view and staff member point of view that perfecting language is extremely beneficial not only to the organisation but also for the staff members personal development.

This study has identified that County Durham and Darlington NHS Foundation Trust would benefit from the introduction of language training and support in terms of cost savings through having less staff turnover due to providing support. An effective way forward would be to offer English language teaching and support to all staff via the life-long learning directory using internal resources, including cross cultural communication awareness for all staff.

This assignment has found that every effort should be made to retain current staff in terms of training and development. While the responsibility of effective communication lies with all professionals, strategies can be activated that can enable overseas healthcare professionals to make a valuable contribution to health care. UK staff may require education that enriches cultural competence and makes common understanding and tolerance easier.

## Recommendations

Primary research in the form of a questionnaire could have been undertaken to determine the outcome of whether differing cultures agree with Maslow's Hierarchy of needs.

To obtain statistics from the Complaints department to specifically assess the level of complaints generated around communication and language issues.

Further secondary research in order to expand and take into consideration more views of alternative research in the same field.

Finally, I would recommend an investigation based on primary research in the form of questionnaires and interviews of both patients and workers about the effect of language miscommunication and its impact on the quality of healthcare.

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