

International Recruitment to the Community

CASE STUDY

2022/#3



Interview with Roslyn Mattukoyya, Senior Lecturer, Anglia Ruskin University, Essex

I gained my Nursing registration in 1998 from an Indian higher education institution. My main experience is in acute care practice. My past nursing experience has also involved community projects, obstetrics, paediatrics, medical and surgical.

In 2003, I became aware of the opportunity to come to the UK. An agency had advertised job vacancies in a local newspaper in India. I contacted the agent and was informed what was required and I was subsequently invited for interview. The interview was conducted by delegates from Mid Essex Hospital Trust. I was successful in the interview and passed the IELTS. The next stage required occupational health and police clearance. A provisional decision letter was provided by the NMC to practice as an adaptation nurse. Once I arrived in the UK and following 3 months of adaptation gained in ICU, I applied and obtained permanent NMC registration.

On gaining entry to NMC register, I was able to work as a Band 5 nurse in critical care. In 2010, I was offered a secondment post to work as a research nurse in a band 6 role. After this, I progressed to take on education facilitator role, a permanent Band 6 role in critical care. The educational facilitator role involved building competencies and developing the knowledge and skills

of the staff I was working with. In 2013 I moved to Essex University Partnership Trust which is a Community Trust where I support students during their community placements. Currently, I am a senior Lecturer with a course lead and Education champion role covering both hospital and community. I have also recently taken on a staff nurse role in a nursing home in the community to gain further community experience.

During the Pandemic, I took advantage of the opportunity offered by the British Indian Nursing Association (BINA, <https://binauk.org>) to share the skills and knowledge in upskilling nursing colleagues in India. This initiative by BINA, offered both professional and personal satisfaction when committing to better use of 'myself' as a resource to improve nursing practice in India during a time of great need.

I began my PhD journey in 2016. I am keen and proactive about building evidence around promoting patient safety,

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Above: Roslyn Mattukoyya

particularly speaking up against unsafe practice. As an active researcher, I have co-authored and published under this research topic. I hope to complete my PhD in 2022.

I moved to the UK for career progression and for a better life. I have learnt to appreciate the differences in professional practice. The hierarchy that exists in India does not exist in the UK. I noticed the autonomy within the scope of nursing practice in the UK. The protocols, techniques, assessment tools, escalation framework and training contributed to the increase in my new knowledge and skills. Within a few years of applying this knowledge and skills in practice my confidence and independence had grown, enabling me to avail of the opportunities to progress my career.

As a research scholar, I am working now to contribute towards policies and guidelines, with an aim to impact

nursing practice. This has opened the door to further invitations to present and contribute to various webinars and conferences, and the opportunity to network with other researchers.

Since coming to the UK I have become more autonomous and I am able to support and empower others in breaking down barriers, particularly in relation to international recruitment.

For future internationally recruited nurses I would like to see employing Trusts and agencies developing a more compassionate and inclusive workplace demonstrating a greater awareness of the various cultures and cultural competences. I would also like to see more emphasis on career progression and clear guidance on how an internationally recruited nurse can aspire to be the best nurse they can be through career development opportunities.

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