Capacity building during COVID-19: Utilising South Africa's underutilised international medical graduates

To the Editor: The coronavirus disease 2019 (COVID-19) pandemic has wreaked havoc on global healthcare systems, with even well-resourced healthcare systems in Western Europe, the UK and the USA being significantly affected.[1]

Although official data are difficult to obtain, a UK media statement[2] suggests that 25% of the UK's doctors are absent due to COVID-19, with European figures[3] just as alarming. The concern is such that the UK recently provided temporary registration to 11 800 doctors,[4] while Harvard[5] is contemplating the early graduation of medical students to improve capacity in the USA. Numerous South African (SA) healthcare workers have already been quarantined.[6] Trying to expand SA's healthcare capacity while simultaneously contending with a loss of healthcare staff due to COVID-19 could pose a significant challenge to a system already under strain.

SA international medical graduates (IMGs) could potentially assist. The integration of these doctors has long been problematic for the Health Professions Council of South Africa (HPCSA)[7] and the National Department of Health (NDoH), with the matter previously ending up in parliament.[8,9] A 2018 NDoH policy,[10] aimed at bridging their integration, has yet to be implemented. Regardless, SA has a significant pool of underutilised IMGs. A recent petition and survey in the UK[11,12] called for IMGs awaiting UK registration to be allowed to assist, while amended legislation[13] already allows specific unlicensed IMGs to serve during the COVID-19 crisis in New York. Analysis of IMG availability in SA was lacking, so we conducted an online survey.[14]

The survey generated 644 responses within 48 hours (Fig. 1). Of these IMGs, 458 are currently in SA, and are either unemployed or working in non-medical roles. Almost all are willing to serve during the COVID-19 outbreak, but conditions such as brief orientation training or working near to home would ideally need to be considered. Although the demographics and registration statuses vary, many are registered with international councils or are awaiting HPCSA board examination results or registration. Currently, HPCSA IMG administration is on hold during the lockdown.[15] In contrast, other medical regulators, like the Medical Board of Australia,[16] are streamlining their processes to expedite IMG registrations.

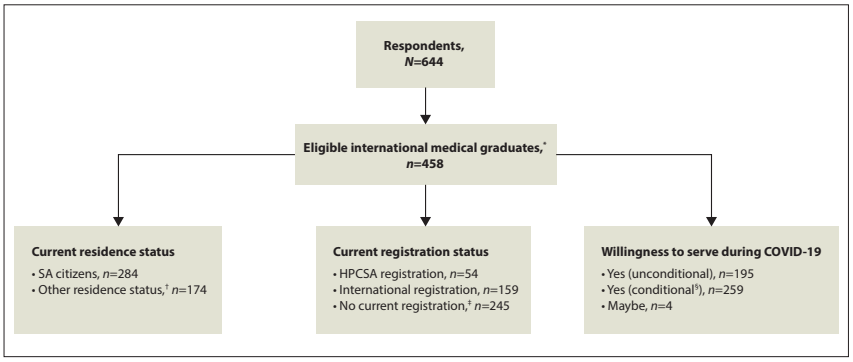

*Fig. 1. Results of a brief survey on international medical graduates in SA. (SA = South Africa/n; HPCSA = Health Professions Council of South Africa; *Eligibility was determined by currently being in SA and not already serving as a doctor; †Includes refugees, asylum seekers and respondents on spousal visas or temporary residence permits; ‡Includes respondents who have completed HPCSA board examinations awaiting registration; §Conditions included receiving orientation training, being placed near their homes, remuneration, etc.)*

Utilising unregistered doctors is not without risk. Limited quality control could potentially compromise patient care. However, this could be mitigated by deciding on minimum standards during recruitment, as done in New York,[13] and limiting their scope of practice to very specific, in-hospital roles.

Should the COVID-19 situation in SA deteriorate, intensive care unit (ICU) capacity will need to be expanded, as already seen in many countries.[17,18] Staffing of such facilities could become the biggest challenge. Incorporating IMGs into specific roles would free up experienced doctors to staff more specialised departments, like ICUs. Perhaps the NDoH could consider incorporating final-year medical students, recently retired doctors and IMGs in a tiered call-up strategy, should the situation necessitate. As previously discussed, similar approaches are being trialled globally.[4,5,13] We suggest that the NDoH acts proactively by identifying all available medical human resources for future call-ups, including underutilised IMGs, a potentially vital asset.

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