

Your First...experience of moving to the NHS from private health care.

Rose speaks to Lucy, an occupational therapist, about her first experience of working in the NHS, after 13 years working in private healthcare.

Have a comment on the show? Please email us at yourfirstofeverythingpodcast@gmail.com

Presented by: Rose James
Produced by: Ben Capper

Your First of Everything is a Production of Grey Fox Communications and Marketing Ltd, in partnership with the University of Chester and Mersey and West Lancashire Teaching Hospitals NHS Trust.

Rose [01:00:01]

Welcome back to another episode of your First of Everything. Today I am joined by Lucy, who is going to talk to me about her first experience of work within the NHS following 13 years of working in private health care. Lucy is an occupational therapist specialist, so she must have a lot of experience. So tell me about your first day of working in the NHS compared to private healthcare? Was it like.

Lucy [01:00:27]

It was good? It was different and it was a bit daunting because obviously I'd been working in a completely different system since qualifying basically for 13 years. In those 13 years I worked for two different private hospitals and and had always got in the back of my mind how I'd like to work in the NHS for various reasons, which I'm sure we'll come on to. And so yeah, the first day part of me was thinking yes, finally. And part of me was thinking, Oh my God, what if this is all a terrible mistake? And what if it's not that the grass is greener on the other side? And so it was a bit of a mixed and mixed feeling. It was good, though.

Rose [01:01:06]

Good. So that day, walking into your new job in the NHS, how is it? How is that different? How was it different to private health care?

Lucy [01:01:15]

So my my current job that I sort of came into the NHS to do was quite different in that the service hadn't actually been set up at that point. So we were a brand new ward and so it was very different to my normal job anyway because we didn't have any patients at that time. Yes. So we were doing a lot of sort of background preparation and sort of planning that how the ward was going to be and what the process is going to be like, all of those things. So it was it wasn't like walking into the equivalent job in some ways. However, from like a, I guess a organisational point of view, it was really good. I was quickly kind of made to feel part of the team and every like all the sort of team managers that I saw there were really supportive and I was kind of

guided through each stage really well, so I felt very much part of it straight away. That's really.

Rose [01:02:12]

Good. So what made you want to go into the NHS?

Lucy [01:02:16]

Well, so I went. When I qualified, I had the choice of the private hospital position that I ended up taking, which was in a private hospital that worked in forensic mental health. So it was with low and medium secure patients and it just sounded really, really interesting. And compared to the NHS post I was offered, it was a mixed rotation, physical and mental health, which again, it did sound really interesting and I could tell that, you know, I wanted to work in the NHS and however the NHS Post required a driving licence and at that point I didn't have one and I didn't know if I could get one in time for the job to start. And as it turns out, it took me for four attempts anyway, so it probably wasn't the right time. And so I went with the private post partly as well as that, because the salary at the time was a couple of thousand higher than a starting salary with the NHS. So that was obviously quite a nice little draw thinking, Oh, private, I'll be paid well, all this sort of thing. But as time went on that became clear that that's not the case. You sort of go in at perhaps a higher salary, but then they don't have the same structure or at least in the where the where I was working, they didn't have the same structure. So he didn't get you your incremental pay increases and the banding system and a direct sort of progression route. It was kind of you went a point and you are an occupational therapist and then it kind of stops and you have to really push for any again, in my experience, then there may be private hospitals which have a very good structure and I know and, and I know of some who do, but my experience, it was very much that there wasn't there wasn't any progression and you had to sort of fight for any sort of movement up or down or across anything like that. And whereas I had people I trained with a knew that had gone into the NHS were progressively progressing quite well and, you know, moving up at the right sort of times, getting lots of different opportunities for training. And again I was finding that training was something that in private and the private places that I've worked at and it was very much on their terms. So like if it benefited them directly, they'd go for it. But if it was more for your own sort of professional development, it was again, something that you had to really push for or fund yourself or whereas even though I've now been with the NHS for just about a year roughly now, and I found that there a lot more. More kind of there expect they expect you to to develop and to do things like this this podcast and they they want you know they push you to to develop yourself and obviously they want it to benefit the service that they're for. But the seems it feels for me anyway, like they're investing in me rather than, you know, just the service. And so that was again another big draw to come here. I was also finding that in the two private hospitals that I worked at, I didn't feel that the role of occupational therapy was particularly valued and there wasn't much sort of support or networking from other OTS in the profession, whereas again, in the NHS, again it's expected that you do link in with other professionals, other relatives, you do all of the things and it just feels like it's more of a protected place to work. And I know that people have very different experiences of both NHS working and private working. So again, just to emphasise this is just from my experience of course.

Rose [01:06:07]

Yeah, yeah. And that's this is it, you know, this is part of that podcast is that I want your own individual experiences and I think, you know, if there is somebody else out there who's had a similar experience, they'll be able to relate to you. That's what we want to provide. What I will say is, well, is I think that, you know, from that point of view of having a progressive aspect within the NHS, the structure there, it is very, very good. and I from my point of view of being a registered nurse, you know, they are very supportive in that aspect of, of progression. So I completely agree. Were there any challenges that you faced along the way within the NHS?

Lucy [01:06:44]

Not really so far. There was a slight hiccup with my salary with getting paid on time at the start, but I think that would happen anywhere you go. Really. And so other than the the normal sort of hiccups that you'd get in any job in any company in the world, I don't think there were any real challenges. Which was quite a nice surprise. Yeah, that's.

Rose [01:07:06]

Good. That's really, really good. Yeah. What advice would you offer to somebody thinking about going to work in private health care in comparison to the NHS?

Lucy [01:07:16]

I would say do your research, ask questions, go and visit. Read the QC inspection reports. If anything isn't sort of obviously satisfactory, when you read the reports, ask questions about it, ask what they're doing to change things. Ask about progression. Ask you know, how long will I be at this point? At what point can I sort of apply to progress and talk about what your ambitions are like? If you know that if you've got in your mind that after one year, two years, whatever you want to be at a certain point in your career, speak honestly about it from the start. So you know, you've got realistic expectations that way. If they say, Well, actually we've got this wonderful system in place and at this point you'll be doing this and that's great. But if they sort of say, Well, we'll just review it nearer the time, then maybe just think, will you and add sort of say don't be sort of just lulled into like a better salary means, you know, better resources. A lot of the the people that I worked with sort of on the like on the ground floor, so to speak, were all, you know, all in it for the right reasons. And it was it was some of the some of the greatest people obviously there. Same level of sort of dedication and skill in the NHS. So it's not necessarily that in private you're going to get all the experts in the field or anything. And, and yeah, so I just, I just say be careful, Don't, don't, don't discount private because like I say, I do know there are some, some private companies out there that do invest in their staff and do really wonderful work. And like I say, I've worked with brilliant people during my time in private and but yeah, I think just go in with all the information. You can maybe have a think about what you want from your career and be honest with that and discuss that at interview or you know, when you're starting and see if you can sort of get any idea about is, is this actually going to follow what I want? Yeah.

Rose [01:09:23]

What are your plans for the future, your aspirations? Plans?

Lucy [01:09:27]

Ooh, that's a good question. I don't know. I think for the time being, I'm staying. I'm happy where I am for now. And I think, like I say, we're a new service, a new ward, and it's just it's interesting to see how that's progressing and developing. So I want to stick with that for a bit. I've got a really good team to work with both on the ward and the wider sort of the Trust Oti team are really good as well. So at the moment I'm happy they're down the line. I've got various little thoughts. I'd like to maybe do some lecturing at various points and I don't know whether that would be like ad hoc or if I just scrap clinical work and become a lecturer. I don't know. So at some point down the line, that would be nice. I'd like to do some more training and add a few more strings to my bow. Yeah, and but again, I'm just sort of sussing out what particular qualifications I'd like and what what line to go down. But I do feel that now and I feel like I'm just like champion in the NHS. I don't know that, you know, I might be a bit naive, but I do feel that now any sort of aspirations I do have feel a bit more achievable than when I was with the my previous post where I think I don't know, I don't think there were many opportunities to sort of change because again, I think in the NHS it's such a large organisation that if you did think, well actually I want to retrain and not retrain, but like I want to go into this clinical field instead of the one I'm in now, there'll be opportunities to do that. Whereas in private it's they often sort of have their speciality and that's what that company does. So if you do think, Oh, actually, so for example, I was my first company I worked with was in forensic mental health, which was really interesting, but that was the line of work they did. I my second post was on an eating disorder service, which was very, very different and I'm really glad I did it. But I did have to completely change companies in order to do that. Whereas I think with the NHS it feels like if somewhere down the line I think, oh, I quite fancy working in whatever clinical setting, that probably will be an opportunity. See at some point or a way that I can kind of steer my career path that way. Yeah. And so, yes, I'm unknown at the moment about what the future holds, but it feels like it could hold all sorts.

Rose [01:11:58]

Well, it sounds very positive and it sounds like you've got a number of ideas of things that you'd like to go into. So one final question. Is there any advice you give to students thinking about becoming an occupational therapist?

Lucy [01:12:11]

Do it, it is the best. And I'd say do it, but do it with. the knowledge that you may have to very much advocate for the profession, and that is becoming more understood and recognised, which is really good. But there are times when you do have to with such a broad profession, we cover so many different things that it can be a bit difficult for people both professionally and patient and career wise to actually understand the scope of what we do. So I would say work out your spiel about when you first meet that patient or their carer or someone and say, Do you know what an occupational therapist does? And they say, No, you need to have a think about how on earth do you explain what we do in, in a small, small amount of time? And to do that I would say focus on yeah, have a think about what your goals are for your career and apply for apply for jobs when when you can and when you what fits in with what your pathway hopefully will be and if you're going for interviews, I'd recommend asking to go and visit the place first and sort of get a feel for it. And and yeah, just it's it's a great career. It is a great career. And. And. Yeah. Good, good.

Rose [01:13:35]

Well, thank you so much for sharing your first experience with us today. Thank you.

Lucy [01:13:39]

Thanks for having me.

Rose [01:13:42]

Thank you for listening to your first of everything. If you enjoyed this episode, don't forget to subscribe and leave us a review wherever you get your podcasts from.