



## Dr Maria Drakou

Maria, who trained in Greece and wanted to develop her career in an English speaking country, now works in Surbiton in England.

I'd always planned to move abroad to further develop my career, and as I did my degree at an English-speaking university, the UK and US were at that top of the list. The UK is known for the standard of general practice all around the world, and I thought it'd be the best place to continue my medical career.

I qualified as a GP in the national health system of Greece in 2010 and spent one year working as a salaried GP for the Greek National Health Service, and one year in primary care clinics in the Municipality of Athens. During this time, I'd also accumulated a number of postgraduate qualifications in a wide range of interests, such as diabetes, pre-hospital emergency medicine and mental health. One of the roles being a GP in England offers is being a GP with special interests, which is very well structured, so I was interested to see what that might offer me and my career.

My husband was already working in the UK, but it was me who pressed him to take the plunge and relocate permanently in 2012. Once I'd completed the paperwork and exams, I was given a 12-month placement in a surgery in Tooting, London. Initially I opted for a part-time placement because I wanted to settle and take my time, but after a while my supervisor and I agreed that I could do it in less time, so I completed it in nine months.

My supervisor was a very experienced educator and trainer and I was very lucky and grateful to have such excellent support. As part of the placement, I kept a log book of my work-based placements, my supervisor sat in with me during consultations and we'd later reflect on these consultations and my learning. This really helped me get to grips with the structure and how the NHS works.

The NHS' internal processes are different from my home country system; it's something that every GP new to the NHS needs time to get to grips with and adapt to. During this time, I also met up with the self-directed learning group of other Induction & Refresher (I&R) GPs from all walks of life, which was really helpful in terms of sharing our experiences, learning from each other and reflecting on our observations. Also, during the I&R scheme I had the opportunity to learn all about the appraisal and revalidation process which helped me greatly to complete both successfully within my first year working as a UK GP.

I finished in August last year, since then I've been working part-time as salaried GP. As for next steps, I'd like to explore my options, either in medical education or specialise further while being a GP. One of my dreams is to be involved in the medical educational system for medical students and later on for GPs, as well as to become a GPwSI in dermatology, so the UK holds a lot of opportunities for me.

I love being a GP. I love the diversity and being the person that patients come to for all their problems – whether physical or mental health, it might be that they need some support for their children, or they might have a problem with their husband. The diversity is very precious and it's something you only find it in general practice. Other doctors have good moments with their patients, of course, but general practice is unique in enabling you to have such a close connection with your patients in a holistic way. The diversity also means it's very exciting; you'll never know everything but that's part of the challenge. I want to learn constantly to become the best doctor that I can be – that's what I love.

My advice for other applicants would be: you definitely need the Induction and Refresher scheme – I wouldn't have been able to get straight into the NHS without it.