

A Supportive Guide for International Trainees New to the NHS

Produced by the KMPT Differential Attainment Committee

WELCOME TO THE UK!

Receiving a job offer in the United Kingdom can be a dream come true for many; an opportunity to advance your career and gain hands-on experience in some of the sub-specialities that may not be available in other parts of the world. Some of you may be single, and some may have families relocating with you. Amidst the excitement, this is a new territory with a need to learn a lot of new information within a short period of time.

There are many things to learn about the complexities of living in the UK and working in the NHS, and some of these would be helpful to know before travelling and starting work, to allow you to feel more prepared. This guide is based on a previous version written by some of our MTI trainees, who have first-hand experience of being a new starter in the NHS system and in the UK, and have shared their advice about some of the things they had learned, and some that they wished they had known. This guide will continue to be updated with new information, and feedback is always welcomed.

KMPT - Medical Education Differential Attainment Induction Video

<https://vimeo.com/826956828?share=copy>

A. SETTLING DOWN IN THE UK: Essentials

1. Right to work in the UK.

You will need to use the Home Office online service, which will give you a 9-digit code. You will need to share this with the Medical Staffing team at KMPT so that they can verify this.

2. Biometric Residence Permit (BRP) (<https://www.gov.uk/biometric-residence-permits>): you cannot work without a BRP. That is your permit that you will use to secure a lot of things, including: bank account, children's school, accommodation. It is best to use a post office close to work place.

3. Accommodation.

You will need a UK address. This will help when you want to open a bank account and apply for children's school placements. You will not be able to start a job without a residential address. This should preferably be done before coming to the UK, and you are sure of your job posting. You will need to share evidence of your address to Medical Staffing team. Often new doctors will find temporary accommodation first before finding somewhere more permanent, websites such as airbnb.co.uk or sparerroom.co.uk have been useful.

4. Apply for your National Insurance (NI) number.

It can take three months to get, so apply early (<https://www.gov.uk/apply-national-insurance-number>). Note: some BRP will already have a National Insurance number already printed on the back; depending on your date of issue and visa status.

5. Open a Bank Account.

There are lots of different banks in the UK like Barclays, HSBC, Lloyd's, NatWest. Look on their websites to see what information is required to start a new account, and which ones are local to where you will be living. Medical Staffing can provide a letter to evidence your employment which will support you opening a bank account.

6. Register with the GP as soon as possible.

This is where you will be able to access routine health care, except in emergencies, where you will need to attend A&E or your local Urgent Care Centre (<https://www.nhs.uk/nhs-services/services-near-you/>)

7. Children's school applications

(<https://www.gov.uk/apply-for-primary-school-place>; <https://www.gov.uk/apply-for-secondary-school-place>). Schools will typically have their own catchment area, so try to secure accommodation near to your preferred school.

8. Develop your English language skills even further.

As psychiatrists we rely almost entirely on our communication skills to be able to assess our patients, in contrast with other specialties. Watch TV shows which are in British English rather than American English.

(<https://www.fluentu.com/blog/english/best-tv-series-to-learn-british-english/>; or <https://www.british-study.com/en/blog/best-tv-shows-to-learn-english> – halfway down the page). Watch it with subtitles on to help familiarise yourself with colloquial English, accent and usage: your patients will tend to use local slang and dialects, which you need to be aware of to really understand their narratives. It will also make your interaction with colleagues and other local people feel easier.

9. The British Council have produced a free online course to familiarise new international students with studying and working in the UK -

(https://www.futurelearn.com/courses/prepare-to-study-uk/1?_ga=2.166595965.2144498627.1537175093-1034898535.1519985788), some of which may be useful even as non-students.

10. The British Council also have a free online course in communicating across cultures

(<https://www.futurelearn.com/courses/communicating-across-cultures>), some aspects of which may be helpful.

11. <https://www.healthyenglish.club/>

is a website and app which is specifically for NHS healthcare workers which is designed for “encouraging, equipping, empowering you to thrive in British and NHS culture”

12. Royal College of Psychiatry IMG Resources Document

https://www.rcpsych.ac.uk/docs/default-source/training/img/rcpsych-img-guide.pdf?sfvrsn=af3b5e0a_2

13. NHS England - E-Learning for Healthcare NHS Induction for IMGs

<https://www.e-lfh.org.uk/programmes/nhs-induction-programme-for-international-medical-graduates/>

14. The UK weather is unpredictable. Get a small umbrella, wear layers, carry sunscreen in the summer, check the weather forecast. You never know!

B. STARTING WORK

1. Go through your employment contract and ask questions to medical staffing where in doubt.

2. There are 6 pre-employment checks that are required by law before you will be able to start work. Medical staffing will give you the forms and ask for the required evidence for:

- Identity check
- Qualifications check
- Employment history and references check
- Disclosure and Barring Service (DBS) check (also known as a criminal record check)
- Occupational health assessment
- Right to work check

3. You will be given time to complete mandatory training on KMPT iLearn within the first 2 of your job before you start the clinical role. You won't be expected to be on your ward or community base until this is done, but email your consultant ahead of time to confirm how long they have given you to complete it. Some of your training will likely be in-person too (as it was pre-Covid), and you will be given these dates and locations of where to attend.

4. You will be given an induction by the Medical Education team, a Meet Vinu session, and offered a buddy (an existing trainee in KMPT who can offer you informal support).

5. Follow the local Trusts guidelines and policies, as well as NICE guidelines. Prescribe within BNF limits and within your competencies. Download apps such as the BNF, Toxbase, Microguide (antimicrobial prescribing guidelines vary locally, even within different parts of Kent, and are decided based on local trends in pathogens and resistance). Maudsley Guidelines should be available (as a Book on the ward or as a downloadable file) and is an excellent guide to prescribing in mental health.

6. Take time to settle in before rushing into booking exams or courses. We would recommend at least 4-6 months to just focus on work and adapting to the UK before giving yourself those additional pressures.

7. If you're a MTI doctor then they may delay adding you to the rota until you have settled into the country. If you are a doctor in a training post then you should receive your on-call shift rota 6 weeks ahead of starting. The first few shifts will be after you have completed your mandatory Trust inductions, and you should be offered the opportunity to shadow an existing core trainee doctor on their shift, so that you are more familiar with the hospital, procedures, and policies, and what to expect during a shift.

8. Your team will have multidisciplinary team (MDT) meetings or handovers daily, you should attend these promptly and regularly. Engage well with team as you will learn a lot from them.

9. Document clearly all contacts with patient. Your documentation is a legal document. In KMPT we use a computer programme called RiO rather than paper notes. Progress notes need to be 'validated' (this will be explained in your RiO training). You don't know when you will need it. You should have a mindset of "If it was not documented, it was not done"; it is an evidence of the job you do. If you are seeing patients in the community, appointments should be 'outcomed' the same day. There are more specific things which will need to be done in RiO to help the Trust meet targets, this will be explained by your local team or at induction.

10. Kent is a very large county and occasionally, teaching sessions or training days may be quite far from where you live. Most teaching is still done by video conferencing (we tend to use Lifesize in KMPT), but the sessions held in-person are a good opportunity to meet with doctors from across the trust, for networking and socially. If you don't drive, there is public transport (search on TFL online to plan your route), or a colleague who drives may be kind enough to give you a lift if you organise this ahead of time.

8. If you are not sure, ask questions – no question is a silly question, and nobody will mind: by clarifying what you aren't sure about, you are prioritising safe patient care. If your query can't be answered, ask them to point you in the right direction of who to ask instead.

C. SUPERVISION

1. Supervision is an allocated hourly slot with your clinical supervisor. You need to keep a record of supervisions. You can discuss anything appropriate; clinical cases you are unsure of, career goals, study leave plans, or any problems which may arise. It is best to plan ahead what you would like to discuss, to have an interactive discussion.

2. You will also have an educational supervisor; this may be the same person as your clinical supervisor, or a different named person. Depending on your grade. You should also communicate with them regularly.

3. It is good to discuss each patient with your consultant at least initially, depending on your level of competency – ask your consultant what they would like you to do.

D. TEACHING

1. Attend all teaching sessions if you can, as this will add to your skills and knowledge, and allow you to meet the other doctors virtually or in-person. You will be invited to attend various different types of sessions, including Balint group, CPD, and other psychiatry teaching sessions. There is also the weekly journal club which is for critical appraisal of scientific papers, and case presentations.

E. PORTFOLIO

1. Learn to use the RCPsych online portfolio if you're a MTI or Psych trainee (you cannot access this without a trainee RCPsych membership, so sign up).

2. Create goals and plans for the posting. For example, know how many CBDs and ACEs you are expected to have annually. Get used to doing 'reflections' on difficult cases or difficult situations you have been in (being cautious what you include; it is about what you learned from the case, not what you did wrong).

3. Do not wait until the end of posting to do your case presentation. Interesting cases can be saved on your laptop anonymised and uploaded to your portfolio later.

4. Keep an eye out for any emails about relevant conferences, courses, free webinars. Some will be emailed around by Medical Education, others you may find online. You may be able to claim the course fees back as Study Leave, but check with your supervisor about the dates before booking anything.

5. Participate in ongoing Research, Audits, QI projects – keep your eyes open for opportunities.

F. What I wish I knew when I arrived... from an MTI perspective:

"I wish I had orientation that is tailored to me as IMG coming in For MTI fellowship. This is my first experience in the NHS and was lost initially with all the mails coming in for me without any proper orientation as to how the NHS works. I had to learn by myself most of it but that was without me initially making wrong turns."

"Another aspect I wish I knew about was appraisal. If I had insight into appraisal, I would have started from the beginning to fill my portfolio. I would give out patient feedback questionnaires and the multisource feedback."

“I wish I knew about different treatment pathways available and know when to signpost patients to an appropriate service. I have learnt that good treatment plan depends on this. The earlier you learn this, the earlier you will be able to work independently with less supervision. “

This guide was written by Dr Jo Philip-Watson with the support of Dr Azuka Egemonye, Dr Fejiro Ofovwe, Dr Swarupa Sribalaskanda, and Dr Vinodini Vasudevan. With thanks for authors of the document on which this guide was based, titled “*MEDICAL TRAINING INITIATIVE (MTI) DOCTORS IN KMPT*”: Dr Aregbesola Motolani, Dr Awolaran Dorcas, Dr Olaluwoye Oluwaseun, Dr Onipede Kehinde& the Medical Education Team.

G. WHO TO CONTACT

KMPT Medical Education team - www.kmpt.nhs.uk/medical-education

will oversee your psychiatry induction, teaching programme, study leave, mid-term/end of term reviews, taster requests, travel expense claims (relating to teaching and induction) and any other support that may be required

KMPT Medical Staffing (HR) team will deal with your Pre employment checks, contract, on call rotas, any rota related travel expense claims, annual leave and sick leave, job plans, appraisals and SARD. They can be contacted at kmpt.medical.staffing@nhs.net

KMPT L&D Department

WILL oversee all YOUR Trust Mandatory Training and iLearn. kmpt.training@nhs.net