



Welcome to Wessex

International Medical Graduates Handbook

Contents

Prefix	3	During your post	14
THE INTERNATIONAL MEDICAL GRADUATE FELLOWSHIP TEAM FOR 2020 – 2021	3	LEARNING TO REFLECT.....	14
Introduction	4	Education and support	15
LIVING IN WESSEX.....	4	PORTFOLIO AND WORKPLACE BASED ASSESSMENTS.....	15
WORKING IN WESSEX.....	5	YOUR CLINICAL SUPERVISOR	16
Settling Down	7	YOUR EDUCATIONAL SUPERVISOR	17
CORONAVIRUS GUIDANCE	7	Career planning	18
BRP & OPENING A BANK ACCOUNT	8	APPRAISALS, ARCP & REVALIDATION	18
ACCOMMODATION AND RENTING.....	8	APPLYING FOR TRAINING POSTS	19
GROCERIES AND AMENITIES	9	Further resources and links	20
TRANSPORTATION AND DRIVING.....	10		
Before starting your post	11		
CHECKLIST	11		
ONLINE LEARNING RESOURCES.....	12		
CULTURAL AND LANGUAGE DIFFERENCES.....	13		



**HHE WESSEX WELCOMES YOU
AND WISHES YOU A HAPPY AND
SUCCESSFUL TIME IN WESSEX**

Prefix

THE INTERNATIONAL MEDICAL GRADUATE FELLOWSHIP TEAM FOR 2020 – 2021



Dr. Peter Soliman

GPVTS Portsmouth

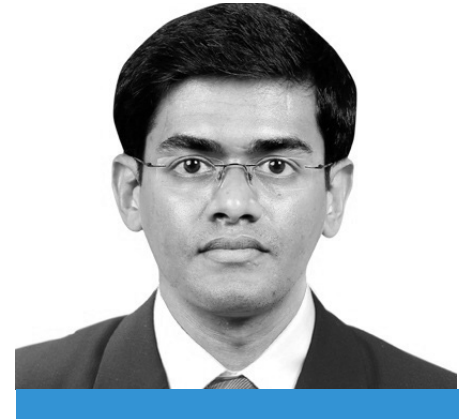
International Medical Graduate
Fellow, Health Education England
Wessex



Dr. Syed Muhibullah Husaini

GPVTS Portsmouth

International Medical Graduate
Fellow, Health Education England
Wessex



Dr. Midhun Paul

CMT Dorset

International Medical Graduate
Fellow, Health Education England
Wessex

MENTORS



Dr. Fatima El Bakri

Consultant Microbiologist - HHFT

Associate Dean, Health Education
England Wessex



Dr. Stuart Purcell

Consultant Psychiatrist - DHUFT

Director of Medical Education,
Health Education England Wessex

SPECIAL THANKS TO

Dr. Wael Saleh, former International Medical Graduate Fellow, for compiling the original IMG booklet which provided us the inspiration for this handbook.

Mr. Shakeel Ahmad of Solent University for his support in the publishing of this handbook.

Introduction

Congratulations on selecting one of the finest regions of England to commence your medical career.

The world as we are accustomed to, and certainly the United Kingdom, has now changed due to the recent pandemic outbreak that has altered the lives of billions across the entire globe. The UK's National Health Service (NHS) was first founded in 1948 and has exponentially developed to become the world's largest employer. The dedication and commitment of the thousands of NHS workers during the pandemic highlighted the values that we admire as medical professionals.

While things may take some time to return to normality, we aim to briefly highlight what you can expect when settling down and commencing your post.

We know that you will enjoy your time here in Wessex through your post and hope that you take the time to explore and experience the sunny beaches, cultural heritage sites and bustling cities that this vast region has to offer.

“Wessex is the land of King Arthur and King Alfred, of Jane Austen and Thomas Hardy, of Bath and Stonehenge. It was the birthplace of England and England's heritage remains very much part of the Wessex way of life. It is a land of beautiful countryside, historic market towns and ancient villages not far from London, but in every other way very far from the pressure, pace and congestion of the urban world.”

LIVING IN WESSEX

Wessex covers a vast swathe of Southern England, and boasts some of the sunniest parts owing to its relatively milder climate, especially during the summers. It is known to have some of the finest sand beaches within the UK. In addition, it has a brilliant mix of larger cosmopolitan and smaller urban or rural places to live with easy access to the coast, the New Forest and the Isle of Wight. The region has become more diverse over time, owing to its easy rail links to London and the Midlands.

Wessex is home to an increasingly diverse population including tourists, university students and medical staff. This can be noted throughout the region as you explore and find a range of restaurants that serve ethnically diverse food as well as specialist ethnic food stores. Furthermore, the region has good links to local airports to continental Europe from Southampton, Bournemouth, London Heathrow and London Gatwick airports.



WORKING IN WESSEX

Whether you are about to commence your first medical post within the UK or planning on settling down, Wessex provides a multitude of opportunities for your medical career to progress.

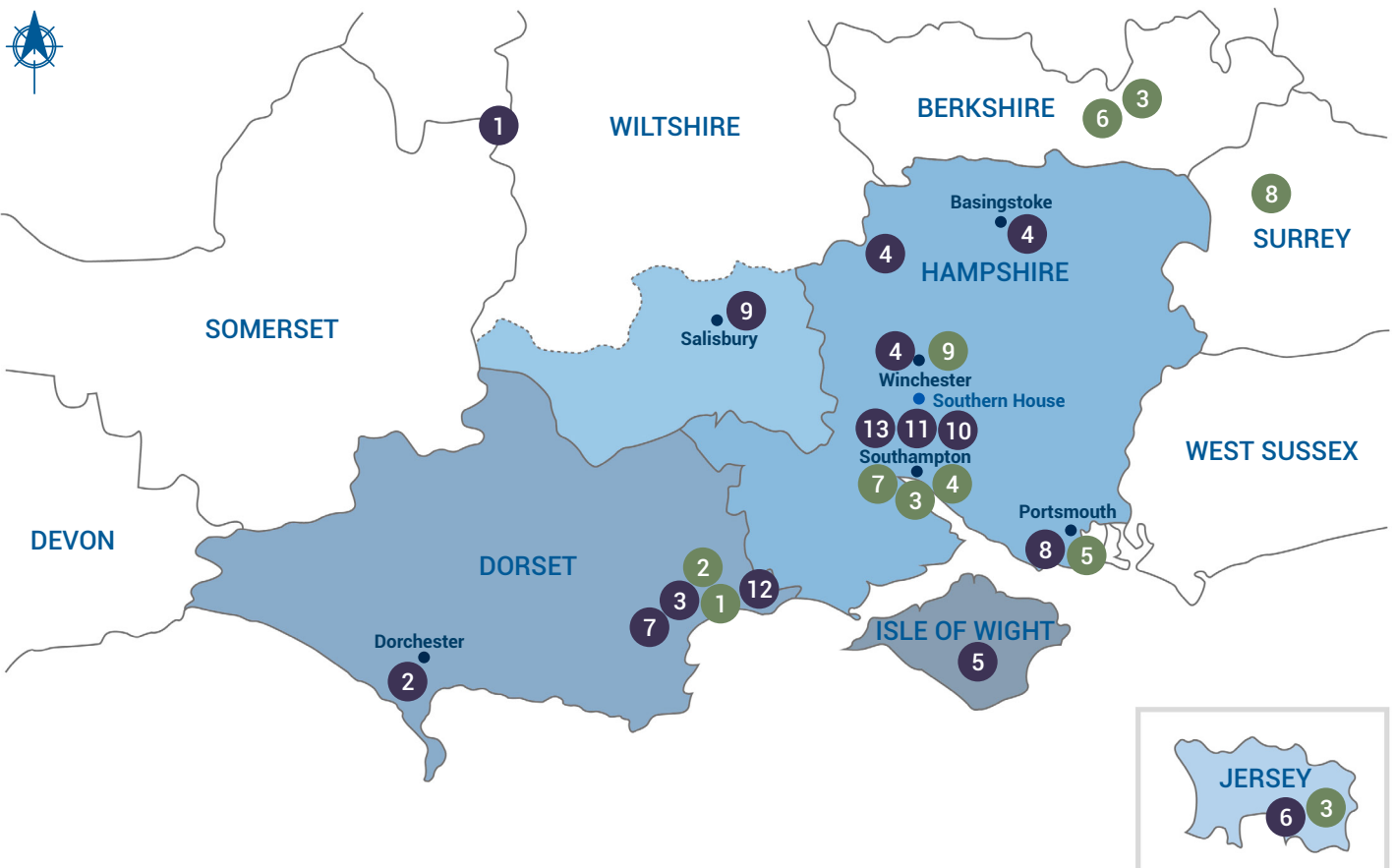
The training programmes offered by the local Deanery have been generally highly rated in recent General Medical Council satisfaction surveys.

Higher education institutes

- 1 AECC University College
- 2 Bournemouth University
- 3 BPP University
- 4 Solent University
- 5 University of Portsmouth
- 6 University of Reading
- 7 University of Southampton
- 8 University of Surrey
- 9 University of Winchester

Local NHS Service providers

- 1 Avon and Wiltshire Mental Health Partnership NHS Trust
- 2 Dorset Country Hospital NHS Foundation Trust
- 3 Dorset Healthcare University NHS Foundation Trust
- 4 Hampshire Hospitals NHS Foundation Trust
- 5 Isle of Wight NHS Trust
- 6 Jersey General Hospital, States of Jersey
- 7 Poole Hospital NHS Foundation Trust
- 8 Portsmouth Hospitals NHS Trust
- 9 Salisbury NHS Foundation Trust
- 10 Solent NHS Trust
- 11 Southern Health NHS Foundation Trust
- 12 The Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust
- 13 University Hospital Southampton NHS Foundation Trust



You will most likely be posted in one of these local NHS service providers in Wessex:

- Avon and Wiltshire Mental Health Partnership NHS Trust
- Dorset County Hospital NHS Trust
- Dorset Healthcare University NHS Foundation Trust
- Hampshire Hospitals NHS Trust
- Isle of Wight NHS Trust
- Jersey General Hospital, State of Jersey
- Poole Hospital NHS Foundation Trust
- Portsmouth Hospitals NHS Trust
- Salisbury NHS Foundation Trust
- Solent NHS Trust
- Southern Health NHS Foundation Trust
- The Royal Bournemouth and Christchurch Hospitals NHS Foundation Trust
- University Hospital Southampton NHS Foundation Trust



Settling Down

CORONAVIRUS GUIDANCE

The UK's response to the current COVID-19 pandemic is defined by 5 levels with corresponding national actions.

As of the time of writing this handbook, the UK is expected to de-escalate the alert to level 3, gradually relaxing restrictions and social distancing measures with plans to reopen non-essential businesses with a few exceptions on June 4, 2020.



Please familiarise yourself with the latest guidance and instructions from the government on their official online website

[Click here](#)



UK ALERT LEVELS	Level	Description	Action
	5	As level 4 and there is a material risk of health care services being overwhelmed	Social distancing measures increase from today's level
	4	A COVID-19 epidemic is in general circulation; transmission is high or rising exponentially	Current social distancing measures and restrictions
	3	A COVID-19 epidemic is in general circulation	Gradual relaxing of restrictions and social distancing measures
	2	COVID-19 is present in the UK, but the number of cases and transmission is low	No or minimal social distancing measures; enhanced testing, tracing, monitoring and screening
	1	COVID-19 is not known to be present in the UK	Routine international monitoring



ACCOMMODATION AND RENTING

The majority of doctors relocating to the region will initially lodge with their hospital's accommodation to facilitate them commencing their posts. It is common that some hospitals will let you reside in their designated accommodation temporarily until you can find a property to rent or share.

- There are usually adverts relating to house sharing or vacant rooms. You can ask your HR department or accommodation managers more about these
- RightMove is arguably the most popular site to search properties to rent. Renting a property takes time and you should familiarise yourself with what to expect



Please familiarise yourself with this overview of renting within the United Kingdom

[Click here](#)

BRP & OPENING A BANK ACCOUNT

Collecting your BRP should be the first thing to address after your arrival. You should have received instruction from the Home Office in this regard as part of your visa application. You should also apply for a bank account at the earliest (it can sometimes take a few days) as you will need this to receive your first and subsequent salaries in time. You will also have the advantage of being able to set up direct debits (automatic monthly payments/instalments) for various fees and subscriptions as well as your GMC Fee.

Here are a few popular banks that international medical graduates often open their first bank account with. You can find more information and the contact information of their branch closest to your accommodation on their online websites:

- [HSBC UK](#)
- [Barclays](#)
- [Lloyds](#)
- [Santander](#)
- [Nationwide Building Society](#)

Please note that irrespective of which bank you choose to open your account with, you will need the following documents before applying for a bank account:



Employment Contract

Obtained from your employer's Human Resources department.



Original Passport



Evidence of Address

Obtained from your employer or Tenancy Agreement (if renting) Providing an address is important because the bank will be posting your debit (and credit card if you opt to have one) through regular mail.



Photographic Identification



Biometric Residence Permit (BRP) with National Insurance (NI) number

GROCERIES AND AMENITIES

One of the major changes that you will experience when initially settling are the supermarket chain brands that you will find across Wessex and the rest of the UK.

It is important to also note that shops generally close earlier than what you may have been used to. Therefore, it is essential to plan and organise your grocery shopping well ahead of time.



Popular supermarket brands

M&S

Waitrose

CO
OP

Sainsbury's

Iceland

ASDA

TESCO



TRANSPORTATION AND DRIVING

Even though the UK boasts one of the best transport networks in the world, we strongly encourage and advise you to buy your own car. Some speciality training programmes may include this in their eligibility criteria for training posts.



Driving

You may have already arrived in the UK with an International Driving Permit; this is valid for one year after your date of arrival. Please apply for a provisional driving license online, which will enable you to take the theory test, driving lessons (if needed) and practical test. Obtaining a valid driving license is the first step in obtaining a car.



Railway

A major mode of transportation around the UK is the railway network at affordable rates. The most popular website to purchase and view connections is [Trainline](#).

Other websites relating to local service providers are:

- CrossCountry
- First Great Western
- South Western Railway
- Southern Railway



Coach

The most common coach service is [National Express](#) which operates all over the country and connects to many airports. Check their online website for their timetable.



Airports

There are 4 international based airports located within Wessex:

- Bristol Airport (largest international airport in Wessex and with global flights)
- Southampton International Airport (mainly serves flight to Europe)
- Bournemouth International Airport (caters for traffic to and from a large number of places all over Europe and the Mediterranean)
- Exeter International Airport (caters to flights from Canada and much of Europe)

It is important to note that the two most commonly used airports that you may be familiar with are the two London based airports, close to Wessex:

- Heathrow International Airport
- Gatwick International Airport

Before starting your post

CHECKLIST

We developed this checklist as a tool to help you think about what you should be considering prior to commencing your post.

- Read this handbook
- Obtain your Biometric Residence Permit (BRP)
- Open a bank account
- Contact the Occupational Health Department within your organisation and schedule an appointment to complete your pre-employment checks. This may include a blood test and providing proof of vaccinations. Some Trusts do not allow employees to commence work without completing this process and receiving clearance
- Consider applying for medical indemnity with organisations such as MDU, MDDUS. Your employer will have a form of indemnity protection
- Consider joining the British Medical Association
- Consider contacting your Trust's Resuscitation Department to find out about the nearest dates for Basic Life Support and Advanced Life Support training
- Consider reading and completing some online learning modules pertaining to common topics within your speciality or department. Online resources can be found at the end of the handbook
- Relax and go out and explore your surroundings. You should be proud of your accomplishments and achievements



ONLINE LEARNING RESOURCES

e-LfH: e-Learning for Health Website

[Click here](#)

This website has online training modules that you should complete before and during your placement. We encourage you to complete the following modules:

Induction for International Doctors

- Introduction to Working in the NHS
- Social Aspects to UK Clinical Practice
- Ethical and Legal Aspects to UK Clinical Practice
- Patient Safety Aspects to UK Clinical Practice
- Professional Aspects to UK Clinical Practice

Doctors in Training Induction

- Safe Prescribing and VTE Scenario
- Blood Transfusion and Consent Scenario
- Mental Capacity Act and Death Certification Scenario

British Medical Journal e-Learning Online Courses for Healthcare Professionals

[Click here](#)

There is a vast amount of learning material and modules available on this online resource and it will help to refresh your knowledge and provide essential information to ease your transition into UK medical practice.



CULTURAL AND LANGUAGE DIFFERENCES

The UK is one of the most culturally diverse countries in the world, and you will see this reflected within the NHS workforce. The principles of equality and diversity are at the heart of everything we do.

Most common nationalities of NHS staff		
	UK/British	1,062,273
	Indian	25,809
	Filipino	22,043
	Irish	13,697
	Polish	9,904
	Nigerian	8,241
	Portuguese	7,469
	Italian	6,528
	Spanish	5,580
	Romanian	4,731
	Pakistani	4,313
	Zimbabwean	4,192
	Greek	3,317
	Ghanaian	2,863
	Malaysian	2,491
	German	2,485

Similar to being a part of a diverse workforce, you will be looking after patients from various ethnic and cultural backgrounds. In this context, it is important to be aware of various cultural and language differences, that can have an impact on our consultations and interactions. You will come across many new colloquial expressions, words and phrases, and it may take some time to get used to these. Please do not be afraid or hesitant to ask patients and colleagues to clarify what they mean by a certain phrase, as this will help you in your day-to-day and future practice.

A very simple example of language difference: In most places, "feeling/being sick" means to feel ill or unwell but, here in the UK, it usually implies being nauseous or vomiting.

Within medical practice, another example of an important cultural difference to point out is what can be referred to as "service provider dominance". In simple words, this means that in some cultures, the doctor is expected to be authoritative within the consultation and in providing care to the service user (patient). As per the GMC, the patients' autonomy and choice should be the guiding principle; your role is to provide advice and support in order to help patients make the best choice.

Remember that patients have the right to make unwise decisions regarding their own health and treatment (as long as you are satisfied that they are mentally competent to make this decision).

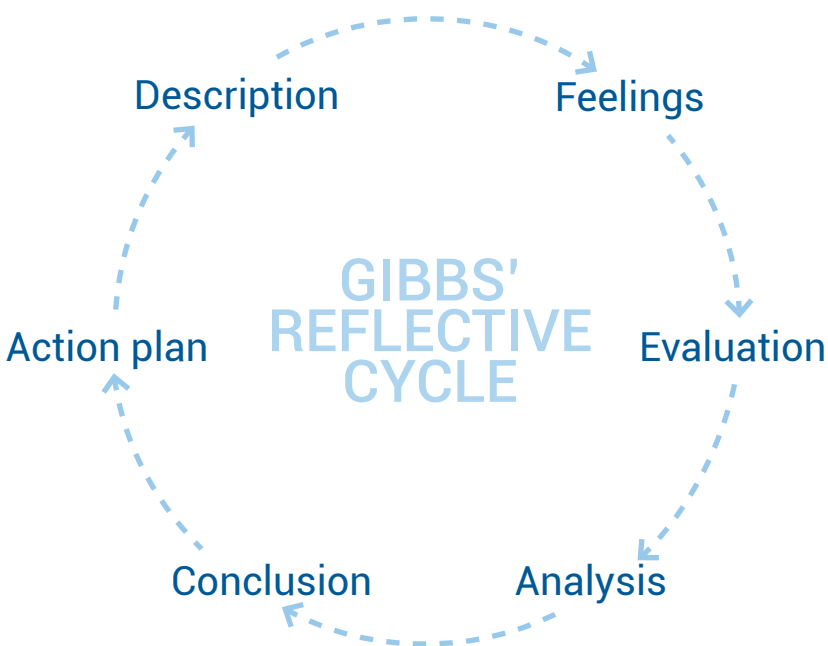
Being sensitive to and demonstrating awareness of cultural differences practices and beliefs in our interactions with other people is an important aspect of personal and professional development; it will help improve your communication and consultation skills, leading to better outcomes in professional assessments.

If you are keen to learn more about the character, habits and particularities of the English people, please read "Watching the English" by anthropologist Kate Fox.

During your post

LEARNING TO REFLECT

Reflection is a purposeful analysis of one's own experiences and behaviours, practice, clinical skills and knowledge, and our interactions with colleagues and patients. It is through reflection that we can identify our learning needs and work towards improvement in our personal and professional development. Your WPBAs should include reflective analysis and your portfolio should include additional reflective entries.



An example of a reflective process is the Gibbs' Reflective Cycle, which was developed Graham Gibbs in 1988 to give structure to learning from experiences. It offers a framework for examining experiences, and given its cyclic nature lends itself particularly well to repeated experiences, allowing you to learn and plan from things that either went well or didn't go well. It covers 6 stages:

- **Description** of the experience
- **Feelings** and thoughts about the experience
- **Evaluation** of the experience, both good and bad
- **Analysis** to make sense of the situation
- **Conclusion** about what you learnt and what you could have done differently
- **Action plan** for how you would deal with similar situations in the future, or general changes you might find appropriate

Education and support

PORTFOLIO AND WORKPLACE BASED ASSESSMENTS

As a doctor working in the UK, you are expected to record and maintain a portfolio of your clinical and educational competences.

The system currently in use for Foundation Doctors and SHOs (FY2s) is called the "Horus ePortfolio", and is available for free even if you are not in a training programme. Please contact your Trust's Education Centre to request access if it has not been provided.

If you wish to continue working in non-training posts but would like to have access to a speciality training ePortfolio, you may be able to purchase this from the relevant speciality Royal College website. Depending on your individual training needs and speciality, you may also need to use additional websites/apps such as elogbook.org (for recording surgical procedures).

You should be able to demonstrate your competence progression in your portfolio through Workplace Based Assessments (WPBAs). Different specialities may use these assessment tools differently, and not all specialities will use all methods. Your portfolio should provide links to the curriculum and minimum requirements for your level of training and speciality. It is important to discuss this with your clinical supervisor well in advance.

Workplace Based Assessments

- 1. Direct Observation of Procedural Skills (DOPS):** designed to evaluate the performance of a trainee in undertaking a practical procedure, against a structured checklist.
- 2. Mini-Clinical Evaluation Exercise (Mini-CEX):** evaluates a clinical encounter with a patient to provide feedback on skills essential for good clinical care such as history taking, examination and clinical reasoning.
- 3. Case Based Discussion (CBD):** evaluates trainee's management of a patient and provides feedback on clinical reasoning, decision-making and application of medical knowledge in relation to patient care. It also serves as a method to document conversations about, and presentations of, cases by trainees. The CBD should focus on a written record (such as written case notes, out-patient letter, discharge summary).
- 4. Multi-source Feedback (MSF):** collects and provides feedback from a variety of nominated colleagues to evaluate performance of a trainee (strengths and weaknesses).



There are other forms of WPBAs (beyond the scope of this handbook). You can consult the [Joint Royal College of Physicians Training Board](#) or your speciality specific [Royal College website](#) for more details.



YOUR CLINICAL SUPERVISOR

The GMC defines a clinical supervisor as a trainer who is selected and appropriately trained to be responsible for overseeing a specified trainee's clinical work and supplying constructive feedback during a training placement.

This will provide you with the opportunity to discuss individual cases in depth, reflect and review on your performance, and identify training and continuing development needs. Most importantly, once you

have demonstrated the necessary competences (through Workplace Based Assessments), they will be able to sign off your CREST form, or provide evidence to your Educational Supervisor for the same.

You should be informed in writing the name of your clinical supervisor before the start of your post, or as part of departmental induction. Please contact your HR Department in case you have not been provided with this information.

You should contact your supervisor at the earliest to arrange an initial meeting. We urge you to be proactive in this regard and make sure you have scheduled a meeting prior to, or within the first week of your placement.

We have created a separate checklist for what you should discuss with your supervisor in your initial meeting. Please ensure you document the discussion and action plans from this meeting in your ePortfolio.

YOUR EDUCATIONAL SUPERVISOR

The GMC defines an educational supervisor as a trainer who is selected and appropriately trained to be responsible for the overall supervision and management of a specified trainee's educational progress during a clinical placement or series of placements. The educational supervisor is responsible for the trainee's Educational Agreement.

Your educational supervisors' responsibilities include:

Educational management

- Ensuring that your educational and clinical progression is in line with that required for your level of training, and according to your individual career needs
- Ensuring you are provided with ample training and educational opportunities, for example making sure you are provided with an opportunity to work in another clinical setting to satisfy a required competence
- Acting as a first port-of-call for any concerns that you may want to raise about your training or workplace

Educational meetings

- Initial meeting
- Midpoint meeting
- End of placement meeting



Broadly speaking, educational meetings serve to initially discuss and set out your training goals and requirements, review progress and concerns, and modify goals at the mid-point meeting, and review progress once again at the end of the placement to ensure the requirements have been satisfied and goals have been met. Please keep a record of your meetings and what was discussed in your ePortfolio. This evidence will contribute towards your annual appraisal/ARCP.

Career planning

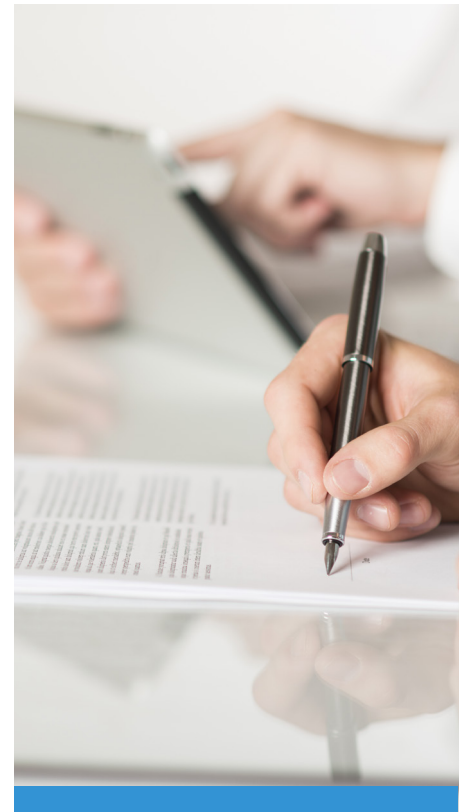
APPRAISALS, ARCP & REVALIDATION

An appraisal is an annual review of your overall performance, where you can provide supporting evidence to demonstrate that you are meeting the principles and values as set out by GMC's Good Medical Practice. For doctors in training, this process is referred to as ARCP (Annual Review of Competence Progression). The GMC requires doctors to undergo Revalidation at the end of each 5-year cycle of appraisals/ARCPs to maintain their registration and demonstrate fitness to practice.

It should be pointed out that these are not "pass or fail" exercises, but rather developmental. You will however receive an outcome certificate, which you should collect as part of evidence for your Revalidation. Within each yearly review period, you will also be expected to address previously identifies areas of development.

There are six types of supporting information that you must collect, reflect on and discuss at your appraisal:

1. Continuing professional development (this includes making sure you have recorded sufficient clinical evidence and WPBAs to your portfolio, and are up-to-date with the latest guidelines)
2. Quality improvement activity
3. Significant events
4. Feedback from patients or to those to whom you provide medical services
5. Feedback from colleagues
6. Compliments and complaints



For doctors not in training:

Most Trusts will use their own appraisal software or system, which is different from the ePortfolio. Your Trust Revalidation Team will contact you and provide login details for this. You will have to provide evidence of your supporting information and complete all sections of the appraisal checklist. This can be a time-consuming process, so please plan for it in advance. Your appointed appraiser will be able to give you some guidance in completing this before the date of your appraisal. Please note that your appraiser is likely to be a consultant or educator from another department/speciality and you may not have any prior acquaintance.

APPLYING FOR TRAINING POSTS

The ultimate goal for most doctors new to the UK is to enter a speciality-training programme and become a consultant in their chosen field.

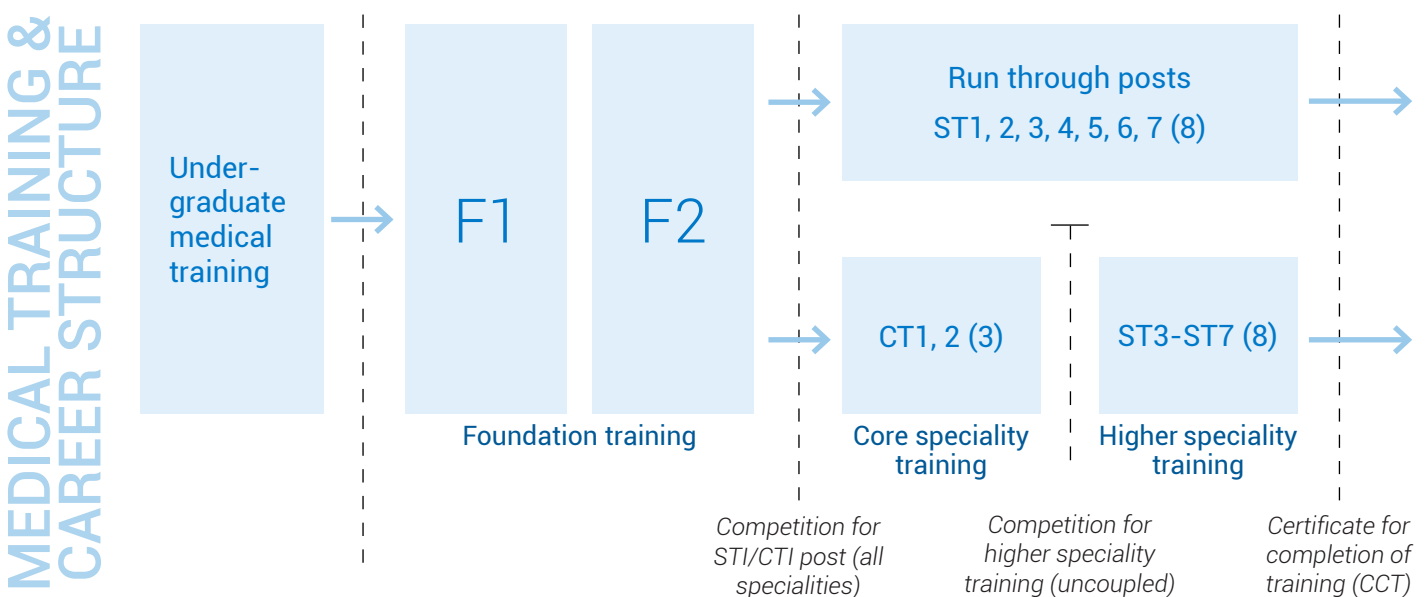
In recent months, this has become even more accessible to IMGs through a relaxation in visa eligibility requirements for application to these posts. Applications for all training posts, irrespective of speciality or level of training, takes place through a central application system called Oriel. The system is currently undergoing some changes; more information can be found on the Oriel

website. Please register an account on this portal and prepare your profile to apply for a training post.

A recruitment timeline is available online and published on the HEE Specialty Training website. The application window for "Round 1" is usually between the first and last weeks of November, therefore you should aim to keep your application ready by end of October. There are also opportunities to find posts at other times through re-advertisement and "Round 2".

In reality, most IMG's new to the UK at Foundation or SHO level may not be able to apply for training during their first year in the UK as they may not meet the eligibility criteria as set out in the Person Specification Guidelines for each speciality. Please refer to these documents relating to your area of interest and prepare your portfolio to satisfy these requirements.

The diagram below gives a broad overview of medical training and career structure, with entry points for applicants detailed.



Certificate of CCT (or CCST) refers to completion of training and means you are now qualified as a consultant in that speciality with recognition in most countries of the world.

Some doctors may choose an alternate or non-training route to become a consultant. This is known as the CESR (Certificate of Equivalence of Specialist

Registration) route. There are both advantages and disadvantages in opting for this pathway, and doctors may opt for this based on personal or professional needs.

If you would like further information and guidance on this, please discuss this with your educational supervisor.

Further resources and links

SUPPORT

Wessex Professional Support Unit

[Click here](#) 

CREST FORM

Oriel UK

[Click here](#) 

E-LEARNING

E-Learning for Health

[Click here](#) 

GUIDE FOR IMGs

Working Training NHS Guide for IMGs

[Click here](#) 

DIFFERENTIAL ATTAINMENT

General Medical Council

[Click here](#) 

WORK BASED ASSESSMENTS

Joint Royal Colleges of Physicians Training Board

[Click here](#) 

REFLECTIVE WRITING

University of Edinburgh

[Click here](#) 

REFLECTIVE WRITING

University of Bradford

[Click here](#) 

ARCP AND REVALIDATION

Health Education England

[Click here](#) 

CAREER PROGRESSION

BMA

[Click here](#) 

RENTING AND ACCOMODATION

GOV UK

[Click here](#) 

PRIVATE RENTING

GOV UK

[Click here](#) 