



Medical Training Initiative (MTI)

Booklet for new starters



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Dear RCOG MTI Trainee,

A very warm welcome from all of us to the RCOG MTI scheme. Firstly, huge congratulations on obtaining your MTI training post; as you will be aware the MTI Scheme is a highly competitive process selecting the very best candidates from across the globe. We receive multiple applications for every training post, so just getting to this point is a considerable achievement for which you should be proud.

MTI is an excellent opportunity for you to solidify and develop your clinical skills and wider skills set, such as teamworking, communication skills and leadership. Exposure to the NHS system will no doubt help you with passing the Part 3 exam and obtaining your MRCOG, which will open doors for your future career. We very much hope your experience in the scheme will be professionally and personally rewarding and further enhance your knowledge and skills in O&G.

As an RCOG MTI Trainee, you will not only be an ambassador for the scheme but for your home country too. We hope you will use the opportunity to educate your colleagues in the UK about women's healthcare in your home country and that you will return home after completing the MTI training to utilise what you have learnt to improve patient care in your home country in line with the philanthropic aims of the MTI Scheme.

We recognise that undertaking MTI training is also a significant life event. Relocating to the UK and settling in to living and working a new country, different healthcare system and culture is a major life event which brings with it great excitement and at times challenges and worries. Remember you are not alone; the RCOG MTI team are here to help and support you throughout this process as well as your MTI Regional Champion, RCOG Liaison Group Chair and MTI Buddy. We are all happy to be contacted about any queries or issues you need support with throughout the 2 years of your training and beyond.

We hugely value your feedback throughout your time in the UK in MTI Training so make sure to participate in the MTI annual surveys and annual meetings. We are always striving to improve the scheme so please do send through any ideas and suggestions you have to the RCOG MTI Office and we hope you will continue to support the scheme after you have completed the 2 years of training.

We hope you will enjoy your experience and continue to be part of the RCOG family for many years to come.



Dr Raneer Thakar
[RCOG President](#)

Part 1: Meet the Team

RCOG MTI Team



Mr Sanjay Rao, RCOG MTI Committee Chair

Mr Rao is a Consultant Obstetrician and Gynaecologist, working at The James Cook University Hospital, South Tees NHS Foundation Trust and Head of School (HoS) for O&G for the Northern Deanery. He has extensive experience in postgraduate medical education. He has a master's degree in clinical education. He has been a PI for multicentric research trials and specialty lead for postgraduate education. He is enthusiastic about quality assurance and achieving best standards in postgraduate education, which forms the foundation for patient safety and evidence based clinical care.



Mr Ahmed Khalil, RCOG MTI Officer

Mr Khalil is a Consultant Obstetrician and Gynaecologist with a specialist interest in fetal and preterm medicine, working at Dartford & Gravesham NHS Trust. Mr Khalil completed his medical training and PhD in Egypt before coming to work in the UK.

Mr Khalil has a strong interest in supporting trainees and IMG doctors. He is an educational supervisor for Ob/Gyn trainees (ST3 and ST1), as well as GP trainees. He is also Deputy of Women's Health teaching for Year 4 medical students from Kings College. He has been an examiner for the MRCOG part 3 since 2018 and an appraiser since 2022. He is the Trust SAS doctors lead for obstetrics and gynaecology since 2021.



Elizabeth (Liz) Russ is the RCOG MTI Coordinator who oversees and supports the work of the MTI Office and provides secretarial support to the MTI Committee

You can get in touch with the MTI Team at MTI@rcog.org.uk / +44 (0) 20 7772 6344

RCOG MTI Committee

Meets formally three times a year. Responsible for the MTI applications process and placement post applications and matching processes, MTI educational standards and quality assurance of the RCOG Medical Training Initiative scheme.

RCOG MTI Regional Champions

Appointed for three-year terms, they act as advisors for host trusts and potential employers; provide pastoral support for MTI doctors already in training in the UK and their Educational Supervisors; and support the Annual Review of Competencies (ARC) process for MTI trainees.

Your RCOG MTI Regional Champion can provide informal advice or guidance on MTI-related issues and queries in the first instance.

RCOG Officers

There are six honorary Officers, who each serve for a maximum of three years. The President is elected by Fellows and Members in the UK and Ireland, while the five Vice Presidents are elected by RCOG Council. The current President and Vice Presidents were elected to office in 2022, and will serve a three-year term. The Vice President for Global Health, Professor Hassan Shehata and Vice President for Education, Mr Ian Scudamore, both sit on the RCOG MTI Committee and are heavily involved with the governance, quality assurance and educational content of the MTI Scheme. [Read more](#)

RCOG International Representative Committee (IRC) Chairs

RCOG IRCs act as the liaison between members in their country and the College, by seeking their views and ensuring that the Committee represents all members' professional and clinical interests. [Read more](#)

RCOG Liaison Group (LG) Chairs

RCOG Liaison Groups (LGs) are made up international doctors resident in the British Isles, or doctors with a strong interest in a specific country, who wish to support development of women's health care in that region. Each group is known as the RCOG (country) Liaison Group. [Read more](#)

Part 2: Preparing for your arrival and arriving in the UK

Packing what you need for life in the UK: what to bring with you

Please ensure you do not bring anything into the UK that is not [permitted by Customs](#)

Important documentation

Prepare well in advance what you need to bring to the UK for yourself and also any dependents, we suggest emailing yourself photos or scans of your important documents so you can access them from any electronic device. We also recommend travelling with the original hard copies in your hand luggage to minimise the possibility of losing them. Please ensure these are translated into English where applicable.

- Passport
- Birth certificate
- Marriage certificate (if applicable)
- Visa vignette
- Medical and vaccination (including COVID vaccine) history
- Evidence of where you will be staying in the UK
- Letter from Employing Body confirming offer of employment
- Medical qualification certificates
- Driving license
- Any documentation/certificates of importance for dependents (e.g. legal custody documents, consent from other parent if travelling alone with minor children)

Clothing

You should come prepared for the unpredictable weather in the UK and be particularly mindful of cold weather during the winter months. It is best to pack different layers of clothing, so you can easily adapt to changes in the weather.

You may wish to purchase a thick yet lightweight winter coat whilst in the UK to ensure it is warm enough, this will also save you valuable packing space. Clothing stores such as Primark, Matalan and

Supermarkets (e.g. Tesco's, Asda, and Sainsbury's) all sell good quality non-branded reasonably priced coats.

You should check the dress code with HR at your employing Trust, but you will likely be required to dress smartly whilst at work. Please note you will likely need to wear short sleeved/above the elbows clothing (for infection prevention) majority of the time whilst you are at work. Women should also wear stud type earrings.

Other essentials

With the cost of luggage allowances for airlines ever increasing packing minimally is highly recommended. Only pack what is essential for the first few days and weeks in the UK. Once in the UK you can find pretty much anything you would need on the high street or online though Amazon and eBay. Some suggested items for packing:

- Travel adapters and voltage converters: UK power sockets deliver an average voltage of 230v and plugs are Type G.
- Electronics: check voltages before you decide which to bring with you as UK sockets may deliver more power than your electronics can handle.
- Currency (GBP): check [government advice](#) on how much you can bring.
- Medication: you may wish to bring a small supply of medication to last while you wait to register with a GP, check government advice on what you can bring. Please also note that which medications are prescribed and which you can buy over the counter without a prescription may differ from your home country, so check this before you travel

There is no need to bring any food or other consumable items with you into the UK. Most major supermarkets have well stocked world food sections and in metropolitan cities shops cater for the needs of multicultural populations, so you are likely to be able to find whatever food or goods you need in the UK.

Money and salary

Salaries in the UK are generally paid monthly in arrears. Each employer will have a set monthly date for payment of salaries e.g. 25th of the month and monthly cut off by which they need the paperwork to process the salary payment in that months payment run. Normally you will only be paid a salary once you have started work, which must be after ID Checks and OH checks, and have your BRP, NI number and UK bank account. Please check with HR regarding any salary queries.

Placements on the RCOG MTI scheme are paid. The salary that the MTI doctor receives is in line with trainees at a similar level in the UK. All trainees can expect to commence their MTI training at an equivalent salary to ST3 level. Some hospitals take prior international experience into account and some do not. This is at the discretion of the hospital and not the RCOG. Hospitals can employ the MTIs under the 2002 or 2016 junior doctor contract, these have differing pay scales. Please check with your Trust on this. Read more about this on the [BMA website](#)

As you may have to work several weeks before you receive your first months' salary we recommend coming to the UK with enough money to sustain you for at least 1-2 months. If your start in post is delayed after your arrival to the UK and you are struggling financially speak with HR at your Trust.

Payroll

NHS Payroll gives a good overview of [what your payslip will look like](#) and what each of the different area on the payslip mean.

Pension

All employers in the UK must by law provide a workplace pension scheme. This is called 'automatic enrolment'. Your employer must automatically enrol you into a pension scheme and make contributions to your pension if all of the following apply:

- you're classed as a 'worker'
- you're aged between 22 and State Pension age
- you earn at least £10,000 per year
- you usually ('ordinarily') work in the UK (read the detailed guidance if you're not sure)

You can read more [here](#) . It is possible to opt out of the pension if you do not wish to make these contributions, HR at the Trust will be able to advise you of what you need to do. You can find out more about the NHS Pension scheme [here](#)

NHS staff discount schemes

Cost of living and rents in the UK have risen in recent months and those in larger cities e.g. London will have a higher cost of living. Many businesses and retailers including restaurants offer a discount for NHS staff, so check online and make use of this wherever you can. If in doubt then it is always worth asking. You will normally need to prove eligibility for the discount e.g. showing your NHS staff card.

Kind offers of support continue for NHS colleagues from a wide range of companies – from discounted taxi rides, discounted meal delivery, data deals and activities for children and families. You can find further details of companies offering a discount to NHS staff [here](#)

As an NHS professional you should make use of NHS discounts, NHS cashback and the [Blue Light Card](#), which offer discounts on purchases online and on the high street. Please ask HR at your Trust for further details.

When making large purchases or before committing to services like car insurance, broadband and phone, be sure to use price comparison sites e.g. Money Supermarket, Compare the Market, Go Compare etc., check with your peer group and be sure to check and make use of cashback sites e.g. Quidco.

Check with HR at your Trust as to what discounts may be available in your area for you to make use of including things such as bus/train/tube travel, cycling schemes and car parking permits at your Trust.

BRP collection

Once you arrive in the UK, you will need to collect your Biometric Residence Permit (BRP). This card will hold your name, date and place of birth, facial image, fingerprints, immigration status and the entitlements that you are eligible for whilst in the UK. You must usually collect your BRP before the vignette sticker in your travel document expires or within 10 days of arriving in the UK, whichever is later. Check your UKVI decision letter as this will tell you where to collect your BRP and explain what you will need to take with you to collect this.

Once you have received your Biometric Residence Permit (BRP), please check the dates on it to ensure it covers the period of employment you have agreed with your employer. If you notice an error, it is very important that you notify UK Visas & Immigration (UKVI) within ten days of its issue date by using [this online link](#)

If your BRP is lost or stolen either inside the UK or whilst overseas then you must report this as soon as possible using [this online link](#)

You do not need to tell UKVI if your BRP expires on 31 December 2024 but your immigration status (for example, your visa) allows you to stay longer.

You will not need a BRP from 1 January 2025. You will be able to prove your immigration status online, without a BRP card. UKVI will update their information on how to prove your immigration status in early 2024. You do not need to do anything and your immigration status will not be affected.

Changes to the Right to Work Scheme

As from 6th April 2022, an active online check has to be made by the employer of an individual's right to work in the UK, rather than them simply receiving a copy of the doctor's BRP. It will be obvious to the Home Office whether that online check has been made or not, and if a migrant is found to be working in the UK without any right to do so, only the fact that the employer has made this online check will absolve them from receiving a fine for employing an illegal worker, designated a 'statutory excuse'.

Before starting work, the doctor is required to use the [online service](#) to generate a 9-digit share code that the employer will then use to ensure that the doctor is legally able to work in the UK. This share code is valid only for 90 days. Please make sure you generate the code and share this with HR once you have arrived and before commencing work.

Getting your National Insurance number (NINO)

As an employee in the UK, you are required to pay National Insurance (NI). Your National Insurance contributions build up your entitlement to certain state benefits such as NHS healthcare and the State Pension. The exact amount you pay depends on your earnings.

You should check your BRP to see if it has a National Insurance number (NINO) printed on the back, if not then you should [apply for a NINO online](#) . You can only apply for the NINO once you are in the UK. You should let your employer know your NINO as soon as possible. Note it can take up to 8 weeks to get your NINO.

You can start work before you receive your NINO if you can prove you have the right to work in the UK e.g. visa vignette, BRP.

As your NINO is confidential make sure you keep this number to yourself and share only with trustworthy establishments where there is a legitimate reason to do so (e.g. HR at the Trust, Banks, and GP).

IHS Refund

As part of your/your dependents Tier 5 Visa application, you were charged the Immigration Health Surcharge (IHS) and as an NHS worker, you are entitled to a refund of this surcharge for yourself and any dependents visas.

In order to process your refund, you need to complete [an online form](#) so the Academy can supply your details to the Home Office. You can apply immediately once you arrive in the UK and start your placement post. Refunds will be made back to the card / bank account from which the payment was

originally taken. This should occur within 28 days. If you have any queries, please email IHSrefund@aomrc.org.uk

Paying tax in the UK

You will need to pay income tax on money you earn from your UK employment. You will most likely pay income tax through the PAYE system which your employing body will use to take income tax and national insurance contributions from your pay. Read more on [UK tax](#) . Please make sure to check you are on the correct tax coding, if you have any queries on this please contact HR at the Trust or HMRC directly on this.

You can register for an online account with HMRC via the [Government Gateway](#). Once registered, you can sign in and submit forms for things such as personal tax, Self-Assessment and to monitor National Insurance contributions.

You may be eligible to claim [income tax relief for certain employment expenses via a P87 form](#) at the end of each tax financial year e.g. purchasing work uniform, costs of cleaning work uniform, exams fees, professional fees and subscriptions e.g. BMA Membership, indemnity, GMC, RCOG ePortfolio, courses.

Opening a bank account

Having a UK bank account is essential for living and working in the UK. There are several banks and building societies in the UK for you to choose from as well as digital banks which all offer similar services. We recommend considering if there is a branch local to you, if they offer telephone, mobile or internet banking and if they have a free to use cashpoint near you. Many MTI prefer to an international bank such as HSBC so they can easily transfer money overseas.

To open a bank account you will need to make an appointment, many banks now offer these online as well as in person in branch. The bank will need proof of identity (e.g. passport, driver's license, BRP) and proof of address (utility bill, council tax bill, tenancy agreement, letter from employer), check online with the bank on exactly what is needed prior to the appointment. You should pass your bank account details to your employing body as soon as possible so they can pay your salary into this account.

Credit Cards and Your Credit Score

Credit score is a three-digit number that represents an individual's creditworthiness based on their credit history and financial behaviour. Lenders use credit scores to evaluate the risk of lending money to individuals and determine the terms and conditions of credit, such as interest rates and credit limits. A good credit score will enable you secure accommodation, mortgage, car loans (lease or hired purchase) at an affordable rate.

You can build your credit score by applying for credit card with your bank or other financial bodies. Make sure that you keep the credit consumption low and do not miss any payments as this can negatively affect your credit score. Apps like 'Totally money', 'Clear score', Experian can help you apply for credit cards tailored to your needs and track your credit history and score progression in real time.

Accessing healthcare in the UK

You can search for the various NHS services local to you [here](#)

Registering with a GP

It is important to register with a General Practitioner (GP) in your local area once you arrive in the UK to ensure you and your resident family members can easily access medical care when you need it. It is free to register and attend appointments with a GP, however, there is a small prescription charge in England should you require one. The current prescription charge is £9.65 per item as of 1st April 2023. Prescriptions are currently free in Wales and in Scotland. It is worth checking with your GP or [online](#) to see if you or any family members may qualify for exemptions

Registering with a dentist

You can register with a dental practice as a private or NHS patient. As a private patient, you will pay the full cost of treatment, as an NHS patient the cost will be subsidised for eligible treatments. Not all dental surgeries will have capacity to take on new NHS patients and you may need to join a waiting list.

Pharmacies

Pharmacies can be found on most UK highstreets and in larger Supermarket chains. They are staffed by pharmacists who are experts in medicines and can offer clinical advice and over-the-counter medicines for minor health concerns such as coughs, colds, sore throats, tummy trouble, aches and pains. Pharmacies can also dispense NHS prescriptions.

Opticians

You will be examined by an ophthalmic practitioner or optometrist who is able to carry out eye testing and prescribe and fit glasses and contact lenses. They can also refer you to a GP or hospital eye clinic if needed. Many employers have schemes whereby they will contribute to the costs of eye tests and /or glasses or contact lenses which are required for work e.g. if using VDU equipment, please check with HR at your Trust for further details.

When to call 111 and 999

NHS 111 can help if you have an urgent medical problem and you're not sure what to do. You can call 111 or visit 111.nhs.uk, 24 hours a day, seven days a week.

Call 999 only in genuine medical emergencies. This is when someone is seriously ill or injured and their life is at risk. Medical emergencies can include (but are not limited to): heart attack, stroke, loss of consciousness, an acute confused state, chest pain, breathing difficulties, severe bleeding that cannot be stopped, severe allergic reactions, burns or scalds and major trauma such as a road traffic accident, stabbing or fall from a height.

Accident and Emergency (A&E)

An A&E department (also known as emergency department or casualty) deals with genuine life-threatening emergencies, such as loss of consciousness, acute confused state and fits that are not stopping, chest pain, breathing difficulties, severe bleeding that cannot be stopped, severe allergic reactions, severe burns or scalds, stroke and major trauma such as road traffic accidents. Not all hospitals in the UK have an A&E department. Find your nearest A&E on the NHS website.

Urgent Care, Walk in Centres and Minor Injury Units

You can go to a walk in centre or minor injury unit, without an appointment, if you need urgent medical attention, but it is not a life-threatening situation. Conditions that can be treated include sprains and strains, minor head injuries, cuts and grazes, bites and stings, coughs and colds and stomach pain.

Education and childcare

If you are relocating with children under 18, you will need to consider education arrangements for them whilst in the UK and may need to organise other forms of childcare. Many IMG's chose to come to the UK alone first before bringing their children and family members to allow time to organise accommodation and settle in in order to minimise disruption to their families.

Full-time education is compulsory for all children aged between 5 to 18 in the UK. Your child must start full-time education once they reach compulsory school age. This is on 31 December, 31 March or 31 August following their fifth birthday - whichever comes first.

There are many options available when deciding what kind of school is best for your children (aged five and over), including faith schools, free schools, academies, technology colleges, boarding school, private (or paid for) schools and grammar schools. Further information can be found on the [Government website](#) and we recommend contacting your [local council](#) about school choices in advance of your arrival in the UK.

Please also enquire directly with HR at the Trust regarding the local policies they have in place for supporting working parents and potential employer-supported childcare schemes.

In England schools are rated by the Office for Standards in Education, Children's Services and Skills (Ofsted) and the ratings are publicly available. You can review and use this information to decide which schools will best meet your children's needs and are in the catchment area when applying.

Pre-School

For children aged 2 to 4, with some local government funding.

Nursery

Can offer care from birth to 4 or 5 years old, these can be private, community, local authority or workplace nurseries.

Primary School

For children aged 4 to 11. Split into infants/key stage 1 and juniors/key stage 2 in England, Wales and Northern Ireland.

Secondary School

For children aged 12 to 16. Some secondary schools will also have a sixth form for children aged 16 to 18.

Sixth Form/ College

For young people aged 16 to 18 where students prepare for, and sit, A-levels or other equivalent qualifications.

University

Optional for higher education of over 18 year olds

Childcare

In the UK, the law does not state an age when you can leave a child on their own, but it is an offence to leave a child alone if it places them at risk. You should use your judgment on how mature your child is before you decide to leave them alone at home. Many parents prefer to make use of breakfast /after school clubs or OFSTED registered childminders for childcare arrangements. You may be entitled to help paying for childcare, visit [Childcare Choices](#) to explore your options.

For those who need to arrange childcare, there are few options commonly considered in UK:

1] Child Minder: They are someone who will look after your children in their own setting either their home or workspace. They will usually be OFSTED registered and charge by the hour. Most childminders may have a small group of children of various age groups.

2] Nursery: This is a proper childcare setting that looks after children as young as six weeks to four years. Age eligibility varies from nursery to nursery. Most of them will also provide food. Nurseries can be full time or part time. Some hospitals have nurseries in the hospital premises exclusively for children of their employees, however they need to be booked well in advance. Again, they mostly charge by the hour.

3] Nanny: A nanny is someone who will look after your children in your own home. They are well trained/qualified and help in planning activities for the child. They can be live in/ live out depending on the family needs. Most nannies will be employed on an annual salary basis.

4] Au-pair: An au pair looks after your children in your own home in return for lodging and boarding. They are usually students or foreign nationals. Proper accommodation space should be available and due checks should be made before appointing them.

Pregnancy

While all NHS staff will be eligible for maternity leave, pay during maternity leave is dependent on duration of service. To be eligible for occupational maternity pay (OMP), the member of staff should have worked for the NHS for 52 weeks and for statutory maternity pay (SMP), should have worked for the current employer for 26 weeks before the start of the 24th week of pregnancy. Hence, a trainee that is pregnant at the time of starting their MTI training placement will not be eligible for maternity pay. You must therefore consider the financial implications of being resident in the UK without a regular income during this period of maternity leave.

In addition, as the MTI placement is for 2 years and the tier 5 visa cannot be extended beyond this time, prolonged periods of absence is likely to adversely impact on the training that the MTI doctor will receive during their placement.

If you are pregnant and would like to discuss the option to defer your application, please liaise with the RCOG MTI office MTI@rcog.org.uk

Further information around pregnancy whilst working and training in the NHS can be found on the RCOG website [here](#) See also the [ACAS rules for employers and pregnant employees](#)

Finding and securing accommodation

It is essential that you arrange a form of accommodation before you arrive in the UK, this may be temporary or more permanent. This will be important for securing the bank account and obtaining the NI number through the post.

Accommodation should be as close as reasonably possible to the hospital, as most MTI trainees would not be driving in the first few months of arrival in the UK. It is important to check distance of your accommodation from your hospital with bus/train/tube/tram routes and the timetables of services based on your rota hours. Living close to the hospital also makes a big difference in a new country as it will be one less thing to worry about.

Employing Trust

Your employing body may have on site hospital accommodation available that is likely to be based on hospital grounds, or very close by. You should check with HR at the outset to see if this is an option before looking into alternatives as onsite accommodations are cheaper (considering the cost of utilities & council taxes) and more convenient. It may also be that your Trust work with a particular estate agent or private housing organisation that can give priority assistance for you in securing accommodation. HR should support you in directing you on how to find suitable accommodation and providing official letters/proof of employment for this purpose.

Temporary accommodation

Hotels/B&B: Hotels can usually offer single, double or family rooms depending on your needs. There are a number of websites you can use to compare options and prices including [Booking.com](#), [Hotels.com](#), [trivago](#) and [Expedia](#).

Airbnb/Homestay: [Airbnb](#) allows hosts to accommodate guests in several property styles, including entire properties, private rooms, hotel rooms or shared rooms. You can rent a spare room through [Homestay](#). They provide short and longer-term options.

Family and friends: If you have any friends or family in the local area, they may be able to offer you a spare bed or sofa whilst you organise something more permanent.

Private rental

There are several ways to rent privately in the UK, including through an estate/letting agent or directly from a private landlord or company. You can either choose to rent a single room in a dwelling or rent an entire property e.g. flat or house. The UK government has provided information about your [rights and responsibilities as a private renter](#).

Your employing body may be able to recommend local estate/letting agents and good local areas to tailor your search to.

While searching for somewhere to rent, you should consider price, location, length of contract, break clause, deposit, condition of the property and if the property is furnished or unfurnished. You should also consider public transport services in the area and car / cycle parking (if you drive / ride). Lastly, if you have children you may want to consider nurseries and schools in the area and catchment areas for these. HR at the Trust should be able to assist you.

There are a number of websites you can use to search for rental properties, these include [Zoopla](#), [Rightmove](#), [OnTheMarket](#), [PrimeLocation](#) and [SpareRoom](#).

Since there is a rising demand for rental properties in the UK particularly larger cities like London, there has been a marked increase in number of cases of rental scams. Rental property listing scams typically aim to steal money from interested renters. They will try to get you to pay for a security deposit or move-in fee without ever seeing the rental property, and they will keep the money without any intention of renting a property to you. They may do this to multiple individuals for the same property. Please exert caution and never hand over money without first seeing a property, doing some checks to ensure that the person you are dealing with has the right to let that property to you or signing your lease. Please check some of the 'Do's and Don't's of avoiding renting scams' [here](#)

Changes to the right to rent scheme

As from 6th April 2022, an active online check has to be made by the landlord/ letting agent of an individual's right to rent in the UK, rather than then simply attaching a copy of your BRP.

Before renting, you are required to use the [online service](#) to generate a 9-digit share code that the Landlord will then use to ensure that you are legally able to rent in the UK. Please make sure you generate the code and share this with the landlord / letting agent.

Setting up utilities, TV Licence and Council Tax

Check the terms of your tenancy agreement to determine exactly what you are responsible for paying. For example, some rentals may be inclusive of water/gas/electricity but normally tenants will be responsible for paying for all utilities and services to the property for the duration of their tenancy. For leasehold properties normally the landlord will be responsible for paying the service charge and ground rent, but do check this is the case before signing any agreement.

Gas and Electricity

There are numerous gas and electricity suppliers in the UK and you can use a price comparison website to find the best deal. On the day you move in, you should check the gas and electricity meters and make a note of their readings; you will need this information to create an account with your new gas and electricity providers. Normally you will pay a monthly standing charge and then pay per kW of energy used.

Water

All properties in the UK will need to pay water rates, based on property size or water usage. Your water supplier will be determined by where you live, visit [Water UK](#) to find your local water supplier. By law, water companies must provide wholesome water that is suitable for all domestic purposes, including drinking, cooking and washing. Tap water in the UK is therefore safe to drink.

Landline Phone and internet

There are a range of Internet Service Providers in the UK who can provide internet and/or phone services to your home. You can use comparison sites to find the best deal and compare internet speeds in your area. You may also wish to have an enhanced TV package; sky and virgin media will typically include TV, internet and phone services in a combined monthly package.

Council Tax

Council tax is payable monthly to your local authority for the services they provide such as rubbish collection, recycling services, police and fire services. How much you pay will depend on the property banding, which council area you are residing in and whether you are eligible for a discount or exemption e.g. if a single person in occupancy or single parent with any dependent children in education under 18. You can find your local council online.

TV license

Legally you must have a TV Licence to watch or record programmes live as they are being shown on TV, watch or stream programmes on an online TV service and download or watch any BBC programmes on BBC iPlayer. You only need one TV license per household and can pay online by monthly direct debit or in one payment. If you do not need a license you must complete an online exemption form.

Insurance

Contents Insurance

The landlord will be responsible for insuring their property but this normally only covers the building structure and the landlord's fixtures/fittings, it will not normally cover your possessions within the property. As such, you may want to get your own contents insurance to cover your possessions in

the event of theft, loss or damage caused by accidents or events such as flooding or fire. You can use price comparison websites to find the best deal based on your specific needs.

Car / bike Insurance

Before getting behind the wheel make sure you check to see if you can drive in the UK on a [non-GB license](#) and ensure you are aware of the [Highway Code](#). You may need time to acclimatise to driving in the UK and getting used to our systems of roads and roundabouts particularly before you venture any distance or use the motorway network. You can organise few driving lessons with a driving instructor to build your confidence and make sure you are safe on the road.

All vehicles driven on the public highway in the UK must have valid insurance (comprehensive or 3rd party) which covers you as driver, road tax and hold a valid MOT certificate. You can use price comparison websites to find the best deal for car insurance based on your specific needs.

Mobile phones and internet

Before you arrive in the UK, consider if you will need a mobile phone contract or prepaid sim card for your arrival. Most UK airports will provide free Wi-Fi and access to payphones which may be enough for you to arrange a taxi, check public transport routes and contact anyone who may need to know that you have arrived. You can purchase visitor sim card at most UK airports or VFS centres in your country.

For the initial few days you could also consider taking an international roaming package from your sim provider in your home country.

If you bring a mobile phone with you, make sure it is unlocked so you can use it with one of the numerous network providers available in the UK. You will need either a phone contract or a pay-as-you-go sim.

Some network providers offer a discount specifically for NHS staff so do look into what is offered before committing to a contract. For example, EE offer a 20% discount for all NHS staff and free unlimited data once high speed data has been used up, [EE NHS Perks](#) and Vodafone offer 15-15% discounts for NHS staff: [Vodafone NHS](#) . O2 offers up to 25% discount: [o2 NHS discounts](#)

Contract: SIM only or phone

You pay a monthly fee to receive a set allowance of texts, calls and mobile data. Contracts can be SIM only or can include handset. Some providers may also allow you to use a set amount of this data when roaming overseas. You can search for the best deal based on your needs and will usually be tied into a contract for 12, 18 or 24 months. To set up a contract you will need to provide proof of address, proof of identification and details of a bank account for direct debit. Check the break clause on these contracts before you purchase them. Also check to see how much the provider can increase their charges under the contract each year, this will normally be the UK CPI (Consumer Price Index) plus a set percentage e.g. CPI plus 3%.

Pay-as-you-go SIM

You can top up the SIM anytime with credit and will be charged each time you make a call, send a message or use mobile data. You are not tied into a contract and can load as much or little credit as you need. Pay-as-you-go SIM's are usually free and you won't need to provide any evidence to get one. You can normally pick these up in supermarkets and corner shops.

RCOG MTI Buddy scheme

RCOG MTI Trainees are strongly encouraged to opt into the RCOG MTI buddying scheme and be matched up with a buddy in their Region. You can be buddied up before you even reach the UK, which can be very helpful for answering queries you might have before starting in post and buddies will be there to support you for the 2 years of training. Buddies can be ST3-6 level trainees, SST Trainees, Trust Grade doctors and Clinical Fellows, IMG Doctors, as well as current or previous MTI trainees in the UK. Your buddy is there to support you, answer your queries or signpost you to further support and be a familiar friendly face.

Here is what other MTI's had to say about their buddy:

"My MTI buddy made me feel welcome and briefed me about the trust and helped me to settle in."

"My MTI buddy is really supportive and he helped me at every step. He introduced me to the RCOG ePortfolio and how to write CBD. He also guided me about the courses I should attend. He is very approachable and responsive."

"Really helped me to settle down initially."

"I can contact my buddy anytime and ask for help."

Part 3: Starting your new role in the NHS

Before starting your post – a checklist

We developed this checklist as a supporting 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
- Find out how to obtain your National Insurance Number (NINO) and details of tax banding / emergency tax codes
- Organise your accommodation
- 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.
- Find out from HR about DBS checks and clearance
- Consider applying for medical indemnity with organisations such as MDU, MDDUS. Your employer will also have a form of indemnity protection (although it is advisable to also have individual indemnity in addition)
- 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
- Get access to the RCOG ePortfolio
- Find out your rota allocation (Hospital timetable and your allocated shifts and oncalls)
- Trust and Departmental Induction, mandatory training courses including IT
- NHS email and password, ID badge and hospital access

NHS Employment Check Standards

Before you can start work with your Trust a number of mandatory checks must be undertaken. These include (but are not limited to):

1. Identity verification checks
2. Professional registration and qualification checks, including English language proficiency
3. Employment history and reference checks
4. Work health assessments (including Occupational Health)
5. Criminal records checks
6. Right to work checks

You can read more on these [here](#)

Please ensure you keep HR at the Trust regularly updated on your anticipated arrival date to the UK so that they can ensure an OH check is booked in ahead of your arrival for a date as soon as possible after your arrival to the UK and keep rota coordinator aware of your expected start date. This will help ensure there are no unnecessary delays to your start date and salary payments.

MTI: the goals of your training

The RCOG MTI Scheme is designed for IMG trainees who have qualified and worked in their own country for at least four years in O&G who want to further and consolidate their knowledge and expertise in core O&G by acquiring additional skills and exposure that working in the UK provides.

As an MTI Trainee you will be supported to develop your skills, get plenty of exposure to labour ward and be assessed against a bespoke [RCOG MTI Training Matrix](#) for the 2 years of MTI training

As an RCOG MTI Scheme trainee you will have a minimum 2 week period of acclimatisation (shadowing) before you commence at ST2 (SHO) level for a short period whilst you acclimatise to working in the NHS, typically this is for 3-6 months but this can take up to 12 months dependent on the gaps in your knowledge and skills set which will vary depending on your training exposure and resources back in the home country. Once your supervisors are confident you are competent and able to perform safely independently, you will step up to registrar level and spend the rest of your time in training at ST3-5 level. During this period use your RCOG ePortfolio to gather evidence of competency sign off for different procedures.

Training in the NHS will give you excellent exposure to a patient led system and should greatly assist you with preparing for and passing your Part 3 exam whilst you are in the UK.

As an MTI Trainee your focus will be on consolidating your core O&G skills. However, it is sometimes possible for MTI Trainees to apply for Special Interest Training Modules (known as SITMs) if they have signed off on all core curriculum competencies equivalent to an ST4 O&G trainee. Although it is possible to register for a SITM before passing the Part 3, MTI trainees are strongly recommended to only apply for SITMs once they have obtained their MRCOG, have achieved all of the RCOG MTI Training Matrix competencies and have successfully stepped up to the Registrar rota (ST3 – 5), in line with the aims of MTI training. Whether it is possible to register for a SITM as an MTI trainee will depend upon local training capacity and local support, the RCOG MTI Office is unable to advise further on this. Any MTI doctor intending to apply for a SITM is encouraged to speak with their Educational Supervisor and MTI Regional Champion before applying to assess which modules are most suitable for completion in the training time available. You can find out more about SITMs and SIPMs including frequently asked questions on the [RCOG O&G curriculum 2024 hub](#).

The local SITM Director will be able to advise whether there are sufficient SITM training opportunities within your deanery. UK NTN trainees must complete SITMs to gain their CCT and therefore are given priority. However, many Deaneries report additional training capacity. Please be aware that your visa cannot be extended to complete a SITM and many of these SITMs will require 2-3 years to complete them.

MTI trainees can register for Special Interest Professional Modules (known as SIPMs) as outlined in the SIPM registration process. MTI can register for SIPMs at any stage during their MTI training. SIPMs support trainees to develop professional skills in the field of clinical research, medical education and leadership and management above the skills required for the core curriculum. It should be noted that the tier 5 visa cannot be extended beyond the 2 years to facilitate completion of SIPMs.

Common challenges in MTI Doctors stepping up to the Registrar rota

Effective communication

In order to step up you need to be able to communicate effectively on the Labour Ward with team leaders, your peers and with midwifery coordinators. Poor communication skills are often a cause for delayed step up as this is a patient safety issue.

For example when assessing a patient on labour ward you should:

- Discuss with the midwife looking after the patient about the history, risk factors, labour progress, MEOWs chart and check medications before going in the room
- Introduce yourself to those present, explain why you are there and take a brief focused history from the patient
- Formulate a management plan working with the woman (shared decision making)
- Communicate what the plan is to the woman in labour / partner or family members and midwife
- Appropriate detailed documentation of the discussions
- You need to be able to work well with the wider team and guide the junior doctors when on call

Always discuss with the senior registrar if planning any intervention or taking patient to theatre. Make consultant aware if taking patient to theatre. Communication with the team and documentation is essential.

Instrumental delivery / initial management of obstetric emergencies

Instrumental delivery is also a key factor for stepping up. You will need to be capable of performing a straightforward lift out delivery in the room alone to be stepped up to registrar rota (e.g. forceps, ventouse, Cat 1 CS) and you need to win the confidence of your consultants. You also need to be able to conduct the initial management of obstetric emergencies.

If you are coming from a country where you do not routinely perform and/or have limited training or exposure to vaginal birth and need to develop your instrumental delivery skills it is recommended you complete a ROBuST course ideally within the first 6 months of arrival to the UK to assist with step up. We would advise speaking to your Educational Supervisor about this in advance of your arrival or during your initial meeting to put this into your development plan.

CTG Interpretation

CTG interpretation is also vital for step up; MTI doctors are advised to read up on and understand physiological interpretation of CTG and NICE guidelines for CTG in advance of their arrival. It is important to note that Trusts in the UK may work differently so find out what CTG interpretations in your Trust are like, what the local training package offered is and how best you can contribute to effective CTG interpretation. It is mandatory to complete these eLearning packages as a team member working in the labour ward to ensure patient safety.

There are local CTG days, MDT CTG teachings, RCOG CTG interpreting webinars which are recommended. Many Trusts have online training modules on CTG teaching and obstetric emergencies (you can enquire with HR or your CT after joining)

Recommended courses for MTI doctors

Although Trusts will have a study budget for you, HR or your ES/CT should be able to advise you on this, this is likely to be a nominal amount so you may need to self-fund these as part of your personal and professional development:

- Obstetric skills - local/regional
- RoBUST*
- PROMPT*
- EFM - K2/ECOG EFM package
- Perineal Trauma repair course*
- Communication courses
- Part 2/3 exam course

Courses may be organised centrally by the College or may be available locally/regionally, please check with your ES/CT/MTI Regional Champion. *These are highly recommended for MTI Doctors

How will MTI benefit me?

The benefits of MTI Training for IMG doctors are numerous but include:

- MTI provides excellent exposure to working in a patient-led system
- Improved communication skills, teamworking skills and negotiation skills
- Consolidate core O&G skills including instrumental delivery and CTG interpretation.
- MTI Training gives exposure to labour ward and caesarean sections, acute emergency and elective O&G, emergency Gynae

- Return home with new skills and ways of working including experience of multi-disciplinary team working and evidence-based medicine
- MTI Placement helps doctors passing their Part 2/3 MRCOG as working in NHS gives good exposure to experience and skills for them to pass: MTI Trainees pass rates akin to UK trainees.
- Improved skills and experience in softer skills e.g. patient safety, risk management, clinical governance, contributing to development of local guidelines, postgraduate teaching
- Many doctors use the knowledge and skills gained to set up training and team-working initiatives on return to their home country.
- Share knowledge with peers, contribute to the rota, make new friends, travel and experience a new culture
- Work in collaboration with RCOG in projects related to MTI

What to expect in your first few weeks/months

As with any new job, your first few weeks and months will focus on learning the basics and getting to grips with your role whilst adjusting to working in the NHS and UK culture. Use the first few weeks as your opportunity to learn, soak up as much as you can from those around you and be sure to ask pertinent questions. Be willing to learn from all those around you, there will be lots of people willing to teach you if you are willing to let them. Use ePortfolio work place based assessment tools to aid your learning experience. Be enthusiastic and seek out educational opportunities, be proactive in your own personal development and make yourself an invaluable part of the team by offering to help where the opportunity arises. It may at times feel frustrating to be back in a junior role but remember that it will only be for a few months and that patient safety must be the paramount factor.

Before you start in your MTI training post identify all the areas in your previous training where you have gaps or where skills could be strengthened and work towards these in addition to more specific goals. It is important not to lose focus on why you came to the UK for training and make sure to apply yourself and actively work towards your goals. Set small and realistic targets which you can achieve and make sure to reflect on your progress frequently to keep motivated. The NHS is a diverse and multicultural organisation so make sure to chat to other IMG Doctors who have been through the same experience as you and who can help to inspire and support you on your journey.

The BMA has a great resource on '[Being an international junior doctor in the NHS](#)' and on what you can expect at the start.

General tips for MTI Doctors

We asked past MTI Doctors some of their top tips for success as a new doctor working in the NHS:

- Be enthusiastic
- Be proactive and help to direct your own learning and development
- Book onto courses to develop your skills – at a minimum the College advise 3rd degree perineal tears, robust and step up courses
- Be punctual
- Have a polite, friendly and professional approach
- Project yourself confidently
- Build rapport with your team
- Timely escalation to seniors in situations of conflict or if unsure/need support
- Expect to be challenged by patients and other professionals including midwives
- Check the Trust dress code

- Follow hand hygiene/ below the elbows
- Be aware of the requirements of confidentiality and consent
- Practice keeping contemporaneous documentation in legible handwriting - risks of litigation or complaints
- Answer bleeps on time - if you cannot get there explain and give a plan on what time and how long it will take
- Focus on good time management/prioritisation
- Aim for completion of tasks before handover - avoid pending jobs, focus on achieving a thorough handover to avoid patient safety issues
- Don't be work shy
- Learn prioritisation of the labour ward - red/amber/green traffic light system
- Review CTGs/learn protocols for management of delay in the first and second stage of labour
- Increase your skills in instrumental delivery and obstetric emergencies

What to expect in the first year

During the first 12 months you should be looking to develop your wider skills set to include:

- Technical skills - screening, colposcopy scanning, CTG scanning: not just the surgical skills
- Patient management - consent, MDT, management planning, appropriate referrals, counselling
- Communication skills - patient, families, colleagues, GP, nurses and midwives, documentation
- Audit skills - participate, understand concept, how to plan an audit, auditable standards
- Organisation and management skills - booking leave, swapping on calls early, organise rota

The NHS, structure of the team and role of the midwife in obstetrics

During your Trust induction you will learn about [the NHS](#), your team and the wider professional workforce. In labour ward you will need to work closely as part of a team with midwives and allied professionals, this will be covered in detail during the RCOG Induction.

The GMC: Good Medical Practice

The GMC protects patients by ensuring all doctors are registered with a licence to practise before they work in the UK. The GMC sets standards for professional values, knowledge, skills and behaviours of all doctors working in the UK.

[Good Medical Practice](#) describes what is expected of all doctors registered with the GMC. It is your responsibility to be familiar with Good Medical Practice and the explanatory guidance which supports it, and to follow the guidance they contain.

GMC Resources

The GMC have resumed their free Welcome to UK Practice Workshops, which will take place online and are free to attend if you gained your primary medical qualification outside of the UK, and registered with a licence to practise within the last 12 months. To register for a workshop please visit the GMC website [here](#)

You may also find this blog, written by Egyptian Paediatrician trainee Dr Marian Mourad, on '[Top tips to help you settle into UK practice](#)' helpful:

Induction and Educational Supervision

All MTI Doctors are expected to be provided with a local/hospital as well as a departmental induction within the first few days in post. In addition, MTI Doctors should also be released to participate in the RCOG Induction. In addition, there will be Mandatory Trust courses you will need to complete as part of your induction and you must do so in a timely manner

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

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 2 weeks of your placement

Please ensure you document the discussion and action plans from this meeting in your RCOG 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. 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 RCOG ePortfolio

This evidence will contribute towards your annual appraisal/MTI ARC. 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 RCOG ePortfolio. This evidence will contribute towards your annual appraisal.

College Tutor, Head of School and Training Programme Director

Alongside your Educational Supervisor, the College Tutor in your unit will also be a key source of support. College Tutors coordinate obstetrics and gynaecology training and education in an individual trust and oversee all trainees within their unit. They will be helpful for escalating concerns and should help with guiding you to achieve the aims of the RCOG MTI Training Matrix.

Although MTI Doctors are employed by the Trust, you should still be aware of the Head of School for O&G (HoS) and the Training Programme Director (TPD) in your region. These individuals sit on the School Board for the Region and assist indirectly with quality assurance of the MTI scheme. For example, by ensuring MTI trainees are invited and able to attend local teaching sessions

RCOG MTI Annual Review of Competencies (ARC)

As part of the RCOG's educational quality assurance of the MTI training scheme, all MTI Trainees will need to undergo regular review of their progress against the RCOG MTI Training Matrix competencies. This process is led by your RCOG MTI Regional Champion

Your Champion should meet with you informally at 6 months to review how you are getting on and to check if you have stepped up to ST3 level and if not they should work with you and your ES/CT to support step up via a SMART action plan. You will then be assessed formally by an MTI ARC Panel led by the Regional Champion at around 12 months and 18 months.

You will be given detailed information on what you need to do to prepare ahead of ARC but it is important you familiarise yourself with both the RCOG MTI Training Matrix ahead of and during your MTI training and that you engage with the RCOG ePortfolio from the very start of your post to begin logging your evidence for these reviews.

Following the ARC the panel should either meet with you in person to discuss their findings or they may submit their feedback directly to your Educational Supervisor who will then feed this back to you and work with you on any areas requiring improvement.

RCOG ePortfolio and ARC

All MTI Trainees will need to log their progress against the RCOG MTI Training Matrix competencies throughout their 2 years of training. MTI Trainees need to have access to the RCOG ePortfolio, which you either get by RCOG UK Associate Membership or by subscribing to the RCOG Trainees Register (please note you cannot subscribe to the register if/when you pass the Part 3 and obtain your MRCOG). You will need to pay an annual subscription. *MTI doctors are advised to get access as soon as possible after arriving in the UK and within your first month of arrival in the UK.*

Trainees need to have consistent engagement with logging WPBA and should be using the ePortfolio regularly and at least weekly to log their progress. WPBA's should include a good mixture of OSATs, CbD, Mini CEX as well as reflections and other supporting evidence. These should be spread evenly throughout the year and avoid clustering in the few months before an ARC. It is good practice to declare any assessment tickets in advance of raising them with the assessor e.g. if on labour ward you could have a quick chat with the on duty Consultant and ask if its ok to raise an OSAT for them to complete with you. Most Consultants will want these declared in advance or they will not complete them for you. Tickets should be completed within 2 weeks of logging. It is important you be proactive, enthusiastic and take a lead on your own personal development.

MTI trainees should focus on collating a portfolio of robust evidence with a good mix of CBD's of appropriate complexity and avoid repetition, consultant led OSAT's where possible and evidence of scan training skills. You should aim to complete two sets of Team Observations each year, one at around 4 months and one at 8-10 month, liaise with your Educational Supervisor on the timing of these.

Familiarise yourself in advance of arrival to the UK with the ePortfolio and the types of WPBA to include:

- Mini CEX - Mini clinical evaluation exercise
- CBD - case based discussion
- OSATS - objective structures assessment of technical skills, formative and summative
- NOTTS - Non technical skills of surgeons
- TO - Team observation, TO1 collate to a TO2
- ARC - Annual review of competency
- Reflection

You can read more on the ePortfolio and the types of evidence you can collate [here](#)

It is vital MTI trainees understand how the RCOG ePortfolio works – this is the single most important piece of evidence for the 2 years of MTI training

The RCOG ePortfolio and MTI ARC is covered in detail at the RCOG MTI Induction event. Your Educational Supervisor and College Tutor will also be able to help support you with using the ePortfolio system.

There may be regional RCOG ePortfolio training sessions run by your Deanery that you can join, speak with your MTI Regional Champion to find out more. You can contact your Regional Trainee ePortfolio Champion or buddy for advice/support. If you are struggling please do get in touch with the MTI Office.

You can also contact the RCOG ePortfolio team at ePortfolio@RCOG.ORG.UK / +44 20 7772 6283

Annual Trust appraisal

All licensed doctors must participate in an annual appraisal process as part of revalidation and it is important you prepare for this. The appraisal must cover all of your medical responsibilities and be based on the General Medical Council (GMC) guide to [Good Medical Practice](#). This is a core set of standards which doctors must demonstrate they meet. Please familiarise yourself with these concepts before you arrive to take up your post.

Every Trust has a Director of Medical Education and a Medical Director who is the Responsible Officer for the purposes of your annual appraisal and revalidation. Your Trust is the designated body for GMC purposes; please ensure you update this on your GMC account once you have arrived in the UK and started your MTI training.

Please note that RCOG MTI ARC does not replace appraisal as it is not currently a GMC recognised or mandated process in the same way ARCP is for UK national trainees with a training number.

The College is committed to supporting all of our Fellows, Members and doctors in training through their revalidation. Please see the [appraisal section](#) on the RCOG website for resources to answer any questions you have and to provide support as you prepare for appraisal.

MDT Working and UK work culture

For many IMG doctors working in a multidisciplinary team and working with midwives throughout a woman's journey may be an entirely new experience.

Working in the UK will test your teamworking and communication skills, especially on labour ward where you are likely to work alongside experienced midwives who may question and challenge you on your decisions. It is important that you look to develop effective communication strategies and work on building your relationships with your wider team including nurses, midwives, labour ward coordinators, as well as junior doctor doctors, consultants and allied professional including anaesthetists, physicians and physiotherapists.

The BMA have a section of their website dedicated to advice and support for International doctors, which you can find [here](#). Included in this section, they have created a useful [toolkit for doctors new to the UK](#) which explains the structure of the NHS and how the NHS works in more detail. Please also [see here](#) for a series of videos by the BMA on the topic 'working effectively in a multidisciplinary team'

We asked one MTI Trainee to outline her experiences:

"It is important to be aware that work culture in the UK may be drastically different from wherever you're coming from. The main difference you will face will be in two areas:

1. Patient involvement in decision-making. Patients have a say in what treatment they undergo – be aware of the Montgomery ruling, and that patient counselling requires you to give them time, hearing them out and discussing with your seniors wherever possible. The best way to learn how to talk to patients is by shadowing senior registrars and consultants. Don't feel undermined if you are asked to be an observer for the first couple of months, instead use this opportunity to sit in and listen to your consultants talk to their patients, their manner of approach, how they deal with difficult patients, how they break bad news.

Most of MTI Doctors will come from countries where English isn't the first language, so it's important to learn the layman terms for medical jargon – such as womb for uterus, wee for urine, waterworks for anything related to urinary tract etc. The most important thing to do is to be aware of everything that goes on around you, it gives you a sense of how the NHS works and how different patient care is here. One tip is to read the [RCOG Patient Information Leaflets](#) to help you learn how to communicate in simple language avoiding the use of complex medical jargon.

2. Relationships with colleagues and superiors –back home, there is a definite hierarchy and chain of command and you might not get a chance to question your seniors or discuss alternative choices. Say goodbye to that. There is a hierarchy here as well, but it isn't as formal and strict as back home. Flattened hierarchy allows better communication, team dynamics and optimise patient care. You are encouraged to ask questions at every point (don't bombard your consultants with questions in the middle of a busy clinic, though). The downside to this is that every decision you make can be questioned as well, especially by midwives, since they recognise you are new to the system and may take a while to win their trust. The best way to avoid confrontation is by taking the opinions of those working with you as well, but being firm and have a rationale ready behind whatever decision you make. Also, document everything. I can't over-emphasise the importance of documentation and communication with both patients and colleagues."

Before you arrive in the UK, you should start looking at what you can do to improve your communication skills and once in the UK you should be using every opportunity to learn and

improve. If you are struggling with your communication let your Educational Supervisor know, there are a number of courses that may be suitable to help you develop these skills. Regularly listening to BBC radio discussions is a great way to improve your communication skills.

Working hours

All doctors working in the NHS have set working patterns (this is outlined in your rota which is normally provided to you 8 weeks in advance of your start date) to ensure compliance with the European Working Time Regulation – which, among other things, states that all workers must have at least 11 hours of uninterrupted rest in every 24 hours. This is a legal requirement and Trusts that breach these requirements can be fined. In addition, if doctors are working too many hours it can represent a significant risk to patient safety.

If you do work beyond your contracted hours it is important you notify your Rota Coordinator/ES/CT/Trust Guardian of Safe Working Hours and complete an exception report straight away.

The Guardian of Safe Working at the Trust has responsibility for overseeing the safety of junior doctors working, and provides assurance in this system of exception reporting, and hours and rest monitoring. It is important to note that the Guardian is not responsible for devising rotas, contract or payment problems, or training issues; but can direct these queries to appropriate individuals in HR or the Medical Education Centre.

Maintaining a good work-life balance

Work-life balance refers to the equilibrium between your work responsibilities and personal life or non-work activities. It is your ability to effectively manage and prioritize both work-related tasks and personal commitments, allowing for a sense of fulfilment and well-being in both areas and prevents work burnout.

Ways to ensure good work-life balance include-

Set priorities- identify your most important tasks and allocate time accordingly.

Establish boundaries- clearly define your boundaries between work and personal life. Avoid bringing work-related stress or tasks into your personal time and vice-versa.

Manage time effectively- prioritize tasks, delegate when possible and avoid procrastination. Plan and schedule your activities, creating a realistic and balanced routine.

Learn to say no- Understand your limitations and do not overcommit yourself. It is okay to decline additional work or responsibilities if it jeopardizes your work-life balance.

Take breaks and vacations- Allow yourself regular breaks during the workday to refresh and recharge. Ensure to hydrate properly during work.

Foster support networks- build a support system both at work and in your personal life. Seek support from colleagues, friends, and family. Delegate tasks when necessary and ask for help when needed.

Practice self-care- Take care of yourself physically, mentally, and emotionally. Engage in activities that promote your well-being, such as exercise, hobbies, spending quality time with loved ones.

If you have any of the [symptoms of burnout](#) it is important that you talk to someone and seek support for this at the earliest opportunity. Trusted friends, family and colleagues, or contacting a helpline, can help us when we are struggling.

The College offers informal peer to peer to members who are looking for guidance from their peers on workplace issues, interpersonal difficulties, return to work options or non-clinical concerns. This

is not intended as a formal mentoring service but more a 'connection' service and a way for members to find other members who are willing and able to give guidance on handling mainly non-clinical issues. More information can be found on the RCOG Supporting Our Doctors [hub](#)

Deaneries and Regional education

Deaneries are organisations in the UK that are responsible for all NHS postgraduate medical training. They are categorised by the different regions in the UK, with 20 in total.

England

The teams that do this work in HEE used to be deaneries, and are now part of our local teams. They may also be referred to as the PGMDE or healthcare education (HET) teams. Read more:

<https://www.hee.nhs.uk/our-work/postgraduate-medical-dental-education>

Scotland

The Scotland Deanery's primary responsibility is the education and training of doctors in Scotland. The Deanery is also responsible for the appraisal and re-validation of all doctors in Scotland as well as a number of cross cutting and multi-professional programmes, including patient safety, quality improvement of patient care and the development of Scotland's remote and rural workforce., NHS Education for Scotland <https://www.scotlanddeanery.nhs.scot/>

These NHS deaneries set training standards, monitor training programmes, manage the recruitment of speciality training programmes, provide educational supervision, and more. They oversee the whole training process. To do this, they get advised by the Speciality Training Committee, which consists of senior consultants who provide expert advice.

Wales

Health Education and Improvement Wales is the strategic workforce body for NHS Wales. As a Special Health Authority, they work with partners to plan, develop, educate and train the current and future workforce <https://heiw.nhs.wales/>

It is important you are aware that MTI Doctors are not employed by the Deanery but are employed by the Trust. The Trust is responsible for the quality assurance of your MTI training and is accountable to Royal College, not the Deanery, for educational governance.

MTI Doctors should be provided with some support resources by the Deanery as IMG Doctors coming to work in the UK and also included in regional teaching and opportunities alongside national trainees wherever possible. Please contact your MTI Regional Champion for more information.

RCOG MTI Regional Champions

The RCOG MTI Regional Champions act as ambassadors for the MTI Scheme and work to provide support and mentorship to MTI Trainees and placement Trusts in the Region as well as to enhance engagement and support for MTI trainees by the Deanery. Read more [here](#)

You will have been sent an email with the details of your MTI Regional Champion. Please ensure you follow the guidance to give them access to your RCOG ePortfolio account for reviewing your evidence for informal 6-month check in and ARC and that you engage with them, to maximise the support they give you and contact them to set the dates for your reviews.

Your RCOG MTI Regional Champion can provide informal advice or guidance on MTI-related issues and queries including if you are finding yourself in difficulty in the first instance.

Insurance and indemnity

It is important for doctors to have adequate and appropriate insurance or indemnity in case one of their patients suffers harm as a result of the doctor's negligence. We recommend reading the [GMC's guidance on insurance, indemnity and medico-legal support](#). The guide gives help to doctors, patients, employers and responsible officers in understanding what insurance and indemnity means for them. Your employing hospital will also be able to provide you with advice about medical defence insurance.

Occurrence based cover may be more suited for MTI doctors as it provides a better level of cover and will protect you from any claims raised even after you terminate the cover at the end of your MTI placement. Claim based cover will only provide protection as long as you are a member.

Planning ahead: study leave, annual leave and booking exams

Ahead of starting your MTI Training you should be planning well in advance what courses you would like to attend, the exams diet you wish to sit whilst in the UK and your annual leave e.g. holidays to return back home. Most Trusts require a minimum of 6 weeks' notice for request for annual or study leave but with clinical pressures the more notice you can give the greater the chance you will be successful with obtaining leave. Liaise on this with the rota coordinator as soon as you can and by thinking ahead and planning it should help to reduce some of the pressures.

Study leave and budget is managed by local Trust policy so speak to HR or your College Tutor to find out further details.

Details of RCOG events and courses can be found [here](#)

Details of the MRCOG diets can be found [here](#)

If you have any concerns regarding leave then you should discuss with HR at the Trust. Familiarise yourself with your trust policy for sick leave, carer's leave, study leave, annual leave and how much annual leave can be carried forward.

Settling into life in the UK: what to do if you are struggling

Moving home and starting a new job are some of the most significant life changes a person can face so combining these together in MTI by moving to the UK and starting a new role in a completely new healthcare system is no mean feat. It is to be expected you might be facing feelings of anxiety, frustration, worry if you will be up to the challenge and feel a bit lonely and homesick at first. These are all very normal but it is important that you reach out to those around you for support and do not suffer alone in silence.

Many MTI doctors find the first couple of months of their placement a real challenge. You are acclimatising to a new culture, language, customs and place of work all at the same time. For many doctors, this anxious time passes as they become accustomed to life in the UK and they begin to settle in.

As the NHS has such a diverse workforce, you will likely find that there will be many people around you that have gone through a similar experience and will be only too willing to help support you. In addition to Trust ES, CT and HR support you can contact your MTI buddy, Regional Champion and MTI Office and we will all be happy to help you.

Some Trusts have an IMG committee that can provide support at various levels and put you in touch with various IMG's in the Trust, which can be a good support network. Usually, colleagues go out for

food or drinks after work, join them as per your cultural preferences. This is usually a good time to get to know people, is good for team building and will help to make you feel more integrated.

This [article written by an IMG Doctor](#) provides a helpful insight and some good advice for the rollercoaster of emotions you might be feeling. There is also a [Facebook IMG in the UK group](#) you can join.

Simple tips like eating healthily, getting 8 hours of sleep, exercising and getting out into nature all help keep you physically and mentally healthy. Due to the limited sunlight hours in the UK, it might be advisable to take a vitamin D supplement.

Workplace Issues

If there are problems and issues that you encounter at work that you cannot resolve by discussion with your ES or CT, you can speak to either your Regional Champion or the RCOG MTI Office in confidence. We strongly advise that you get in touch via mti@rcog.org.uk at the earliest opportunity.

We may arrange to call you or have meeting with you to discuss your difficulties, depending on the nature of the problem. We will try and work with you to resolve the issue informally.

If there is a need to escalate and formalise the issue, we will contact the College Tutor at your hospital with your consent.

You can read more about what to expect [here](#)

RCOG Supporting our Doctors Resources

An overwhelming majority of those working in O&G find it a stimulating and rewarding career. However, we understand that it can sometimes come with its challenges. Supporting the O&G workforce and ensuring doctors are equipped and supported to deliver the highest levels of care to women and girls is a key strategic priority for the RCOG. [Read more](#)

Bullying and harassment

All Trusts have their own workplace behaviour policies, this should be covered during your Trust induction and most Trusts have a zero tolerance on inappropriate workplace behaviour. You should escalate any concerns over bullying or undermining behaviour you experience or witness to your ES or CT or alternatively you can speak in confidence with HR. Alternatively you could approach your Trust Freedom to speak up guardian or Guardian of safer working (they cover both rota and working conditions). If you need further guidance please contact your RCOG Workplace Behaviours Champion

This [hub](#) brings together a number of resources and sources of support for wellbeing, mental health and legal advice. Find out about your Workplace Behaviour Champion and how they can support trainees with bullying, undermining and harassment encountered in the workplace

Part 4: Adjusting to life in the UK

British culture and social norms

British culture is likely to be quite different from the culture in the country you are travelling from. We would suggest you read up in advance to give you some idea of what to expect when you travel to the UK. [Read more](#)

Common phrases and sayings

The English Language is full of examples of phrases and slang that would confuse anyone that hasn't grown up in the UK. It is very likely you will come across a multitude of these in your day to day life in the UK. If you don't know what something means it is better to just be honest and ask the person speaking for clarification. Examples of common phrases and words can be found [here](#)

Regional accents

The UK has the largest variation of accents of any country and you are likely to encounter a wide range of these during your two-year MTI placement. The [British Library](#) provides a free resource where you can listen to regional accents and dialects. Listening to local radio stations will help you get used to the accents you might hear at work. Watching TV shows will also expose you to the range of accents across the UK.

You may struggle to understand your colleague and patient's accents, and similarly they may struggle to understand yours. It is perfectly acceptable to politely ask one another to speak more slowly and clearly and to repeat what they have said while you get used to each other's accents.

Commuting and public transport

Train travel

You can use [National Rail](#) to plan your journey, buy train tickets and stay updated with train delays. You can also buy train tickets over the phone, at a station ticket office or at self-service ticket machines available at most stations. Typically, the earlier you buy tickets, the cheaper they will be, although they may not offer much/any flexibility. There are rail cards available for families / children, see if you are eligible for these as they can help save you money while traveling. The Trainline app is a reliable app you can download.

Some trains have dedicated 'quiet carriages' or 'quiet zones', you should take care not to take phone calls, listen to music or talk loudly in these carriages.

Trains in the UK tend to depart on time, with doors closing 30 to 60 seconds before departure. You should plan to arrive at the station early to give you time to print tickets (if needed), find your platform and board the train. You may need to open train doors yourself, either with a button or handle.

Bus travel

Bus companies are usually operated locally with their own websites for timetables and bookings. Some buses will require you to buy a ticket from the driver, some have apps and others have a pay as you go system where you can top up a card or pay using your own bank card. Tickets are typically sold as a single or return journey.

You can catch the bus from a bus stop by sticking your arm out to indicate to the driver you intend to board. Once on board, you will need to use a stop button to indicate that you would like the driver to stop at the next bus stop.

The London Underground is operated by [Transport for London](#) (TFL). You can either buy a paper ticket, or use the oyster/pay as you go system, paying as you go usually works out as the most cost effective option as the cost of travel is capped each day.

When using escalators to and from the platforms, you should stand on the right-hand side, or walk on the left-hand side.

You can use [National Express](#) to plan, book and pay for long distance coach journeys around the UK. There are a number of other coach companies available and you can browse these to find the best deal for your journey. National express does offer blue light card discount.

Driving in the UK

You may be able to use your current driving license for up to 12 months after you arrive in the UK, before needing to take a theory and practical driving test. You should check the [government website](#) to see what rules will apply to you. There can be long delays in securing a driving test therefore it is wise to start the process early so that you will have UK driving licence by the end of first 12 months

Before you take to the road you should be confident in your ability to drive safely and follow the rules of the road in the UK. You need to also ensure the vehicle you are using has a valid MOT and insurance covering yourself as the driver.

There are some basic things to remember when driving in the UK:

- Drive on the left-hand side of the road.
- Check whether the car is a manual or automatic (most will be manual).
- Always give way to the right.
- Study rules related to roundabouts and junctions
- Do not drink alcohol and drive.
- Do not use your mobile phone when you are behind the wheel. You must pull over, stop and disengage your ignition before using a phone
- Carry your valid driver's license and proof of vehicle insurance whenever you drive.
- Follow speed limits and obey road signs.
- Watch out for bus /taxi /cycle lanes which you cannot drive in/cannot drive in during certain times and one way roads/pedestrianized zones.
- You must stop at red lights.
- You and every passenger in your vehicle must wear a seatbelt.
- Children under 12 must use the correct seating (childseat/booster)
- Give way and pull over to allow safe passage of emergency vehicles with sirens and/or lights flashing

Weather

Weather in the UK can be incredibly varied, so it is advisable to check the forecast regularly.

Winter (early November to mid-March) is typically cold, wet and windy with temperatures averaging between -0.2 °C and 9.4°C. Snow is more common the further North in the UK that you go

Spring (late March to late May) is typically quite mild with temperatures averaging between 0.9°C and 15.6°C. April is typically a month of sun and showers. It is not uncommon to still get a cold snap with frost up until early April.

Summer (early June to mid-September) is usually quite dry and warm, with temperatures averaging between 7.2°C and 20.4°C. It is not uncommon for a months' worth of rain to fall in just 24 hours.

Autumn (late September to mid-November) is quite a changeable season, with temperatures averaging between 2°C and 17.5°C.

Public Holidays (Bank Holidays)

There are several public holidays in the UK when many employees are given the day off work, however your employer does not have to give you paid leave on bank or public holidays. You should check your employment contract to see what dates your employer has agreed you can take. Please note that the bank holidays may differ depending on which Country you are in (England, Scotland or Wales). If you work during a bank holiday you can request a day off in lieu on another day.

If a bank or public holiday falls on a weekend, a substitute weekday becomes a bank holiday instead (usually the Monday after the original date). Check the [UK Government website](#) for specific dates.

Travel and holidays

You can leave the UK as part of your annual leave entitlement, for holidays and domestic reasons etc. as well as travel internally within the UK during the 2 years of MTI. Given the close proximity of the UK to mainland Europe, many MTI Doctors use the 2 years as an opportunity to travel and explore other cultures alongside experiencing the culture in the UK.

Absences from work

Prolonged absences from the UK may result in the withdrawing of your Tier 5 visa. The immigration regulations state that sponsored workers can take short periods of unpaid leave. However, if you are absent from work without pay for more than **four weeks** total in any calendar year (1 January to 31 December) and this absence is not covered by any of the exceptions listed below, your sponsorship should be stopped. Permitted absences from employment are:

- Statutory maternity leave, paternity leave, parental leave, or shared parental leave
- Statutory adoption leave
- Sick leave
- Assisting with a national or international humanitarian or environmental crisis, providing their sponsor agreed to the absence for that purpose
- Taking part in legally organised industrial action.

If you are away from your placement for more than 10 consecutive working days (other than the permitted absences listed above), the Academy will require an Exception Report. Please notify the RCOG MTI Office if this applies to you.

The Academy is also required to report unauthorised absences of more than ten consecutive working days to the Home Office (this is likely to result in losing your visa and having to leave the UK). You should notify your manager or medical staffing services immediately if you are unable to attend work for any reason. If you are absent from work without explanation, it will be recorded as an unauthorised absence.

Please ensure that your line manager and medical staffing services have your up-to-date contact details (including personal email address) at all times so that you can be contacted if an unauthorised absence is thought to have occurred.

Part 5: Life after MTI training

What you can expect to have gained by completing your training

The RCOG's aim is that by the end of the 2 years of MTI training you will at a minimum have achieved the competencies set out in the MTI Training Matrix, and will have sat and attempted the Part 2 and /or 3 and passed whilst in the UK.

Whilst you are in MTI Training the RCOG wants you to feedback to us on your experiences through participation in the RCOG MTI Annual Meetings, MTI Annual Survey, MTI ARC and engagement with Regional Champion. After completion of MTI training we will also ask you to complete an End of MTI survey and would encourage you to get involved in projects to support future MTI trainees e.g. buddying scheme, MTI resources review.

We very much want to use your experiences to help shape the future of the MTI Training Scheme and to understand what the RCOG can do to help you utilise what you have learnt once you are back home to improve healthcare in your country.

Putting what you have learnt into practice

To help further the aims of MTI as a philanthropic 'learn and return' scheme we would encourage you to get involved and help support the global work of the RCOG. [Read more](#)

The Centre for Women's Global Health delivers the RCOG's mission to improve girls' and women's sexual, reproductive and maternal health in low and middle-income countries. The Centre works with local providers in low-resource settings to support advancements in women's health services. If you would like to find out more about how you can get involved with supporting a project in your home country or to join the newsletter please contact cfwgh@rcog.org.uk

Please do contact the [IRC Committee of your home country](#) or International Council Representative to discuss and explore how you might be able to share what you have learnt with other healthcare professionals in your country or region to improve standards of patient care.

We are always keen to share with members and Trusts examples of how the MTI training experience has led to improved global healthcare. Please get in touch with the MTI Office to share your experience we would be delighted to learn more or you may wish to consider submitting an abstract at a future RCOG Annual Congress

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