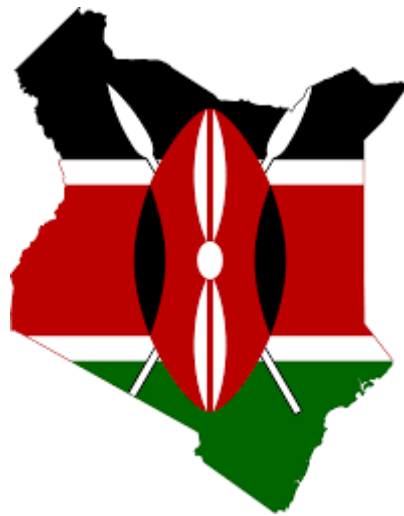


Kenyan Doctors UK



Information Archive

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1. Getting your first job in the UK

Edited on: 31/01/2021

A Kenyan MO with full GMC registration is seeking guidance on getting a job in surgery

Advice given by forum members:

- Your target job may be in a specific area e.g. surgery, but apply for all jobs, not just jobs in surgery
- Getting into the system is your priority and then, navigate your way into what you want

· *Good entry jobs suggested:*

- **A&E**

- § You learn how to refer

- § May be difficult at first however makes you competent to work in other areas in the NHS

- § You will interact with the teams and gain name recognition

- § Prepares you for General Surgery, Orthopaedics, Plastics, Trauma

- **Geriatrics**

- § Demand is constant

- § Good grasp of general medicine

- **Acute medicine**

- § Can be challenging but you learn how to navigate the system

- When you see a job advertised, make a call to HR as well as the consultant in charge of the recruitment

2. From Kenya to the UK, a doctor's journey

Click on the picture below to see a doctor's presentation given at the 28th November 2020 meeting on coming to the UK and applying for a job in the UK



FROM KENYA TO THE UK

A Doctor's Journey

3. Steps in the Process

What is the process of going to work in the UK?

[Please note that the information below is not official advice and should be checked against information on the GMC website]

1. Go to British Council website and apply for IELTS, paper-based. The website will have some material but you can also use this link

https://www.ielts-exam.net/general_practice_tests/65/IELTS_General_Reading_4_Passage_1/599/

2. Go and create an account with EPIC at <https://www.ecfmgepic.org/index.html>

You will be required to upload your degree certificate and your transcripts. The ECFMG will need to do a source verification for these.

3. Make an account on the GMC website

https://webcache.gmc-uk.org/gmcconnect_enu/login.aspx

4. After passing IELTS, go to GMC website and upload your IELTS results.
5. You can then book Plab 1.
6. Download Plabable on your phone or computer and use it to study. That alone is enough.
7. Results take about 4-6 weeks to come out
8. After passing Plab 1, go to GMC website and book for Plab 2.
7. It is recommended that you also register for Plab 2 training at an academy, most of which are found in Manchester, so you'll need to travel to the UK. The most well known ones include Samson, swammy, aspire...etc, but you can just google whichever you feel comfortable with. Some people are able to pass Plab 2 without the academies, but these are few and far between. After the academy course, take 4 weeks before the exam to prepare.
8. Results take 3-4 weeks to come out
9. After passing Plab 2, apply for registration with the GMC. Takes between 2-4 weeks depending on delays. You will need your internship details for this, so make sure you have them handy. The GMC will give you a form to download so that you can fill these details.
10. The GMC will then give you full registration with licence to practice

Useful links

1. The Savvy IMG - Your guide to working in the UK as an International Medical Graduate <https://thesavvyimg.co.uk/>

2. Medical Training Initiative (MTI)

Information about the MTI scheme, which allows non-UK doctors to come to the UK to train for up to 2 years.

<https://www.rcog.org.uk/en/careers-training/working-in-britain-for-non-uk-doctors/medical-training-initiative-mti-scheme/>

3. Information for overseas doctors

<https://www.healthcareers.nhs.uk/explore-roles/doctors/information-overseas-doctors>

4. Registration and licensing

<https://www.gmc-uk.org/registration-and-licensing/join-the-register/before-you-apply/working-as-a-doctor-in-the-uk>

4. MTI fellows and meeting training needs

Edited on 07/12/2020

‘A few MTI fellows have reached out to me and a few other colleagues as they are not meeting their training objectives.’

The concept of a fellowship in the UK may be a little bit different from e.g Kenya, SA, Canada, US or Australia.

Like many other job titles they have in the UK, the MTI Fellowship is mainly for service delivery (irrespective of what they tell you!) and if you don't look out for yourself, it may end up just being that: Working as an SHO or Junior Reg to plug rota gaps, to cover so that trainees can go train or to cover out of hours work (nights and weekends) - which are not considered training time. The system can take advantage of your skills to their advantage.

Other job titles that come with minimal support for training are Clinical Fellow, Senior Clinical Fellow, Clinical Research Fellow (Trust ones not HEE ones). Specialty Doctor - depends on how you negotiate your terms.

Am aware that support for MTI fellows varies from one department to another and one hospital to another.

E.g at Nottingham O&G, MTIs are treated just as normal trainees and are happy.

What to do if you are in such a situation?

1. Be assertive - respectfully assertive.
2. Fish out your MTI competencies checklist and see how much you have achieved and how much you have to go.
3. Approach your Educational Supervisor and highlight your development needs and request for sessions that allow you to meet those needs.
4. The College Tutor +/- a rota coordinator usually manage the rota.

Ask to sit with them to review your work pattern vs meeting developmental needs.

Educational supervisor can be your link to them.

5. Make friends with trainees and get added to their group emails etc

Make Senior Registrars aware of your training needs so that when they have a procedure they have you in mind. That way, you'll get through the formative assessments quicker and you can start doing summaries with the Consultants.

6. If all fails, report back to your National MTI office - with the aim of seeking a solution or change of centre.

Other advice

Ensure that your posting indicates your specific area of interest e.g if its Breast Surgery let it be specific.

If given an option to take shifts on the general rota- don't take it. Its a bait and once you take it that's it.

SAS Tutors

These exist in many Trusts and they may be good for bouncing off ideas although they may not be specific to your specialty.

Disclaimer

Above is based on my own experience in a variety of jobs and as a trainee.

If any MTI fellow here is having issues, please speak out and hopefully we can find someone in your area for more specific advice.

Past MTI fellows, Please guide the new ones as you know how to navigate these hurdles best.

Consultants, please be advocates for MTI Fellows and Trust Grade doctors where and when possible.

Further advice:

- Support from Educational supervisor is the most valuable
- Also be proactive in setting up initial and follow up meetings with them. Engage them 100%.
- If the relationship with ES isn't working, make it work.
- Changing ES or Changing Centre should be a last option.
- What one person did was look at the RCOG training progression matrix and then aim to achieve competencies so that when the time comes, the e-portfolio speaks for itself. There is a new MTI Training Matrix in the works
- It might help if the MTI has clear thoughts on why he is taking up the job. Is it to train for two years and return to Kenya or do they plan to stay. If you plan to stay, use the job as a stepping stone to a better role, get competencies and partner with other trainees. If you plan to return in two years, be clear on what skills you want to achieve and work towards it. The MTI set up makes it unlikely for you to learn new skills in the first 6 months as you will be learning the work culture.
- Advice: familiarise (yourself) with the appraisal process and how evidence of skills/ competences is done. It's rather depressing trying to arrange an MSF when you have been a hard working loner
- Senior clinical fellow - depends on the institution you have applied to. I would recommend senior clinical fellow job for endoscopy in (hospital).... Any aspiring gastroenterologist needs a post CCT fellow job before working as a consultant. So MTI, is a good avenue to start and then once you understand the NHS system then, you can apply for these jobs.
- Additionally, MTIs and other new Trust doctors, I recommend that you please register an account on <https://portal.e-lfh.org.uk/>.
- You will find stuff that's useful to settling down e.g educational supervision, Appraisal and Revalidation and Induction for International Doctors amongst others that are specialty specific.
- All training posts (even post CCT) are supernumerary and closely regulated.

5. Professionalism - pitfalls to avoid when practising in the UK

Professionalism

A talk given by Mr. Eric Mutema at the *Kenyan doctors UK* meeting held on 06/02/2021

Some factors that may contribute to increased risks of being investigated include:

- The culture we were trained in may have been one where the doctor was encouraged to 'do everything' and not call in senior help. In the NHS, this can lead to one doing things outside their remit and lead to trouble. It is important to recognise your limitations and seek senior support
- We may be working hard to raise money and in the process, locum for many different trusts – unfamiliarity with systems can lead to error
- The NHS can be a very small place – be careful e.g. when you don't attend work as you were locuming elsewhere – this can be exposed because you have colleagues who work in both institutions

Things to note:

- Banter – be careful not to go too far, as you may offend e.g. sexual banter may lead to charges of sexual harassment
- Physical touch – avoid being too 'huggy'
- Always have a chaperone and document who that was – this in fact is emphasised for female doctors
- NEVER have relationships with patients/potential patients/close relatives of patients – please see GMC Good Doctor guidelines
- Do not send patients texts from your phone, no matter how well meaning
- Whistle blowing – very difficult. Before reporting anything, discuss with your defence union. They may take a more objective position. Fact check. Remove any emotion.

- Informal prescribing – you are well within your rights to do the prescriptions.
 - If the script has no problem, then there will be no problem
 - If there is a problem, then you will be investigated
 - Avoid prescribing for yourself or someone close – you may have to justify it
 - You may not get the benefit of the doubt
- Relationships – build good relationships wherever you work – you never know when you may need it

Remember:

- It can be hard when the onus is on you to prove your innocence

Discussion points raised after the presentation by members at the meeting:

- Sometimes you may feel threatened when you are doing the right thing, but others disagree with your decision – be confident that you are doing the right thing. A solution may be to defer to your senior – it's not worth the fight nor the repercussions
- Document, document, document – the timeline for complaints may be 10 years (O&G 25 years!)
- You will be judged by the letter of the law; not necessarily the spirit of the law. You may not get the benefit of the doubt. Nevertheless, the law is just
- Do not dismiss patient concerns – this always gets the attention of reviewers
- Porn at work = instant dismissal
- Be careful about social media / potential employers may review / it can be good as well as bad / remember to include Kenyan social media in your consideration / avoid aggravating statements e.g. political statements

- Be careful what you put after your name, e.g. MD – in the UK this is a research degree
- Have a written record e.g. if you raised a concern with a clinical supervisor, write an email follow-up
- MPS and MDU have free courses e.g. effective record management etc – go for them
- Own up as soon as you recognise an error; the GMC looks favourably on this
- Don't hid mistakes/ alter records retrospectively
- The GMC website has all cases that have been previously reviewed – have a look

Other resources to help new doctors:

General Medical Council (GMC) workshops:

The GMC is offering a workshop that is designed to help doctors new to the UK, by offering practical guidance about ethical scenarios you may encounter, and the chance to connect virtually with other doctors coming from abroad. Here is the link:

<https://www.gmc-uk.org/about/what-we-do-and-why/learning-and-support/workshops-for-doctors/welcome-to-uk-practice>

6. Raising children in the UK

A talk given by Dr. Susan Muniu at the *Kenyan doctors UK* meeting held on 06/02/2021

Click the picture below to go to the PowerPoint presentation:

RAISING CHILDREN IN UK.

SUSAN MUNIU
6/6/21

or click the link below:

<https://www.dropbox.com/s/64jcscs4zs94oza/Raising%20Children%20in%20the%20UK%20Dr%20Susan%20Muniu.pdf?dl=0>

Discussion points raised after the presentation by members at the meeting:

Identity

- Our children are British and we need to accept that reality.
- Our children also have a Kenyan heritage and we should also develop their Kenyan identity.
- Involve your children in what you do e.g. in business, let them do the accounts etc. Observe the great American family dynasties

Pregnancy

- Consider letting your employer know early enough that you're expecting as they may give a bit more leeway from your work and allow flexibility. Please beware that notifying your employer early in your pregnancy may not always work in your favour.

Education and childcare

- It's important to think about where you'll live. The catchment area of schools is postcode dependent.

- Register your baby as early as you can (even at 3 months of age!) for nursery. Really good nurseries have very long waiting lists.
- Register your baby with a dentist as NHS dentists have long waiting lists.
- Consider where you can get flexible working to facilitate childcare
- If the father is the main breadwinner and takes parental leave, this may reduce the total take home pay. It may be better to take annual leave instead of parental leave.
- Nannies may be cheaper than nursery, but you will be registered as an employer and may have to remit income tax and offer a pension to the nanny. There are companies that can do this for you, including writing up contracts of employment, generating the payroll and issuing payslips.
- Local networks are important i.e. neighbours, friends etc. They don't have to be Kenyan, but you may share similar values.
- Be aware that there are different education routes e.g 11plus and 13 plus exams – know them and find out about them.
- In schools, don't just accept things as they are. Challenge things. Speak to teachers. Be involved in your child's learning. Speak to parents who share your values and aspirations for their children e.g. immigrant parents.
- Education can be expensive. When the government cuts budgets, the expensive subjects e.g. sciences (requiring labs) and arts (requiring theatres) may suffer and the gap between private and government education systems become more evident.
- We should emulate other immigrant parents e.g. the Indian, Chinese and the Nigerians who value a good education and have invested heavily in their children's education
- Au pairs can be a good choice.
 - They are helpful if you have late/night shifts.
 - You get them through a recruitment agency via a 'speed dating' system where you are looking for someone with values that you share. You have to sift around to find the right au pair(s).
 - They are cheaper than nannies; you don't have to be an employer/pay taxes/pay pension as the agency does that.
 - You have to help them learn English

- They can provide a good bond with your children
- You can get your parents to come to the UK for up to 6 months on a visitor's visa to help with childcare.
- Close friends can also help you with childcare

Online activities

- Be careful – some of the people on some of the interactive online games are adults and groomers. Be aware of the online environment that your child is playing in.
- There is a value in being savvy in video gaming. The younger new surgeons are used to using simulation etc from video gaming and are therefore very sleek in carrying out surgical procedures that take advantage of skills gained from gaming. This comment was given by a laparoscopic video surgeon.
- You want to strike a balance - keep them safe online but also allow them to gain the video gaming skills - don't keep them in a cocoon – expose them but give them the tools to navigate safely in the online environment

7. Support while working in the UK

Emotional Wellbeing - Support for mental ill health

These are resources to help doctors in maintaining mental health and well-being:

1. The British Medical Association (BMA) has a service to support doctors. Here is the link:

<https://www.bma.org.uk/advice-and-support/your-wellbeing>

2. Some workplaces have Balint support groups; find out if there's one where you work. Here is a link offering a description of the Balint method:

<https://balint.co.uk/about/the-balint-method/>

3. If you don't have access to the above, find a group of peers that can support you, and check in with them often. Remember to create a safe space and **maintain patient confidentiality**.
4. Any doctor, dentist , pharmacist needing counselling or to seek help for mental health can use the resource below:

<https://www.practitionerhealth.nhs.uk/accessing-the-service-for-doctors-and-dentists>

5. If you are a consultant, you could start a support group in your workplace. Here are questions you might ask in a structured session:

1 - How are you and what's on your mind right now?

2 - What are your reflections and feelings in view of what you've heard?

3 - What would you like to take forward/ any appreciation of thoughts that resonated with you?

Mental illness in doctors in training

Mental illness as a doctor in training can happen. Here are personal stories of doctors in training with mental illness:

https://www.bma.org.uk/media/1063/bma_personal_stories_of_doctors_in_training_with_mental_illness_oct_2019.pdf

A note on reflections

Be careful when reflecting. Do not take responsibility for things that have arisen out of failures of the system – see

https://www.gmc-uk.org/-/media/documents/20180419-factsheet---dr-bawa-garba-case-final_pdf-74385491.pdf

Key points from the GMC article:

1. Reflection must be anonymous.
2. Reflection is for educational purposes, not what went wrong, but what I can do better.
3. There are many mechanisms to raise concerns...part of good medical practice is raising concerns. This can be done via email, which also acts as evidence to show that you have done your part.

Additional points June 2021:

It may be useful to know

- 1) that the NHS psychological therapy services IAPT are not only free but also directly accessible via self referral online. Simply Google IAPT (where you live) eg IAPT Southwark.
- 2) The Practitioner Health programme is exclusively for health care professionals. Again free and open for self referral.
<https://www.practitionerhealth.nhs.uk>
- 3) Practitioner health in conjunction with SHOUT crisis support text number 85258
- 4) There is an excellent service called the Maytree they offer a free four night five day respite stay for the suicidal <https://www.maytree.org.uk>

8. Moving Cargo to Kenya

These are suggestions from the group; this is not an official recommendation and you are advised to do your own due diligence – ask who they interlink with as a courier

1. Amin Jambo Cargo - +44 7507 795554
 2. Stephen Dagenham Cargo +44 7723 719638
 3. MAP Express Cargo +44 7555 490943
- NB: Many other Freight companies feed into MAPS

4. African Salihiya
<https://www.africansalihiya.com/index.php/branch-networks/16-london-uk>
5. Horizon Cargo UK 07474969956
6. Send My Bag <https://www.sendmybag.com/>
7. Kenya Exports <https://www.kenyaexports.co.uk> – Collection service available for a fee
8. Salama Global 54 Woodgrange Rd, London E7 0QH 020 8519 4400 – shared 2018