

A New Starter Guide to EoE



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Welcome to the East of England deanery!

We are delighted to welcome international medical graduates into our workforce at health education EoE. We hope to offer invaluable support during your move to the UK.

We recognise this is an exciting new chapter in your careers and are keen to make the transition as smooth as possible. Whether you are making the journey alone or with your family the change is big and this is reflected by the breadth of topics covered in this handbook.

This handbook is designed to be part of an array of tools for you to use while you settle into your new life in the UK. Please use it in complement with the website, highlighted national resources as well as the local support you will receive from your specialty schools and individual trusts.

Introduction to EoE

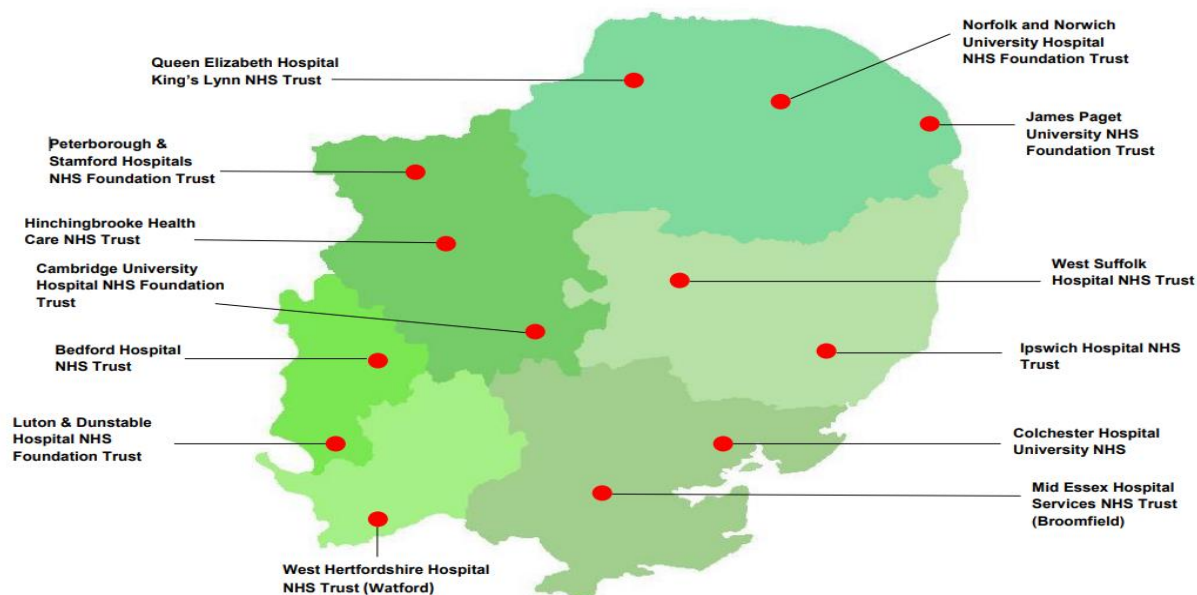
Health Education England, East of England (HEE, EoE) is the regional education and training body that covers Bedfordshire, Hertfordshire, Cambridgeshire and Peterborough, Norfolk, Suffolk and Essex.

There are 19 Clinical Commissioning Groups. We have 27 Trusts within the East of England, of which 16 are Foundation Trusts serving the 6.2 million population of the region.

The region has a lot to offer including some of the UKs most scenic tourist spots. A large part of the region is on the coast and there are also some major UK cities. London is easily accessible from most parts of the deanery.

This is a map of the region and a list of NHS trusts across the region:

East of England Deanery Map



This is not an exhaustible list but covers most of the trusts you are likely to work in as part of your placement:

Links to the hospitals have not been included but an internet search will provide you of the website for your place of work. This can give you some more useful practical information and give you an insight into the organization.

How the NHS is organised

The national health service founded in 1948 is a complex system that has had many overhauls. In the UK healthcare is devolved to the four nations. NHS England is the umbrella body that oversees healthcare in England.

Healthcare is divided into 3 categories.

Primary care

This is often first point of contact for patients. It covers general practice or family medicine as it is known in some countries. Since July 2019, almost all GP practices in England have come together to form about 1,300 primary care networks (PCNs). These cover a population of 30,000-50,000 people and bring general practices together, along with local providers to provide a wide range of professional skills and community services. Community services include pharmacies, dentists, eye care, walk in clinics and the NHS 111 service. Social care also belongs in this category.

Secondary care

Secondary care refers to specialist services. The majority of services are housed in hospitals but also in some satellite community clinics. Patients usually access routine or elective care through referral from primary care. In the emergency setting patients can also self-refer; for example, to the accident and emergency department or maternity emergency care.

Tertiary care

This encompasses highly specialised services and will serve much larger geographical areas and populations. Regional centres ensure that these rarer, usually high-cost conditions are managed by an expert team. For example, specialised diagnostic services, genetics or transplant and cancer services. Tertiary services are accessed through referral from secondary or primary healthcare.

CCGs

England is split geographically into clinical commissioning groups. In 2020 there were around 135 CCGs. CCGs are responsible for planning and purchasing of primary and secondary healthcare services for their local population. CCG members include GPs and other clinicians such as nurses and hospital consultants.

CQC

The care quality commission is an independent regulatory body which inspects the safety and quality of care in hospitals, general practices, care homes, ambulance services and walk-in centres. It delivers a publicly available evaluation. It publishes ratings of each trust and its services – if services do not meet certain standards, the CQC can issue warnings, restrict services or even prosecute the provider.

More information

Further information can be found via several websites including:

[NHS England » An introduction to the NHS](#)

[How is the NHS structured? | The King's Fund \(kingsfund.org.uk\)](#)

What is HEE?

Health education England is the body that oversees education and training for the NHS workforce. Postgraduate medical and dental training is available for all doctors and dentists in 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.

The postgraduate training in the UK is divided into the following phases:

Postgraduate training in the UK is broken down into 3 main phases:

- Foundation Training
- Core Training
- Higher Specialty Training

There are some pathways combining core and higher training, referred to as 'run-through programmes'.

Foundation Training - This is a generic two year programme where doctors in training rotate through typically 6 x 4 month rotations, gaining the fundamental skills of a doctor in practice. Foundation trainees will experience hospital and community-based medicine, as well as some exposure to mental health.

Core Training - This period of 2-3 years, depending on specialty, builds on the more specialty specific common competences. Example of core programmes include Core Surgical Training, Core Medical Training and Acute Care Common Stem. Initial membership exams are often undertaken and trainees start to gain more experience in the areas they wish to specialise in. Doctors are often referred to as 'core trainees' during this period.

Higher Specialty Training - This is when doctors in training have chosen a particular specialty to train in, e.g. Renal. After successfully completing this training, trainees can apply to be on the specialist register and apply for consultant posts. Doctors in this period of training are referred to as 'specialty trainees' or more often as 'registrars'.

CESR/CEGPR

Doctors new to the UK may have substantial experience gained in their home country. The General Medical Council has a process by which this can be recognised in the UK system called CESR (Certificate for Eligibility for Specialist Registration) or CEGPR (Certificate for Eligibility for General Practice Registration).

This process is application based, and doctors must provide evidence that they match the curriculum outcomes of the UK system. Full guidance is available on the General Medical Council website.

[Our work | Health Education England \(hee.nhs.uk\)](http://hee.nhs.uk)

Relocation to the UK

Ideally the preparation to work as a doctor in the UK needs to start once you have made the decision to come to the UK. We would recommend that your preparation starts with familiarizing yourself with UK systems and important organisations.

There is a wealth of information online that can start your journey off. Many reputable organisations offer eLearning. Some of these online accounts will require a GMC number or an NHS email account. Your GMC number will already be available to you from the general medical council once you have fulfilled the requirements.

Your NHS mail account can be facilitated by your trust. It will usually be created by human resources once you have joined your workplace. The details of how to do this will be included in your local induction pack.

Again, this list is not exhaustible but will give you a good grounding in what the GMC is, what the NHS is and sound principles in clinical care that will be expected of you whatever specialty you join.

Settling in

To settle in a new place there are a range of issues to consider and practicalities to arrange:

Biometric residence permits

One of the most useful and essential documents to have is your British residency permit. This should be a matter of priority as it should be picked up within the time stated. Your trust will provide you with details of how to do this

[Biometric residence permits \(BRPs\) - GOV.UK \(www.gov.uk\)](http://www.gov.uk)

NI Number

In the UK, National Insurance (NI) is a system of taxes paid for by employees (and employers). These taxes are used primarily to fund state benefits, including the state pension. The amount of NI contributed by an employee is dependent on how much they earn and will determine how much they get in state pension upon retirement. It will also determine their entitlement to other benefits should they lose their job or suffer from long term illness. An employee's NI contribution is deducted automatically from their gross wages (together with their contribution to income tax) and will be seen on their payslip under 'PAYE'.

In order to obtain a National Insurance (NI) number, you must have the right to work in the UK. If you don't already have a NI number, you must apply for one. However, you can only apply for it once you're in the UK.

You are required to apply for a National Insurance number by phone.

The National Insurance number application line is shown below:

Telephone: 0800 141 2075

Textphone: 0800 141 2438

It is open Monday to Friday, 8am to 6pm.

Alternatively, you can go directly to the gov.uk website for the number and further information.

You do not have to wait for your NI number to arrive before you start work. However, you must be able to prove you can work in the UK. You should also tell your employer that you've applied for one, and give it to them when you have it.

Income tax

Income tax is a tax you pay in the UK on your earnings/income. Most people in the UK get a personal allowance of tax-free income. This is the amount of income you can earn before you pay tax, and determines what tax code is generated for you. This tax code is then used to inform your employer how much income tax they should be taking from your pay. Your tax code will normally start with a number and end with a letter – 1150L is the tax code currently being used for most people who have one job. You can check your tax code by looking on your payslip or by visiting the gov.uk website. You will see your income tax contribution (as well as your NI contribution) on your payslip under 'PAYE'.

Upon starting work in the UK, you may be emergency taxed and given an emergency tax code accordingly. These tax codes are temporary and should be updated as soon as possible. So that the correct tax code can be generated, your employer will require you to complete a '[starter checklist](#)' form prior to your first payday. This form is used to gather the necessary information required to generate the appropriate tax code for you.

Pension

The NHS Pension scheme is one of the most comprehensive and generous schemes within the UK.

If you are aged between 16 and 75, and are working in the NHS, you are eligible for a NHS pension. You will automatically become a member of the 2015 NHS Pension scheme when you start work.

Pension contributions will be deducted monthly (before tax) from your income and will appear on your payslip as '*Pension contribution x%*'. The percentage that you will contribute to the scheme will be dependent on your annual income. You can opt out and this can be done by contact the pension scheme.

The Normal Pension Age (NPA) of a member of the 2015 NHS pension scheme is currently the same as their State Pension age. Your State Pension age is dependent on your date of birth and gender and can be calculated [here](#). The State Pension age is currently under review and so may change in the future. Please be aware that you can keep working after you reach State Pension age – a forced/default retirement age no longer exists. Similarly, you can retire before this age, although this must be considered carefully as it will affect your pension amount. There are flexibilities in the current NHS pension scheme that allow for early retirement; more information on these flexibilities can be found in the '[2015 NHS Pension scheme: Guide for members](#)'.

If you have cumulated at least 10 qualifying years on your National Insurance record upon retirement (they do not have to be consecutive years), you may also be entitled to a State Pension. This would be in addition to your workplace pension. More information on the State Pension can be found at [gov.uk](#).

Further information search - www.nhsbsa.nhs.uk/nhs-pensions

Opening a bank account

This may be something you can think about before you arrive in the UK. It will be essential for you to be paid and to manage your finances. Some banks in your country may offer an international account which will mean you can set this up before you arrive. Some popular UK banks may have a branch in your country so that you can start the process in your country. Most current accounts for personal use are free but will have some minimum deposit and balance requirements. These will be easily met if you are working as a doctor in the UK. Popular high street banks in the UK include:

Barclays

HSBC

Natwest

Santander

There are online only banks available such as:

First direct

Monzo

Again, there are other banks available and EoE does not recommend any particular bank. The commonest type of account is usually a current account but more advice can be taken from advisors at your branch. What documents you will need to open an account will vary from bank to bank but are likely to include:

- Biometric resident permit
- ID document such as passport or driving license
- Letter from your trust confirming employment
- Proof of accommodation

Accommodation

Most trusts will manage a limited amount of accommodation for their staff. Once you have accepted a post you can get in touch with your trusts HR or accommodation department to arrange either temporary or short-term accommodation. Alternatively, you can rent through the private sector through estate agents. Popular websites used by estate agents include rightmove and zoopla or you can go through estate agents directly. Documents likely to be required by your agents include:

- Your right to rent in the uk. This can be completed at [Prove your right to rent in England - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/visas/immigration/renting-in-the-uk)
- Employment or character references
- Bank statements

Your initial costs to rent will include a security deposit, advance rent and possibly an agent's fee.

The UK government provide an overview of your rights and responsibilities as a tenant in the UK. This can be found at:

[Private renting - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/visas/immigration/renting-in-the-uk)

Costs of Living

The cost of living may be very different than from your home country. There may be additional costs you had not anticipated. As the NHS is a very valued organisation some goods and services may be discounted. There are schemes such as the Blue light card which you can join to receive offers and discounts. Your NHS trust may offer some salary sacrifice schemes in which you can purchase goods or services before tax e.g. car leasing.

The following websites can provide an idea of expenses you are likely to incur:

<https://transferwise.com/gb/blog/cost-of-living-in-the-uk>

https://www.numbeo.com/cost-of-living/country_result.jsp?country=United+Kingdom

<https://www.expatca.com/uk/about/basics/cost-of-living-in-the-uk-1167475/>

Utilities

You will need to arrange a supplier for gas, water and electricity. There are various companies supplying gas and electricity and you can compare prices via comparison websites such as <https://www.uswitch.com/>, <https://www.moneysupermarket.com/> or www.gocompare.com.

Water supply will depend on your locality. You can find your local water supplier on <https://www.water.org.uk/>

Council tax

You will need to find out who your local council are. You can use the postcode on [Find your local council - GOV.UK \(www.gov.uk\)](#) if you are unsure of which council looks after your area. You will need to register with them to pay council tax. You can find out about what your local council via [Understand how your council works - GOV.UK \(www.gov.uk\)](#) and their own website.

Tv Licencing

If you own a TV or stream any live services on any device including mobile phones you must have a TV licence. The regulations and purchase can be done online from <https://www.tvlicensing.co.uk>.

Mobile phones

There are many companies providing pay as you go or pay monthly services. An online search can help you decide which is the best option for you depending on your usage. SIM cards are easily available in local convenience stores, shopping malls or to order online.

Insurance

Depending on your requirements various types of insurance are available via comparison websites. Car Insurance is mandatory if you plan to buy a car. Other types of insurance are optional unless they are a condition of certain transaction e.g., buildings insurance as part of a mortgage deal.

Groceries and amenities

Local convenience stores are located within walking distance in urban areas and ideal for small purchases. There are several large supermarket chains that offer better value for your larger grocery shop but may be located further away and need transport to get to.

Transportation

Car – you can drive in the UK using an international licence for up to 1 year. Obtaining a UK driving licence and understanding the rules around keeping a private vehicle can be found on the website of the DVLA (Driver and Vehicle Licensing Agency).

‘Designated countries’ are countries with exchange agreements for driving licences with Great Britain and include: Andorra, Australia, Barbados, British Virgin Islands, Canada, Falkland Islands, Faroe Islands, Gibraltar, Hong Kong, Japan, Monaco, New Zealand, Republic of Korea, Singapore, South Africa, Switzerland and Zimbabwe.

If your licence is obtained from one of the above designated countries then you can continue to drive in the UK without exchanging your licence for 12 months after becoming a resident.

After 12 months, you must exchange your licence to keep driving. You can exchange it up to 5 years after becoming a resident, if it hasn’t expired.

You can access DVLA services via [gov.uk](https://www.gov.uk), or by [using their online services](#).

Private hire – taxis are available via local minicab companies as well as smartphone apps Uber and Bolt.

Bus services offer transport in your locality. The details of which can be found on your local council website.

Coach services operate all over the country and connect to Major railway stations and airports. There are a few national operators including National Express and Megabus.

Airports within EoE that all offer short and medium haul international flights mostly within the UK, Europe and north Africa:

London Luton airport

London Stansted airport

London Southend airport

Both Heathrow international and Gatwick international are close to east of England and serve long haul destinations. Birmingham airport is also easily accessible.

Schools and childcare

In the UK education is mandatory for children between 5 and 16. It is free for children between 3 and 18. Your council website will advise you of the process for application for admissions and the schools in your local area. You can research schools you are interested in and compare using the government’s website [Find and compare schools in England - GOV.UK \(www.gov.uk\)](#). You may want to consider this when choosing where to live as being within a school’s catchment area (geographical proximity to the school) will be considered when allocating places at school. You can find your chosen schools catchment area via your local education authority managed by your council. Schools generally do not require an entry test except for grammar schools. This is a secondary school from year 7 for which your child will need to prepare for the 11 plus exam.

Many schools will also offer wraparound care for working parents. This will be a breakfast club and after school club but will incur a fee.

There are also private fee-paying schools available which manage their own admissions. If you wish to apply for these schools, you should contact them directly.

If you have young children then you can opt for a childminder, nanny or private nursery. Childminders and nurseries are both registered with Ofsted and can be found using your local council. A nanny or au pair can be found using local companies but are not subject to inspection or regulation. They are however a more flexible option that can be better adapted to your needs as a family. Au pairs are usually combining your employment with studies and this will need to be factored in to your requirements. Au pairs will live with you and nannies can be live in or out. Childminders are usually the cheapest option and nannies the most expensive.

The government runs various schemes to help with the cost of childcare so research on gov.uk and enquire with your nursery/ childminder to get the most cost effective option.

Healthcare

Access to health services is free at the point of care in the NHS. You must be registered with a GP to access health services except for emergency services. The GMC recommends that all doctors are registered with a GP.

Secondary care cannot be accessed except for emergencies via A&E. Routine referrals will go through your GP.

Finding a local GP can be done through:

Consultation with the GP or in secondary care is free of cost as are investigations. However, there are charges for prescriptions. It may be worthwhile to pay an annual one-off fee if you are needing regular medication. There are also exemptions from prescription charges e.g. for children. A full list of charges and exemptions can be found at:

Dentists and Opticians

Totally free care is limited to certain groups of people such as children, those over 60 or those receiving state benefits. Understanding costs and finding a local NHS dentist or optician can be done at www.nhs.uk

Pharmacies

These are run by qualified pharmacists who can give some clinical advice and over the counter medications. Medications requiring a prescription will require a script from your doctor. They also provide a range of services such as travel clinics for immunisation and emergency contraception. Some pharmacies will be late night and details of your local pharmacy can be found at:

[Find a pharmacy - NHS \(www.nhs.uk\)](http://www.nhs.uk)

Citizen advice Bureau

Citizens Advice provides free, independent, confidential and impartial advice to everyone on their rights and responsibilities.

They help with issues relating to money, benefits, housing, employment and consumer rights.

They can be contacted online, face to face (they are based in numerous places across the region) or over the phone (telephone number 03444 111 444) or via [webchat](#).

Emergency Services

In case of an emergency, telephone **999**, and depending on your need ask for either:

Ambulance / Police / Fire Service

Emergency services in the UK are available 24 hours a day, 7 days a week and are free of charge.

Medical emergencies that would require you to ring 999 include serious illness and/or major injury that is a risk to life or limb.

If you are in need of urgent healthcare advice, but it is not a life-threatening illness, you are advised to either ring NHS 111, visit a local NHS walk-in centre, urgent care centre or minor injuries unit or to make your own way to your local accident and emergency (A+E) department.

For less urgent healthcare needs, you should consider: self-care at home; contacting your local pharmacist; or visiting or calling your GP, or telephone the NHS Direct 111.

The service is provided by a team of fully trained staff advisers who will assess your symptoms and then direct you accordingly. They may provide you with self-care advice; connect you to an emergency nurse, dentist or GP; arrange for you to be seen face to face; or send an ambulance directly if they feel it is necessary.

Local cultures

The UK is a melting pot of cultures. The diversity, particularly in the NHS is amazing and makes it a very unique place to live. As such your colleagues and patients will offer many insights and impact on your practice.

You will come across difference in language and in particular colloquial and slang terms. If you are unsure of what people mean it is perfectly acceptable to clarify and will help you build your communication skills.

You may also notice a difference in your relationships with your colleagues and patients. In the UK the doctor's role is not authoritative but to advise and support patient decision making where they are competent to do so.

Professional regulation

General Medical Council

The GMC is an independent organisation whose primary role is to protect patients and regulate and improve medical education and practice across the UK.

They are responsible for setting the standards required by doctors and make the decision as to which doctors qualify to work in the UK.

If it is felt that a patient's safety is at risk, or there is a concern regarding a particular doctor, it is the GMC's responsibility to investigate and take action accordingly.

In order for a doctor to practice medicine in the UK, they must be registered with a licence to practice with the GMC. You can check if you, or another doctor, is on the register and licensed to practice using the online [list of registered medical practitioners](#).

It is not the purpose of this resource hub to describe the necessary steps to apply for GMC registration.

It may be of interest to note that all doctors must pay a fee to register with the GMC and then an annual retention fee to remain on the register. Details of how much you will be expected to pay can be found on the [GMC website](#).

The GMC are very aware of the difficulties IMGs can face and have developed modules to help with transition: [Welcome to UK practice - GMC \(gmc-uk.org\)](#)

Good Medical Practice

A core guidance for all doctors working in the UK, regardless of stage of training or level of seniority, is *Good Medical Practice* (GMP). GMP requires doctors to maintain their knowledge and skills throughout their working life and to maintain and improve their performance. All doctors must be familiar with, and follow, GMP.

Good Medical Practice is available [online](#), in PDF and hard copy; in English and Welsh.

Explanatory guidance that shows how the principles described in GMP apply in real life is also available [online](#). Interactive learning materials, decision tools and a range of case scenarios relating to GMP can also be accessed at '[Good Medical Practice in action](#)'.

In order to gain insight into the level of your knowledge and understanding of how the GMP standards apply to your daily practice, we would recommend using the Welcome to UK Practice [self-assessment tool](#). The results of this tool can be used as part of your continued learning and professional development and may also help you decide whether to attend further courses and workshops in order to improve any identified areas of weakness.

Medical Indemnity

As a doctor working in the UK, it is a legal requirement that you hold adequate and appropriate indemnity cover.

The NHS Litigation Authority provides indemnity to hospital and community health employees in respect of clinical negligence claims arising from contracted NHS duties. It does not, however, provide indemnity for disciplinary issues or referrals to the GMC. Therefore, both the BMA and health departments advise that all doctors employed by the NHS retain membership with a defence body and/or take out personal indemnity insurance and ensure that the cover opted for is sufficient for the clinical activities undertaken.

GP contractors, locum GPs and salaried GPs employed by practices are not covered by the NHS scheme and should seek personal medical indemnity cover. Similarly, doctors undertaking private work or work in independent hospitals are responsible for arranging their own liability insurance with a medical defence body of their choice.

Medical Defence Organisations (MDOs) are non-profit making organisations providing members with 24-hour access to advice and assistance on medico-legal issues arising from clinical practice which fall outside the scope of indemnity provided by NHS bodies. They also provide educational tools and publications on medico-legal issues that arise for doctors.

Each MDO offers different membership benefits and therefore it is important to consider each one carefully before making a decision.

Portfolio

As a doctor in training, whether Foundation training, specialty training or General Practice (GP) training, you will be required to complete a portfolio. The portfolio is typically an electronic portfolio, or ePortfolio, to which you will be provided with a username and password to access upon becoming a member of the College aligned to the specialty.

Every specialty will have a slightly different ePortfolio according to the differing curriculum requirements of each training programme.

Foundation Training – doctors completing Foundation training will be expected to complete the [Horus ePortfolio](#). Further explanation and guidance surrounding the use of this ePortfolio will be provided in the Trust induction.

Specialty and GP Training – as previously mentioned, every specialty has its own ePortfolio that is expected to be completed by their trainees. Again, details of this ePortfolio will be provided upon induction to the training programme.

Non-training or Trust doctors – unfortunately, doctors who are not on a training programme do not have access to a specific ePortfolio. However, the BMJ has the [BMJ Portfolio](#), which is a free, online portfolio tool that can be helpful for planning and recording continuing medical education.

Assessments

As part of your training, you will be expected to complete a minimum number and variety of assessments. These include, amongst others, workplace based assessments (WPBAs), case based discussions (CBDs), mini clinical examinations/encounters (mini-CEXs) and direct observation of procedures (DOPs). Details of these assessments will be given at the induction to your training programme and can be found on your relevant ePortfolio. If you encounter any difficulty completing these assessments, it is advised that you contact your Clinical and/or Educational Supervisor in the first instance.

Appraisals

Doctors who have completed their training must participate in an annual appraisal and use supporting evidence to demonstrate their ongoing fitness to practice, irrespective of specialty or branch of medicine. It is a key opportunity to focus on professional development needs. The process involves a facilitated self-review supported by information gathered from the full scope of the doctor's work. It is an important source for agreeing and monitoring personal development objectives. The Good Medical Practice framework for appraisal and revalidation sets out the broad areas that all doctors are expected to address and the responsibilities of both doctors and employers in the process. During their appraisals, doctors will discuss their practice and performance with their appraiser and use supporting information to demonstrate that they are continuing to meet the principles and values set out in Good Medical Practice.

Revalidation

Revalidation is the process by which all licensed doctors are required to demonstrate, on a regular basis, that they are up to date and fit to practice in their chosen field and able to provide a good level of care. Licensed doctors usually have to revalidate every five years, and do so through the annual appraisals described above. It provides doctors with the support to maintain and develop their practice throughout their career and ensures that they have the opportunity to reflect regularly on how change and improvements can be made to their practice.

A recommendation for revalidation will be made to the GMC on behalf of the junior doctor by the Responsible Officer (RO) connected to their designated body. Your Responsible Officer will be in the organisation that is supporting you with revalidation. This organisation is called your designated body.

If you are a trainee in England, your designated body is your Local Education and Training Board (LETB). As a trainee in the east of England, your designated body is Health Education England East of England (HEE EoE) and your RO is Professor Bill Irish. As a doctor in training, you will be generating the supporting information required for revalidation by meeting the requirements of your curriculum and training programme.

You will also be in regular discussion about your progress and outstanding learning needs with your supervisors. Completion of the above will mean that you are ready for revalidation. Detailed information about the process of revalidation for licensed doctors can be found on the GMC website as well as on the HEE EoE website:

<https://heeo.ehee.nhs.uk/revalidation/revalidation>

Annual Review of Competence Progression (ARCP)

Doctors in training (junior doctors) revalidate through the ARCP and do not participate in the revalidation process described above. The ARCP is used to assess a trainee's progress against their stage of training. The assessment is based on the evidence collected in the trainee's E-portfolio. This consists of a wide range of evidence including workplace-based assessments (WPBAs), educational and clinical supervisors reports, feedback from colleagues and personal reflections. The evidence is mapped to the training curriculum to determine if the trainee has acquired the standards they should have achieved for their stage of training. Further information about the ARCP process can be found on the GMC website.

Working Hours and Contracts

The European Working Time Directive (EWTD) was implemented in the UK in 2009 and limits the working hours of doctors in training to a maximum of 48 hours per week (averaged over a six-month period). It also describes the minimum requirements required for rest periods and annual leave.

Currently, doctors in training (under the Junior Doctor Contract 2016) are contracted to work 40 hours per week (unless working part time) as well as any out of hours (OOH)/on-call shifts. The contract applies to all doctors below consultant/GP level.

It is not the purpose of this resource hub to provide detail about the Junior Doctor Contract, however, more information can be found online.

If you have any questions or concerns about your contract, or your pay, it is advised that you contact your employer in the first instance. You can find the details of your employer in the top left hand corner on the front of your pay slip. Alternatively, if you are a member of the BMA, you can contact them for further assistance and advice.

The BMA also provide a free contract checking service for its members.

BMA

The British medical association is a trade union and professional body for doctors in the UK. Membership is optional but they can provide support in an unfamiliar setting. They can offer employment law advice, check your contract and give financial guidance. They also offer webinars and education around commonly encountered problems. As a member you will get access to the British medical journal and to BMJ Learning.

Recommended online modules/ reading

GMC

[Good medical practice - GMC \(gmc-uk.org\)](http://gmc-uk.org)

[Welcome to UK Practice case studies - GMC \(gmc-uk.org\)](http://gmc-uk.org)

Elfh

[Doctors in Training Induction - elearning for healthcare \(e-lfh.org.uk\)](http://e-lfh.org.uk)

Clinical guidance

British National formulary

The BNF and BNF for children are freely available as a rapid reference guide for advice with prescribing and pharmacology across a wide range of medicines. It includes comprehensive facts about medications available with the UK NHS.

The National Institute for Health and Care Excellence (NICE)

NICE provides national guidance and advice to improve health and social care. They are a Non-Departmental Public Body and independent of the government.

NICE's role is to improve outcomes for people using the NHS and other public health and social care services. They produce evidence-based guidance and advice for health, public health and social care practitioners. They also develop quality standards and performance metrics for those providing and commissioning health, public health and social care services.

NICE guidelines make evidence-based recommendations on a wide range of topics from preventing and managing specific conditions, improving health and managing medicines in different settings, to providing social care to adults and children, and planning broader services and interventions to improve the health of communities with the aim of promoting integrated care where appropriate.

NICE is also responsible for providing NHS access to the British National Formulary (BNF) and British National Formulary for Children (BNFC), which are published jointly by the Royal Pharmaceutical Society and the British Medical Association (BMA).

Local Guidance

It is important to note that although the national guidance referred to by NICE and BNF should be used to aid your decision making, each Trust will have local guidelines for the management of certain conditions. Upon starting work, it would be prudent to seek out this guidance and become familiar with its content. It is typically stored on the local intranet and you will receive instruction upon induction to the Trust as to how you can access this. If you have any difficulty accessing these guidelines, you are encouraged to ask your supervisor and/or colleagues in the first instance.

Blended learning hub

Blended learning provides a combination of face-to-face learning and dynamic digital activities and content that facilitate anytime/anyplace learning.

Health Education England East of England have procured a suite of software packages (Panopto and Bridge) to enable the creation and storage of video lectures and to self-build online courses for all Postgraduate Medical Specialties within the East of England. This comes at an extraordinary time for the Healthcare profession and we want to support Doctors in Training by giving our Trainees access to resources that give them the very best tools to manage patients on the ground, in one central, secure, online space.

Once you are in post please email blendedlearning.eoe@hee.nhs.uk for your login details and begin your learning.

The HEE website can give you more information : [The Blended Learning Platform | East of England \(hee.nhs.uk\)](#)

Career development

Leadership

This is an important part of your career. Leadership and management will become increasingly vital as you progress. Your portfolio will often require evidence of developing this aspect of your skill set. Depending on your aspirations Learning can be accessed via many routes in EoE and include:

- The leadership ladder – a blended learning module
- e-Learning for Health: Leadership for Clinicians
- The next step Leadership and management fellows programme - a 9 month course open to trainees within two training years of gaining CCT
- Various programmes via the NHS EoE leadership academy

This can be further explored on :

[Leadership Hub | East of England \(hee.nhs.uk\)](#)

Academic Medicine

Research and teaching can be done in parallel with a training programme or in a focused academic post. Some trainees opt to take an out of program opportunity to undertake research.

Opportunities range from short courses to increase knowledge about research and academia to longer term full time posts. They can be explored on the academic hub of the EoE website:

[Academic Hub | East of England \(hee.nhs.uk\)](#)

Fellowship opportunities

There are a number of fellowships available across EoE. These are part time positions that can complement your training as well as developing vital skills in an area of interest to you. They usually will run for one training year alongside your clinical post. The EoE website details all areas in which they are offered.

Teaching opportunities

Teaching is an integral part of being a clinician. Depending on your interest EoE is happy to support you to develop your skills and gain qualifications as a medical teacher. Again opportunities range from short courses to improve skill to longer formal postgraduate qualifications. There is a dedicated page on the EoE website:

[Teaching Hub | East of England \(hee.nhs.uk\)](https://hee.nhs.uk/teaching-hub)

Mentoring

Mentoring is recognised for the vital role it can help in developing a trainee to achieve their full potential. Depending on your personal circumstances you may find that you would like to benefit from a coach or mentor. You may even feel that you would like to get involved in mentoring others. Both opportunities are available across a range of specialities. The schemes are detailed on the Mentoring hub:

[Mentoring | East of England \(hee.nhs.uk\)](https://hee.nhs.uk/mentoring)

Support and Contacts

What you can expect from your trust:

Your trust should contact you with paperwork to be completed before you join the trust. A local induction programme will be arranged to familiarize you with the local IT systems and processes at your place of work.

There will also be a period of shadowing for you to get some practical experience of the day-to-day job before you are practicing independently.

You will have support from a clinical supervisor and sometimes an educational supervisor depending on your post.

Sources of support:

There are various organisations offering support on a regional level:

professional wellbeing service

their details can be found at:

[East of England Professional Support and Well-Being Service | East of England \(hee.nhs.uk\)](https://hee.nhs.uk/professional-support)

With specific IMG support at:

[International Medical Graduate Doctor Workshops | East of England \(hee.nhs.uk\)](https://hee.nhs.uk/international-medical-graduate-doctor-workshops)

Access to an e-portfolio. If no access to a specialty portfolio is appropriate for your post, then HEE provide free access to HORUS, a free eportfolio that can be accessed via:

[Sign In - Horus ePortfolio \(hee.nhs.uk\)](https://hee.nhs.uk)

There will be local teaching and training as well as access to a library via your trust's postgraduate or education centre.

SuppoRTT

This is a national programme designed to support doctors to safely and confidently return to training following a period of absence. It is also recognised that many of the principles also apply to IMGs and the digital learning resources cover valuable aspects of NHS care and practice.

[SuppoRTT | Health Education England \(hee.nhs.uk\)](https://hee.nhs.uk)

You may also qualify for the HEE CaReForMe programme:

[Career Refresh for Medicine | Health Education England \(hee.nhs.uk\)](https://hee.nhs.uk)