

Trainee Matters

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Medical training initiative (MTI): stepping outside the box

Medical training initiative (MTI) scheme in the UK are becoming increasingly available and are actively supported by ENT UK. Despite this, knowledge of them is limited and there can be a mismatch between supervisors and potential candidates. Our authors, **Manuela Cresswell**, the Association of Otolaryngologists in Training (AOT) MTI mentor, and **Eishaan Bhargava**, a current MTI trainee, explain the process and give some top tips from personal experience.

History and process

– *Manuela Cresswell*

The Department of Health established MTI in 2009 and it is overseen by the Academy of Medical Royal Colleges (AoMRC). The overall purpose of the scheme is to provide training for overseas doctors in order to contribute to global healthcare in developing countries.

There are currently seven MTI trainees working in ENT posts across the UK.

The benefits of the scheme:

1. Doctors from developing countries can gain hands-on experience working in the NHS for up to 24 months.
2. Supervision and training is set up at the same level of UK training registrars.
3. Excellent opportunities to network and develop professional portfolio by using study leave (30 days per year).
4. NHS trusts that employ MTI trainees can fill existing Locum Appointment for Training (LAT) or standard training posts.

Doctors that want to take part of the MTI scheme for ENT have to go through the following process:

1. Application for MTI scheme via ENT UK website.
2. Obtain General Medical Council (GMC) licence. MTI trainees do not have to take Professional and Linguistic Assessment Board (PLAB) exams but do need to demonstrate they have sufficient English language skills.
3. Application for Tier 5 visa.
4. Allocation of trainee in available post by ENT UK.

For more information, see the resources section.

The personal perspective

– *Eishaan Bhargava*

My MTI journey can be traced back four years to a chance encounter at an Indian wedding, with an educational supervisor from a UK

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hospital. This led to a passing discussion about an opportunity to train alongside UK trainees for two years. Being one conversation in a thousand that day (if you think I’m exaggerating, try stepping into the shoes of an Indian groom!), it made its way to a remote corner of my mind alongside numerous nuggets of information, the significance of which was unknown then! At that time, I was in my second year of training at one of the largest tertiary referral hospitals in North India, living in my little rose-tinted bubble of 90-hour weeks filled with overflowing clinics and infinite surgical opportunities.

Fast-forward three years and a post-graduate degree: working as a senior registrar, supervising wide-eyed trainees and continuing to explore my own surgical horizons, I had this unshakeable feeling that I needed to do something to take a step outside the rat race. Serendipitously, that little conversational nugget from eons past echoed across my auditory cortex, and I thought to myself, what do I have to lose? I established contact and, after hours of research and fruitful discussion, got the ball of red tape rolling. When I gave notice at work, I was inundated with ‘urgent’ concerns from colleagues, the gist of which could be summarised as ‘have you gone off your rocker?’ I had a (long) moment of indecision: in India I was abandoning a much-coveted post, at one of the premier institutions in the country, with a consultant position looming on the horizon three years away, to pursue a ‘hunch’; was it really worth it? Looking back today, I can’t thank my stars enough for my ‘carpe diem’ spur-of-the-moment-ish decision!

The MTI process, does however, take time (allow for four-to-six months for everything to fall in place). My departmental and ENT UK liaisons ensured that it progressed

smoothly. It’s the practical aspects of setting up base in the UK that official forums can only scratch the surface of. My preparation began when my supervisor urged me to combine my interview with a visit to the department for a clinical attachment, and I cannot thank him enough for that advice! Coming from a strongly hierarchical system where the primary emphasis was on deference to seniority, you can imagine how I must have felt experiencing the NHS work culture first-hand – like Jar Jar Binks in the midst of a Jedi council meeting!

That period of observation was this young Padawan’s first step towards becoming ‘one with the force’ (social and professional integration into life in the UK). It allowed me to get acquainted with practical aspects of working as part of a team beyond the actual practice of ENT – the structure of interaction with colleagues, socially and professionally acceptable norms, expectations from people in different clinical and managerial roles – the list is endless! Apart from an overview of the system, it also gave me an insight into the workings of a department where I would be spending most of my time. Finally, it gave me the chance to scout rental properties, an exercise I would highly recommend be done in person.



When the world came to a stand-still on great day-long blizzard of ‘17, Peterborough, UK.



Nothing says teamwork like dim sums and Thai curry! ENT department dinner, Peterborough, UK.



“What exactly do you do?” “Oh, I travel... sort of like a licensed troubleshooter.” - Thunderball, 1965. Suiting up for IFOS World ENT Congress 2017, Paris, with Billy Wong, partner in crime.

Figure 1.

PRIOR TO MOVE

Place to stay

Plan to arrive one week early

Sufficient funds for first month (groceries, rent, bills, rental deposit, home insurance, furnishing costs, account opening deposit, travel costs)

IMMEDIATELY AFTER MOVE

Resident permit collection

Open bank account (letter from employer required)

Apply for a National Insurance number

After a long day spent listening to lectures and panel discussions, there's no better way to unwind than to watch the world go by as you sit opposite one of the western world's most famous culture icons - 'La vie est belle!' Paris, France.



Aimlessly roaming the cobble-stoned streets of Firenze, I came across this gem of a stall at the local Sunday market. Those 15-odd minutes spent conversing with the jolly Italian shopkeeper about the finer points of photography through the ages through sign language were absolutely priceless! Florence, Italy.

Voyeurism 101: Beauty lies in the eye of the beholder. London, UK.



After trudging through countless blogs and forums, I came up with a few very basic 'check boxes' (see Figure 1), and this helped me immensely to organise my initial moving process.

The past year for me in the UK has changed my life both professionally and personally. The camaraderie I have developed with my supervisors and co-registrars goes way beyond a working relationship, with us benefiting from each other's life experiences. Right from the start, I was encouraged to take full advantage of the allocated study and annual leave - an idea quite foreign to someone coming from a work culture where taking a leave of absence, for whatever reason, is frowned upon by most colleagues.

Armed with 30 days and a host of opportunities (both within and out with the UK), what can be achieved is limited only by your imagination! The last work year for me has been all about balancing my training and service commitments with professional development, in the form of regional study days, CME events, courses, an observership, regional as well as international conference presentations, and even an international award - a life-changing event that I could only have dreamt of!

Being a nomad at heart, living in the UK has also provided geographic ease and cost-effective access to explore the European continent and indulge my passion for photography.

I have developed a truly unique

perspective in life, drawing from the best of both worlds that I have experienced thus far, and I have great expectations for the coming year.

In summary, the MTI presents a wonderful opportunity for trainees outside the UK to broaden one's horizons, and step outside the confines of the box that traditional education and training can sometimes trap one in. After all, a bird born in a cage knows not the wild world till that first flight beyond those bars.

Our authors are keen to improve the matching process between candidates and supervisors and recommend the resources below. Please contact them via email if further help or information beyond this is required. They will be presenting a session on MTI at BACO in July 2018. Please come along!

Resources:

1. www.rcpsych.ac.uk/pdf/MTI_Guide_2017.pdf
2. www.aomrc.org.uk/medical-training-initiative
3. www.gov.uk/tier-5-government-authorised-exchange
4. www.entuk.org/medical-training-initiative
5. www.e-lfh.org.uk/programmes/induction-for-international-doctors

FINAL WORD

Do you have a similar initiative in your centre? Please contact the section editor if you are keen to share your experiences.

AUTHORS



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