



# PREPARING FOR LIFE AS A SOUTH WEST TRAINEE

HEE South West

Bijal O’Gara & Kimberley Silochan

# Preparing for life as a South West Trainee

---

## *Foreword*

Welcome to the South West!

Health Education England South West (HEE SW) would like to extend a warm welcome to all trainees joining this region.

At HEE SW, we recognise that the transition to working and living in a new area, or even a new country can be a difficult one. In the hope of easing this change, we have created this resource pack to provide the relevant information required by registered doctors coming to train in the South West.

‘Preparing for life as South West trainee’ should provide you with the information and resources you might need to help you at the start of your journey through training, here in the wonderful South West.

We realise there is lots of information that would be useful for any trainee new to training or new to the South West, so whatever your situation we hope you’ll find useful information in here to help you prepare for life as a South West trainee.

Wishing you well on your training journey!

Bijal O’Gara  
HEE DA Fellow  
ST6 Anaesthetics Registrar

Kimberly Silochan  
International Medical Graduate  
ACCS CT 2 trainee

# Contents

---

INTRODUCTION	1
LIVING IN THE SOUTH WEST	3
WORKING IN THE SOUTH WEST	4
NHS PENINSULA TRUSTS	5
ACCOMMODATION AND RENTING	6
BIOMETRIC RESIDENTIAL PERMIT	7
OPENING A BANK ACCOUNT	8
SHOPPING	9
INTERNATIONAL GROCERIES IN THE SOUTH WEST	10
TRANSPORTATION	11
CULTURE, CUSTOM & COMMUNITY	12
LOCAL CULTURE	13
COMMON LOCAL PHRASES	14
FOOD & DRINK	15
QUEUING	16
BEFORE STARTING YOUR POST	17
ONLINE LEARNING RESOURCES	18
DURING YOUR POST	19
EDUCATION AND SUPPORT	20
YOUR CLINICAL SUPERVISOR	21
YOUR EDUCATIONAL SUPERVISOR	22
CAREER PLANNING	23
APPLYING FOR TRAINING POSTS	24
REFERENCES	25

---

# LIVING IN THE SOUTH WEST

---

The South West is the largest of all regions in England. It has a delightful off the beaten track feel. The region offers an enchanting mix of sandy beaches and surf ready waves in coastal regions such as Torquay and Cornwall to vibrant metropolitan cities such as Bristol, Plymouth and Exeter. There truly is something for everyone here. It is no wonder why the region is such a popular destination for tourists. The area is becoming more diverse and offers a wide variety of food, and outdoor activities. Living in the South West gives you the perfect chance to try something new and exciting from paddleboarding to glamping, the options are endless. Not much of an outdoors person? No problem there are tons of exciting hobbies for you to pick up as well. Additionally, the South West is relatively well connected to the rest of the country and continental Europe having airports in Exeter, Bristol and Cornwall as well as rail and national bus services. This makes it easy for a long weekend trip abroad. Why not try a day trip to the Isles of Scilly or beautiful St. Ives. Whatever you decide on we do hope you enjoy your time here and embrace as much of what the region has to offer.

## DID YOU KNOW?

- Devon's coast enjoys more hours of sunshine than anywhere else on the British mainland, inspiring the nickname the 'English Riviera'.
- The South West is famous for its Devon cream tea, Cornish pasties and cider!
- The county has two large national parks – Dartmoor and Exmoor which you can explore by foot, horseback or even by llama.



# WORKING IN THE SOUTH WEST

---

The South West Peninsula covers a vast region spanning over 10,000 km<sup>2</sup>. As such there are numerous local NHS service providers in the region as well various Higher education institutes. All of which can provide various opportunities for career progression and training. The training programmes offered by the local Peninsula Deanery have been generally highly rated in recent General Medical Council satisfaction surveys completed by staff. If it's your first post in the region or you are thinking of settling down it's highly likely you may work in one of the following NHS hospitals.

## NHS Trusts





Musgrove Park Hospital (Taunton)



Derriford Hospital (Plymouth)



Torbay and South Devon Hospital (Torquay)



North Devon District Hospital (Barnstaple)



Royal Cornwall Hospital (Truro)



Royal Devon and Exeter Hospital (Exeter)

# ACCOMODATION AND RENTING

---

Finding suitable accommodation may at times prove to be challenging. However, many doctors choose to initially live-in hospital accommodation until they settle down and can find somewhere more long-term to call home. It is useful to get in contact with your hospital's accommodation manager or Human resource department about any vacancies. There is also the option of living off site. You may also be able to find a suitable rental and arrange viewing through real estate agents.

There are also numerous websites where you can search for your perfect rental. The most popular sites include:

- Rightmove
- Zoopla
- On the market
- Spare Room
- Open Rent
- RoomGo
- Gumtree
- Nestoria

The following link provides a comprehensive overview of renting in the UK. It would be useful to read through the information provided on the link below before agreeing to let a home.

<https://www.gov.uk/government/publications/how-to-rent/how-to-rent-the-checklist-for-renting-in-england>

# BIOMETRIC RESIDENCE PERMIT

---

Your biometric residence permit (BRP) can be used to confirm your:

- identity
- right to study or work in the UK
- right to any public services or benefits you're entitled to

You'll usually get a BRP if you:

- apply to come to the UK for longer than 6 months
- extend your visa to longer than 6 months
- apply to settle in the UK
- transfer your visa to a new passport
- apply for certain Home Office travel documents

How you get your biometric residence permit (BRP) depends on where you made your visa or immigration application.

## **If you applied from inside the UK**

Your BRP will be sent to you by courier, usually within 10 days.

## **If you applied from outside the UK**

Collecting your BRP should be one of the first things you do once in the UK. You must usually do this before the vignette sticker in your travel document expires or within 10 days of arriving in the UK, whichever is later.

Your decision letter will tell you to collect your BRP from either:

- a named Post Office branch
- your sponsor, if you chose this option when you applied

## **What you'll need**

Bring your passport or travel document with your vignette sticker in when you collect your BRP. It is always useful to call the named Post Office branch to check if your BRP has arrived before making the journey.

If you are having difficulties with your BRP visit the [GOV.UK](https://www.gov.uk) website for more information.

# OPENING A BANK ACCOUNT

---

You should also apply for a bank account as soon as possible. This is essential as you will need this to receive your monthly salary. Additionally, there will be the advantage of setting up direct debits (automatic monthly payments for utilities / instalments) for various fees and subscriptions (eg – GMC and Royal College memberships). Here are a few popular banks that international medical graduates often open their first bank account with. You can find more information on their online websites:

- Lloyds
- Barclays
- HSBC
- Santander
- Nationwide Building Society

In order to open your bank account, you will need the following documents



# SHOPPING

---

## GROCERIES

One of the major changes that you will experience when initially settling will be the different foods. There are a number of supermarket chains that you will find across the South West. It is important to also note that other general shops generally close earlier than what you may have been used to, typically around 5pm. Therefore, it is essential to plan and organise your shopping well ahead of time. That being said many stores have online shopping available which allows goods to be delivered to your door at a time convenient for you.



## INTERNATIONAL GROCERIES IN THE SOUTH WEST

If you've had your fill of fish and chips and scones and are really missing some home cooked food. There lots of restaurants specialising in different styles of world cuisine. You can also try some of these international supermarkets where you may be able to find familiar ingredients and food items from home. This list is not exhaustive.

CITY	INTERNATIONAL GROCERY	LOCATION	TYPES OF FOOD
EXETER	Heera International Foods	EX4 6QR	Indian, Chinese, Thai, Korean, Japanese, Philippine, Turkish, African, Middle Eastern and Eastern European
	168 Oriental Supermarket	EX1 2AT	China, Thailand, Philippines, Malaysia, Korea, Japan and Singapore
	Continental Food Stores	EX4 6LD	Indian, Bangladeshi, Chinese, Thai, Filipino, Korean, Malay, Japanese, Iranian, Arabic, Turkish, African, Nigerian and Caribbean.
TORQUAY	Eastern Groceries and Butcher	TQ2 5NF	Polish, Bangladeshi, Thai, Halal food.
	Jaz Pinoy Supermarket	TQ1 3AF	Asian
	Torquay Asian Food Store	TQ3 2RB	Asian
PLYMOUTH	Costless Worldwide Food Store	PL1 1TQ	Asian, Oriental, Kurdish, Turkish, Arabic, Iranian, African, Caribbean, European.
	Maxim Supermarket	PL1 1TQ	Eastern European
	Worldwide Food Store	PL1 1NJ	International
CORNWALL	Big International Grocer and Butcher	TR1 2SF	Middle Eastern, Asian.
	International Mini Mart	TR14 8AF	Polish,Romanian, Lithuanian,Bulgarian

# TRANSPORT

---

The easiest mode of transport in the South West, particularly the more rural areas would be by car. Taxis can sometimes be costly and it is recommended that you start the process of having your own or access to a vehicle. However, there are other modes of transport available in the region.

## Driving

- International Driving Permits are only valid for a year after your arrival in the UK.
- You can apply for a provisional license online, you will also need to book your theory test and driving classes before taking your practical test.
- *Top tip - start the process early, it may take some time.*

## Railway

- The most popular website to purchase and view connections is Trainline.
- Other websites relating to local service providers are:
  - - CrossCountry
  - - Great Western Railway
- *Top tip - If you use the railway regularly it may be cheaper to get season tickets.*

## Bus

- The most common coach service is National Express which operates all over the country and connects to many airports.
- Stagecoach is one of the regional bus companies operating in the area.
- *Top tip - Download the Stagecoach app for real time journey updates.*

## Airports

- International Airports within the region include
  - Bristol Airport (international flights)
  - Exeter International Airport (Canada and Europe)
- Two most popular London airports for international flights include - London Gatwick and Heathrow Airport.

# Culture Custom & Community

---

When at work there will be a dress code that you must familiarise yourself with and comply with. This includes maintaining appropriate standards of appearance, dress and personal hygiene .

Common themes around appropriate dress at work for doctors in training include:

- All clothes must be clean, presentable and consistent with presenting a professional image. Jeans are usually not permitted to be worn in the clinical environment.
- Hair and beards should be neat and clean; long hair should be tied up and off the shoulder securely.
- Staff must not wear jewellery except for a plain wedding ring and ear studs.
- No wrist watches should be worn in the clinical environment.
- Staff must not wear false nails and/or nail varnish as it discourages efficient hand washing and can be a source of contamination.
- Staff must keep fingernails clean and short.
- Visible tattoos where present should not be offensive or provocative to others.
- Staff should not socialise outside the workplace or undertake social activities while wearing an item of clothing that will identify them as NHS employees.
- All clinical staff must wear short sleeves or elbow –length in the workplace to enable effective hand washing techniques- this is referred to as being ‘bare below the elbows’.
- Footwear should be comfortable and practical for the role undertaken. Enclosed shoes (toes covered) must be worn by clinical staff as these offer protection against spillages and injuries.

## Local Culture and sayings

In the South West there are some distinct accents.

**West Country English** is a group of English language varieties and accents used by much of the native population of South West England, the area sometimes popularly known as the West Country.<sup>[1]</sup>

The West Country is often defined as encompassing the counties of Cornwall, Devon, Dorset, Somerset, Wiltshire, the City of Bristol, and Gloucestershire.

Its origins can be traced back to various West-Saxon dialects, which eventually developed into Old English in the Middle Ages. Some academics even think that the accents of various Saxon tribes are still reflected in the slight differences amongst accents in the different towns within the West Country.

Due to its relative isolation, dialects were well preserved into the 19<sup>th</sup> Century, until the growth of the South West's towns and started and other accents are diluting the west country dialect.

We've listed a few West country phrases below. Many of them may not be commonly used nowadays, but older generations in particular may still use many of these.



### West Country accent characteristics

*A slower rhythm to speech, partly caused by the lengthening of vowel sounds (the Cornish are exceptions, they actually speak quite fast).*

*Initial letters in words can often be replaced with closely related letters - hence "s" is pronounced as "z" and "f" may become pronounced "v"*

*"r"s are stressed far more than in Standard English.*

*In various districts there are also distinct grammatical and syntactical differences:*

*"You" becomes "Ye" in Devon dialects*

*Objects are referred to using the male gender rather than a neutral one; put he over there = put it over there.*

*An a may be added to a word to denote past tense; a-went = gone.*

*they may be used in place*

*of them or those; they shoes be mine = those shoes are mine.*

Source: **Wikipedia**

<b>Local word or saying</b>	<b>Meaning</b>
Alright my lover	Hello mate
Gurt Lush / Gurt	Very good / large
Ark at Ee	Listen to him
In any case	anyway
Skew-whiff	crooked
Where be to?	Where are you going?
Chucky pig	Woodlouse
Janner	Person from Devon, particularly Plymouth. Used proudly by Janners, derogatorily by people from Somerset, Dorset, posh Plymouth and the Royal Navy.
Where's that to?	Simply 'Where is it'?
Lush	Nice, wonderful.
That's the badger	That's the exact one / that's exactly what I meant
Dimpsey/ tis getting dimpsey	Gradually getting dark, especially in summer. (Used In Plymouth & Somerset)
Babber	Baby /small child
Yertiz	Here it is
Betwaddled	confused
Keener	Someone who tries hard
Grockles	West country word for tourists
Butty / Mucker	Friend (Devon) / friend (Gloucestershire)
Mind	A word used to emphasise a point. 'Be careful, mind'.
Off-Key	Having a bad day
Grass	Snitch
Scrumpy	Cider
Mint	Really good

This is a useful link for familiarising yourself with the south west accent:  
[British Accents: West Country - Bing video](#)

# FOOD AND DRINK

---

As a result of the diverse and multicultural nature of the UK, the food and drink on offer is varied, with nearly every type of cuisine catered for. This variety can be found alongside traditional UK food and drink.

The evening meal in the UK is typically the main meal of the day and may be referred to as dinner, tea or supper! Other meals eaten during the day include breakfast, which is eaten in the morning and can consist of cereal and or toast; and lunch, eaten around midday and typically consists of a sandwich.

Other terms used for meal times includes brunch; eaten between breakfast and lunch; supper, which may be eaten just before bed. Pudding or dessert eaten after the main meal. However, even within the same region there is inconsistency in the word used to describe a particular meal. Therefore, if in doubt, ask!

When it comes to sitting down and having a meal with others, there are some informal rules to be aware of

- Guests usually wait until everyone at their table has been served before, they begin eating, unless invited by others at the table to start eating.
  - Food is eaten with a knife and fork (with the fork in the left hand and knife in the right hand) or spoon.
  - It is considered polite to keep your mouth closed whilst eating.
  - Conversation is welcome at the dinner table, although it is considered polite not to talk with your mouth full or eat too loudly.
  - It is important to inform the host or waiter/ waitress at the restaurant of any dietary requirements and/or food allergies so that they may accommodate your request.
-

# Queuing

---

The British have a passion for queuing (or standing in a line) and will que everywhere and for everything! It is commonplace to queue when waiting for something, when waiting to be seen by someone, when paying for something and even when waiting to be seated in a restaurant. If someone decides not to wait in line or pushes in front of someone to get ahead in an already established queue, they are described as having ‘jumped the queue’. In the UK, ‘jumping the queue’ is considered rude. It is expected that a person joins the back of a line and waits their turn to be seated or seen.



# BEFORE STARTING YOUR POST

---

## CHECKLIST

- Read this handbook
  
- Obtain your Biometric Residence Permit (BRP)
  
- Open a bank account
  
- Contact the Occupational Health Department within your organisation and schedule an appointment to complete your pre-employment checks. This may include a blood test and providing proof of vaccinations.
  
- Consider applying for additional medical indemnity with organisations such as MDU, MDDUS. Your employer will have a form of indemnity protection
  
- Think about 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.
  
- Relax and go out and enjoy what the South West has to offer.



# ONLINE LEARNING RESOURCES

---

Some useful online learning resources include –

- **e-LfH: e-Learning for Health Website**

We encourage you to complete the following modules:

## Induction for International Doctors

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

## Doctors in Training Induction

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

- **British Medical Journal e-Learning Online Courses for Healthcare Professionals**

This is a useful online resource which will help you to refresh your knowledge and provide essential information to ease your transition into working in the NHS.

- **Royal College websites each have online learning material depending on your speciality.**

Examples include – RCEM e-learning, frca.co.uk, RCPCH online learning.

*Top tip – Create an online profile with these websites and link them to your e-portfolio, in most cases your completed e-learning gets automatically recorded and counts as CPD points*

# DURING YOUR POST

---

## *LEARNING TO REFLECT*

For some including myself this was an entirely new concept. However, reflection is a very important part of becoming the best doctors for our patients. It is an essential aspect in helping us to identify areas we can improve on. Reflection is a purposeful analysis of one's own experiences and behaviours, practice, clinical skills and knowledge, and our interactions with colleagues and patients. Your WPBAs should include reflective analysis and your online portfolio should also include additional reflective entries for each post.

How to reflect in a nutshell.

An example of a reflective process is the Gibbs' Reflective Cycle. It offers a framework for examining experiences. It covers 6 stages:



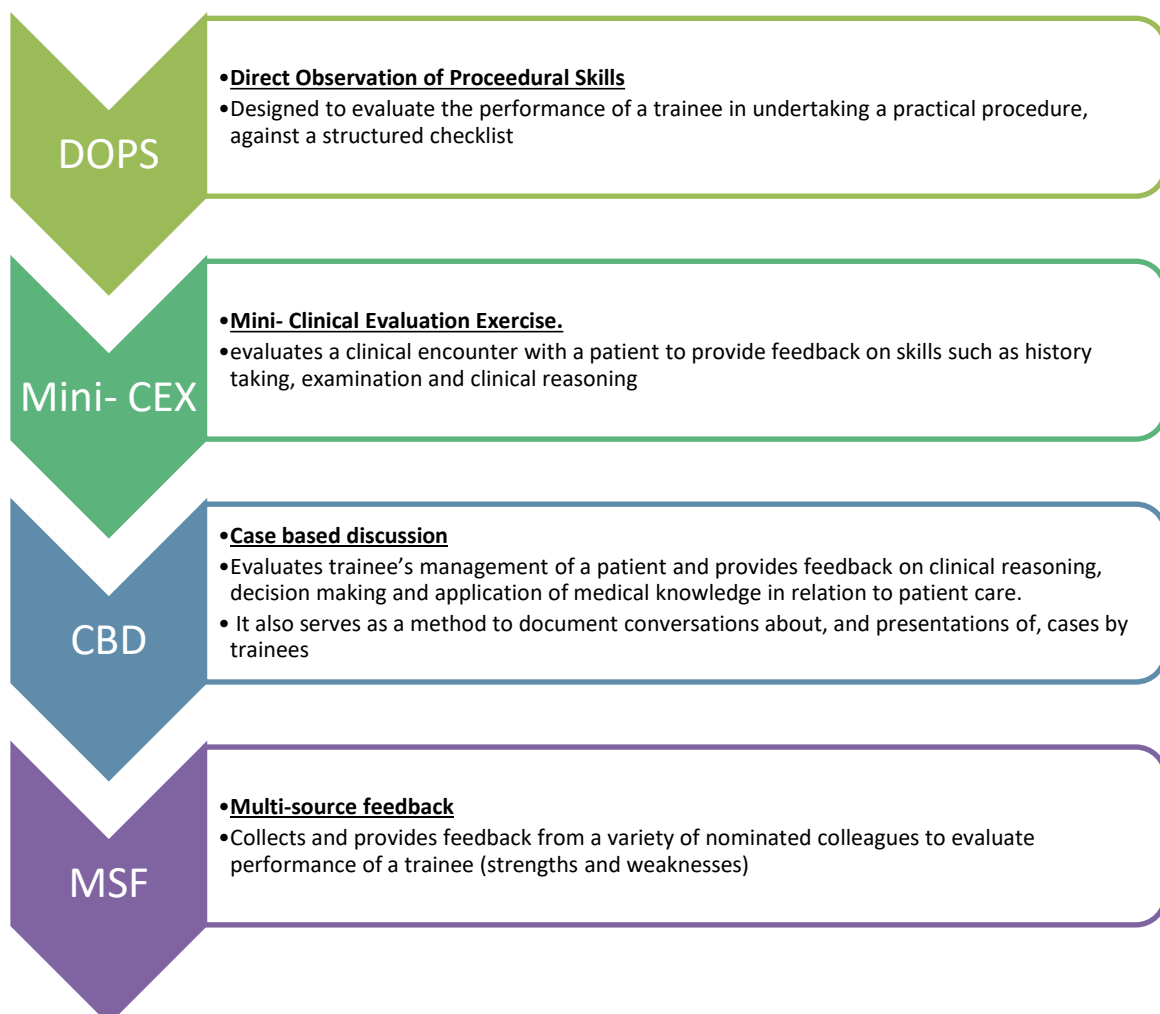
# EDUCATION AND SUPPORT

---

As a doctor working in the UK, you are expected to record and maintain a portfolio of your clinical and educational competences. The system currently in use for Foundation Doctors and SHOs (FY2s) is called the “Horus ePortfolio”, and is available for free even if you are not in a training programme. It is recommended to regularly perform workplace-based assessments (WPBA) and keep an updated portfolio even if you are not in a training post. If you wish to continue working in non-training posts but would like to have access to a speciality training ePortfolio, you may be able to purchase this from the relevant speciality Royal College website. Depending on your individual training needs and speciality, you may also need to use additional websites/apps in order to keep a logbook of cases (eg: surgical or anaesthetic specialities)

Workplace based assessments serve as evidence of your progression and experience. It becomes very important for ARCPS and when applying for training or non-training posts.

Some examples of WPBAs and what they entail are given below.

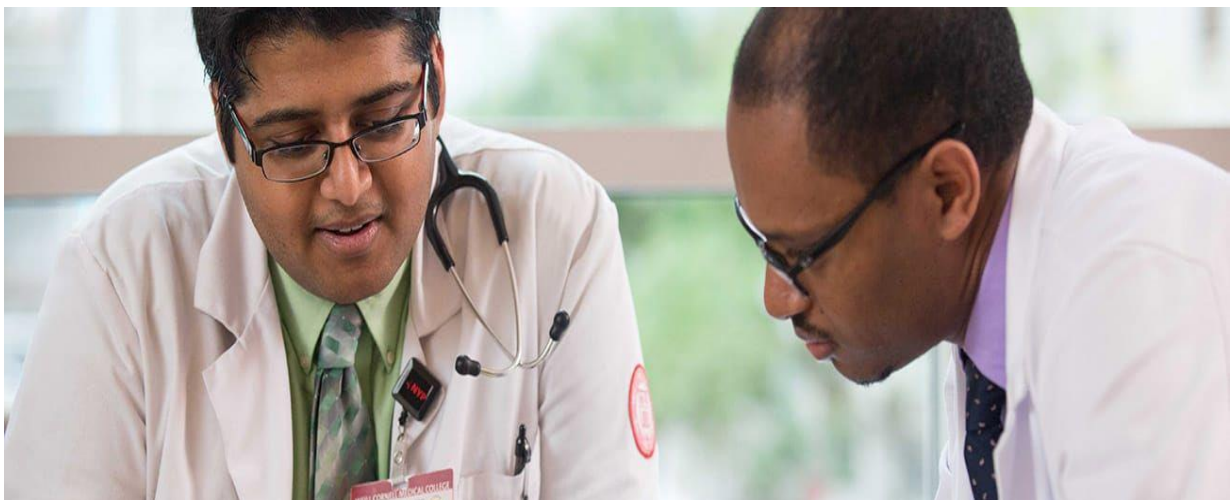


# YOUR CLINICAL SUPERVISOR

---

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. They can serve as a mentor and help with any questions you may have regarding your post. Most importantly, once you have demonstrated the necessary competences (through Workplace Based Assessments), they will be able to sign off your CREST form, or provide evidence to your Educational Supervisor for the same. If you are unsure who your educational or clinical supervisor may be please contact your HR Department. It is important to document each meeting with your supervisor in your ePortfolio.

*Top tip -You should contact your supervisor at the earliest to arrange an initial meeting once in your new post.*



# YOUR EDUCATIONAL SUPERVISOR

---

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

Your educational supervisors' responsibilities include:

- 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.
- Acting as a first port-of-call for any concerns that you may want to raise about your training or workplace

You should be proactive and arrange educational meetings during your post.

- Initial meeting
- Midpoint meeting
- End of placement meeting



# CAREER PLANNING

---

## *ARCPs, REVALIDATION & APPRAISALS.*

On a yearly basis there is an appraisal of your overall performance, where you can provide supporting evidence to demonstrate that you are meeting the principles and values as set out by GMC's Good Medical Practice.

ARCP (Annual Review of Competence Progression) is a similar process for doctors in training. The GMC requires doctors to undergo Revalidation at the end of each 5-year cycle of appraisals/ARCPs to maintain their registration and demonstrate fitness to practice.

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

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

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

### **For doctors not in training:**

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

# Applying for a training post

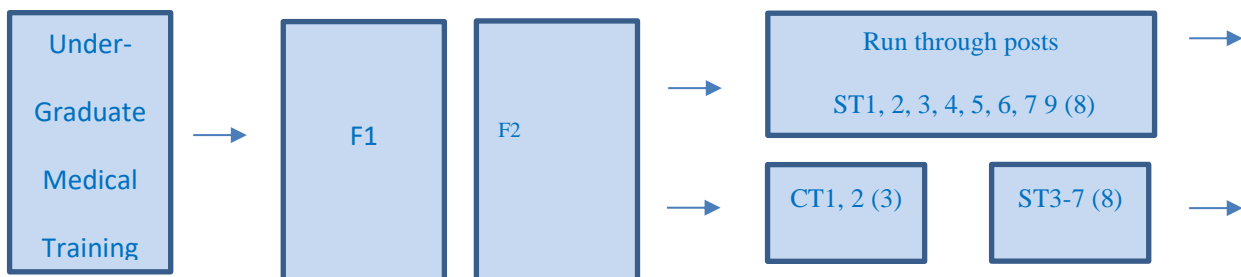
The ultimate goal for most doctors in training is to enter a speciality-training programme and become a consultant in their chosen field.

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

You will need to register an account on this portal and prepare your profile to apply for a training post. The HEE speciality training website has a recruitment timeline available. The application for “round 1” is usually between the first and last weeks in November, therefore you should aim to keep your application ready by the end of October. There are also opportunities to find posts at other times through re-advertisement and “round 2”.

In reality, most IMG’s new to the UK at Foundation or SHO level may not be able to apply for training during their first year in the UK as they may not meet the eligibility criteria as set out in the Person Specification Guidelines for each speciality. Please refer to these documents relating to your area of interest and prepare your portfolio to satisfy these requirements. The diagram below gives a broad overview of medical training and career structure, with entry points for applicants detailed.

Medical Training & Career Structure



Certificate of CCT (or CCST) refers to completion of training and means you are now qualified as a consultant in that speciality with recognition in most countries of the world. Some doctors may choose an alternate or non-training route to become a consultant. This is known as the CESR (Certificate of Equivalence of Specialist Registration) route. There are both advantages and disadvantages in opting for this pathway, and doctors may opt for this based on personal or professional needs. If you would like further information and guidance on this, please discuss this with your educational supervisor.

# References

---

West mindlands handbook for IMG's

London deanery website for DA

Wessex Handbook for IMG's