There are more than 100 training programmes in the UK so it is not possible to list all options. Some programmes like General Practice have thousands of training posts but some rarer specialities will have one or two training posts per year. You need to think what your interest is, what is achievable and what is future job prospectus before you apply. This booklet provides common problems and solutions relevant to you and examples of few training programmes.
Portfolio

- A portfolio is very important for your training record. Include your up to date CV in the portfolio. You need to keep evidence of all things you say in your CV in your portfolio.
- It will be electronic if you are a Deanery trainee. Set aside 30 mins every week for your portfolio. Even if it is electronic use one lever arch file for all your documents.
- It should show commitment to speciality in which you want to apply. Eg audits, work experience, reflections, membership of society, attendance in national meetings etc.
- Always do more than minimum numbers of recorded training activities. Spread it over time rather than all at once.
- If you do not have an electronic record, maintain paper record.
- Place an index in the front of the folder areas of your Portfolio (See below). This should be clearly numbered to match the Portfolio checklist. Use marker tabs so that sections can be found quickly. Complete the Portfolio in such a way that panelists can easily locate evidence relating to the Person Specification.
- Use bullet points to list each item of evidence under each section of the portfolio checklist.
- Include a printed copy of your application form (excluding the sections relating to equal opportunities and references).
- If you use plastic wallets make sure documents can be easily removed and examined by panel members.
- Don’t include any patient identifiable data or items/information that are not yours (e.g. someone else’s work or hospital guidelines).
- Print relevant documents only, not your whole electronic portfolio. Use a Proforma to provide an executive summary of publications, presentations and teaching undertaken.

Example of Portfolio Index Page

<table>
<thead>
<tr>
<th>Title</th>
<th>Description of Evidence in Portfolio. Use bullet points to list each item of evidence</th>
<th>Section/Page Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qualification</td>
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<tr>
<td>CPD Courses</td>
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<td>Exceptional Performance</td>
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<td>Clinical / Procedural Experience</td>
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<tr>
<td>Clinical Audit / Service Improvement</td>
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<tr>
<td>Teaching</td>
<td></td>
<td></td>
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<tr>
<td>Publication &amp; Presentation</td>
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</tbody>
</table>
Foundation Training

The Foundation Programme is a two-year, work-based training programme which bridges the gap between medical school and specialty/general practice training. The four UK health departments determine the number of Foundation Programme places available each year based on workforce planning across the continuum of postgraduate medical education and training. The national application process allocates the highest scoring applicants to all available places depending upon their academic scoring and results of ‘Situational Judgement Test’

If, at the end of the period, there are more eligible FP applicants than places, the ‘n’ top scoring applicants will be allocated their first choice. Any applicants who have not been allocated at this stage will be placed automatically on a reserve list. Applicants on the reserve list will be allocated on pre-determined dates when vacancies arise due to other applicants withdrawing from the process for personal reasons or because they do not pass final examinations. The national application process is complete once all applicants have been allocated to a UoA, or when all available places have been filled.

Non-UK/non-EEA nationals who graduate from a UK medical school wishing to undertake a two-year full-time Foundation Programme (including academic programmes) are eligible to apply for Tier 4 sponsorship. Doctors from non-UK medical schools are not eligible to apply for Tier 4 sponsorship.

Graduates from non-UK medical schools can apply but If you hold, or are eligible to obtain, full GMC registration then you are not eligible to apply for the integrated two-year Foundation Programme. This is the case with most IMG who write PLAB. If you hold, or are eligible to obtain, full GMC registration then you can apply directly for a one-year F2 post. You will need to apply to individual foundation schools which recruit for F2 posts at a local level. You will find it useful to refer to the NHS Jobs website and the medical press. More information may be found by contacting the individual foundation schools. Often they have vacancies for F1 post, which you can and should apply to.
**Locum Appointments for Service (LAS)**

Usually appointed by local hospital

This post is not counted as training

It gives a good experience of the job in the speciality on which you will be working in

You will have a clinical supervisor but may not have an Educational supervisor

There will not be electronic portfolio in LAS. It is very important to maintain a paper record.

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**Non-Training Post (Career Grade Doctor)**

This is always appointed by the hospital

This post is not counted as training. It can be advertised as Trust Grade, Clinical Fellow, Research Fellow, Specialist Doctor etc.

It gives a good experience of the job in the speciality in which you will be working in.

You will have a clinical supervisor but generally do not have an Educational supervisor

There will not be electronic portfolio so it is very important to maintain a paper record. This will be required if you will be applying through CESR route.
Problems faced by International Medical Graduates after starting NHS work

Lack of awareness of ethical and professional standards

Patient’s individual autonomy
Duty of confidentiality
Informed consent to treatment
Probity

Tips: Read GMC Good Medical Practice

Lack of preparation for working in an unfamiliar healthcare system

IT system
Multi-disciplinary working
Protocols

Tips: Be friendly with the Ward Manager. They will teach you everything. Take biscuits, cakes & momos to share with them.

Communication difficulties

Patient
Relatives
Nursing staffs
Secretaries

Tips: Follow a football team or watch Eastenders to start a conversation. Go to pubs or nightclubs with them if they have team outings.
General Practice
Vidya Parajulie (vidyaparajulie@hotmail.com)

General practice has much to offer, providing many opportunities in a range of different settings to develop your skills. Around half of the UK medical graduates becomes GP so there is a big capacity in this speciality. With more GPs needed in the NHS, it’s a perfect time to choose general practice as your career, offering more opportunities than you might think. Getting into the General Practice training posts and finding a job afterwards has never been easier. From this year new initiative have been introduced to the GP recruitment process to give you greater flexibility and will streamline the process to becoming a GP.

Why choose General Practice as a career

A career in general practice offers far more opportunities than you might think, and there’s nothing general about the specialty:

- GPs are central to individuals, families and communities – you are uniquely placed to build relationships and provide continued care for your patients, dealing with all stages of life
- Every day presents different diagnostic challenges. Cases are often medically complex so you will have the opportunity to apply your medical expertise and skills
- GPs have the scope to develop a portfolio career which gives the flexibility to combine leadership, academic or special clinical interests with general practice for example in sexual health, cardiology, dermatology, gynaecology
  - The role of the GP is developing. In the practice you are likely to work with and typically lead a multi-disciplinary team
  - There are many opportunities to continually apply all aspects of medical training and develop special interests

How to prepare to be accepted for the GP training post.

- Plan ahead-From the beginning of the foundation year, start to think about the ST1 application process. Try to gather as much information on line. Application to a GP training post is different compared to a hospital post. Know what criteria will be used to score and assess your application form. Tailor your training to acquire skills and experience which will be useful in GP. Start to develop a portfolio to support your commitment to GP.
- Speak with foundation programme teams, clinical and educational supervisors and ST1 and ST2 GP trainees who have just been through the process for guidance and tips.
- Research what questions may be asked on the online ST1 application and the interview. Practise them. There are lots of on line websites available to guide you through this.
- Make sure that your application is well written and easy to read and use action words to emphasise your strengths.
  - Start filling in your application form in time and get them checked by your clinical and educational supervisors. Submit your application online in good time before deadline.
- Preferably, doing GP rotation during foundation year helps to show your commitment to the specialty. Audit, research and any other activity related to the GP would be helpful.

Useful Websites:

http://gprecruitment.hee.nhs.uk/-You should look at the applicants guide in the section on recruitment process.
http://www.gprecruitment.org.uk.- Useful for Stage 2 of the selection process
Psychiatry

Deoman Gurung (deoman522364@hotmail.com).

What the job involves

- If you are someone with good 'people' skills and would like to develop these further helping a wide variety of people with their problems and concerns, psychiatry offers a challenging and stimulating career.
- Psychiatry offers the opportunity to work closely in a multi-disciplinary team with a variety of other healthcare professionals such as community psychiatric nurses, social workers, psychologists, psychotherapists and occupational therapists.
- You can work in a range of different settings, including hospitals, the community, schools, special units, residential homes and even prisons.
- You could be treating people suffering from numerous mental health problems, for example:
  1. Functional psychiatry: schizophrenia, mania, depression
  2. Learning disabilities
  3. Alcoholism or drug addiction
  4. Eating disorders
  5. Phobias, such as fear of heights or open spaces
  6. Post-traumatic stress disorder, anxiety
  7. Personality disorders

Or helping patients to cope with:

  1. Marital or family problems
  2. Bereavement
  3. Memory impairment
  4. Alzheimer's Disease
  5. The mental health problems of children and teenagers
  6. Criminal proceedings and Court appearances

How to prepare to be accepted for the training post

Psychiatrists need to have strong verbal and written communication, leadership, organisational, problem solving and interpersonal skills. They also must have empathy, patience, and a good bedside manner, as well as knowledge of general human anatomy, especially the brain.

Each medical school offers different lengths of psychiatry attachments and there will be different opportunities available depending on your local services.

Steps involved:

1. It's a good idea to review person specification for ct1 psychiatry trainees (it can be found on the Royal College of Psychiatry website)
2. Arrange a foundation portfolio as mentioned in the person specification for CT1 psychiatry trainees. It really helps to fill the application form for the CT1 psychiatry trainee post.
3. Practise interview questions i.e.
Chances of success in getting training post

Psychiatry is a speciality which is under filled compared to other specialities. It can be evident from the psychiatry competition ratio that chances are between 1-2. That means for 1 training post, some deaneries might have 2 applications per post to no application at all.

However recently due to the stress and pressures in other specialties, many doctors prefer to apply for psychiatry training posts.

Chances of success in getting consultant post

Career prospects are excellent with a good choice of consultant posts on offer. There is an enormous variety within psychiatry.

The six specialties are as follows:

1. Child and adolescent
2. Forensic
3. General adult
4. Old age
5. Psychotherapy
6. Psychiatry of learning disabilities

Psychiatry offers a fast career progression and excellent job opportunities. As a career, psychiatry attracts as many women as men and it can be particularly appealing for those interested in flexible (part-time) work.

There is substantial scope for clinician involvement in management at all levels and academic and research opportunities are good.
Paediatrics

Anil Tuladhar (draniltuladhar@gmail.com):

About the Career and what does the job involve?

Paediatricians are doctors who look at specific health issues, diseases and disorders related to stages of growth and development. This is an area of medicine where the doctor works closely with the patient and their family. Paediatrics is a diverse, stimulating and hugely rewarding specialty. As a paediatrician you could be working in:

- General paediatric units seeing a wide range of conditions affecting children
- Community-based settings managing long-term care of children and young people
- Highly specialised units working in a wide range of sub-specialties such as neonatal medicine

Paediatrics is a broad-based specialty which allows doctors to be generalists and see children and young people with a wide range of illnesses and disease or to become much specialised in certain areas.

Is it the right choice for you? Are you:

- committed to promoting the welfare of children?
- able to be patient, sensitive and empathetic?
- approachable and diplomatic?
- comfortable with an informal and flexible environment?
- good at communicating with a wide range of people?
- someone who thrives in a team situation?
- fun-loving with a good sense of humour?

If yes, Paediatrics is for you.

Pros & Cons

<table>
<thead>
<tr>
<th>Enjoyable</th>
<th>Can be emotionally stressful</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stimulating</td>
<td>Second hand history</td>
</tr>
<tr>
<td>Always something new</td>
<td>High intensity on call throughout career</td>
</tr>
<tr>
<td>Challenging</td>
<td>Child's interest might differ from the parental wishes</td>
</tr>
<tr>
<td>Intellectually rewarding</td>
<td>Child protection can be difficult</td>
</tr>
<tr>
<td>Emotionally satisfying</td>
<td>Excellent relationship with other staff</td>
</tr>
</tbody>
</table>

How to prepare to be accepted for the Training Post

'For entry at ST1, there is no requirement for an applicant to have previous experience in paediatrics. What is more important is that our applicants have a commitment to the welfare of children and a passion for paediatrics.'

- Foundation schools offer taster weeks in paediatrics.
- Find opportunities where possible to be involved with children's clubs or groups with children and young people with disabilities or learning difficulties by volunteering to improve communication skills.
• Paediatricians are friendly and approachable and will be more than happy to answer any of your questions on specialising in paediatrics. Whether they are trainees or consultants ask if you could shadow them or be involved in some work they are completing (eg an audit or piece of research). Each paediatric department will have a Paediatric College Tutor who will be a great source of information.
• Even if you are not working in a paediatrics post, is there a way to incorporate a paediatric aspect into your post (ie if you are working in emergency medicine can you do an audit focusing on a issue relating to child care?)?
• There are a number of RCPCH prizes open for entry from foundation doctors.
• Are there any paediatric courses available to you? For example, Paediatric Life Support course or Safeguarding course? These courses will give you an insight into the specialty and can be used in your application.

What are the chances of success in getting a Training Post?

Popularity of paediatrics varies from deanery to deanery. In the more popular deaneries there are normally three to four applications per post. At the moment, it is 2 applicants per post. The application process takes place through an online form followed by an interview. The applications are submitted in January each year and interviews usually take place in February or March. ST1 jobs start in September and the changeover dates for jobs are the first weeks of September and March each year.

What are the chances of getting a Consultant Post?

Paediatrics has excellent career prospect with plenty of consultant posts available as of now. Availability of the posts may differ with the region and subspecialty. It is still the one of the fewer specialties where patients are treated as a person rather than the organ system.

Rewards

Paediatrics is an incredibly rewarding specialty. Children are amazingly resilient and often recover from life-threatening acute conditions extremely quickly, or deal with their conditions remarkably well.

Summary

Being a paediatrician is a privilege. It is an immensely rewarding job which presents a myriad of opportunities to practice high quality cutting edge medicine in an atmosphere of teamwork and humour. I hope it's the job for you.
Choosing a career pathway to follow during foundation training can often be a challenging and daunting time. Whilst many doctors may have made their career choice during medical school, others may find that they discover their specialty interest during foundation years – as was the case for myself. Whichever group you fall into, there is always time to prepare for the application process and put yourself in a good position for achieving success.

The Application Process
The national application process is co-ordinated by Health Education Kent, Surrey and Sussex and the Royal College of Surgeons and is carried out via Oriel – an online recruitment platform.

The competition ratio for 2015 for Core Surgical Training (CST) was 2.31 applicants per post, which saw a slight increase from previous years (2.2 in 2014, 1.9 in 2013) and making CST within the top ten most competitive specialty to apply to. Doing your research well in advance, simply by reading through the personal specification and keeping a timeline of key dates can instantly put you ahead of the game. This will enable you to ensure you meet the entry criteria for getting through the first stage of application and being long-listed for interview. You will also have a time scale in mind in which you must collate evidence within the portfolio checklist.

The Interview
The portfolio station

The portfolio station is an opportunity to showcase your achievements from medical school to foundation years. The marks given is based both upon the marking sheet – tick box of points set out in the personal specification - as well as question and answers during that station. The examiners will look through your portfolio ten minutes before they call you into the interview room. The portfolio checklist information, available online, gives guidance on what to include and the order in which to place your evidence in.

Tips:
✓ Question and Answer – When asked about your portfolio, use this opportunity to highlight areas within your portfolio that you would like to draw attention to. For example, any questions that focus on desirable qualities for surgical trainees, such as leadership skills, teamwork, dexterity, teaching etc can be linked in with examples within your portfolio. This makes it easier for the examiner to give you marks for these points and ensures they do not miss any evidence.
✓ Organisation and Presentation - The ten minutes that the examiners have to look through is a short time to go through all the points listed in the specification and check through your portfolio for evidence. Making their life easier by having a front contents page, clear section dividers with contents of each of the sections will be to your advantage. Whilst the aesthetics of your portfolio is not the be-all-and-end-all, it is important to give a professional impression, as this sets the scene for the interview station. There is also a mark just for organisation – a point in the bag if you take the time to make your portfolio presentable. I would recommend a sturdy good-quality ringbinder and clear plastic punched pockets to hold your evidence in a way that is easily accessible.
✓ Be selective about what you include, displaying the evidence you are most proud of and keeping in mind the maximum points you can receive in each section. Over filling your portfolio with irrelevant or excessive evidence will make it more difficult for the examiners to find the evidence that will receive points.
✓ Seek opportunity to look at previous applicants’ portfolios.
The Management Station

The management station, also worth 33.3% of the marks, is a test of non-clinical situational judgment of challenges you may face as a junior surgical trainee. You can score highly by giving a well structured answer, as the examiners are looking for logical thinking, underpinned with knowledge of medical ethics and law, GMC Best Practice Guidance, NHS structure, complaints procedure, and continually showing the intention to work within one’s experience and limits.

Tips:
Learn some good go-to structures for answering questions regarding difficult situations, eg:

S  Seek Information  The first step in tackling a problem is to ensure you have all the information available to make an informed decision – how would you go about doing this?
P  Patient Safety  This must be included in your solution to the problem how would you ensure this is considered?
I  Initiative  Is there anything that you could do yourself to help the situation/ What would your role be?
E  Escalate  Show willingness to work within one’s own limitations and involve other colleagues as necessary to achieve the best outcome
S  Support  What can be done to support and develop the team/individual

The Clinical Station

The clinical station consists of a case given to you, followed by a discussion around the case. The questions should test clinical knowledge relevant to a surgical oncall at CT1/CT2 level. A structured approach to answering the question suggests logical thinking and as you are less likely to miss key points this way, this suggests you are practicing safely. Scenarios could include acute surgical cases or cases of the deteriorating surgical patient on the ward.

Tips:
✓ Learn the ATLS principles inside out and be able to relate and relay this fluently and in a timely with regards to surgical cases.
✓ Be able to fluently describe initial investigations and resuscitation principles for the acute surgical patient.
✓ Practice, practice practice!
Radiology

Nawaraj Subedi (nrsbedi@yahoo.com)

What does the job as a radiologist involve?

Clinical Radiology is both a diagnostic and intervention specialty closely linked with almost all of the other departments of a hospital. Diagnostic Radiology utilises a number of state of the art imaging technologies like x-ray, ultrasound, CT, MRI etc. to facilitate diagnosis and further management of a patient’s problem. Interventional radiology, on the other hand, involves direct patient contact where minimally invasive procedures are performed on an elective or emergency basis under imaging guidance. Clinical Radiology has rapidly expanded over last few years, so much so that it is almost impossible to keep up with everything the specialty has to offer. Radiologists these days specialise in a particular subspecialty of their interest like neuro-radiology, vascular radiology etc and usually perform diagnostic and interventional work in their area of expertise. Many clinicians seek support from radiologists in choosing the imaging modality to diagnose clinical problems as well as manage them effectively.

How to prepare to maximise the chances of entry to specialty training in clinical radiology

Clinical Radiology has become a very popular specialty among the medical students and trainees because of numerous advantages including extreme job satisfaction, good work-life balance, variety in workload etc. Getting accepted into the training post has therefore become difficult with a current competition ratio of approximately 3.5. There are certain steps which a trainee can undertake to maximise the chances of entry into the specialty training. Many training programmes now offer FY2 training in clinical radiology which is the best way to explore the speciality better. If not, a short term clinical attachment/ taster session (eg. Two weeks) is also a possibility. Involving in clinical audit, participating in a course and/or clinical research related to radiology also demonstrate an individual’s interest and commitment to the speciality. There are a number of courses designed to train foundation trainees in a particular section of radiology. Attending clinico-radiological, multidisciplinary team meetings is also a good idea, where you can directly interact with radiologists. Useful resources are also available on the Royal College of Radiologists (RCR) and Society of Radiologists in Training (SRT) websites.

What are the chances of getting a consultant post?

The prospect of getting a consultant post as a radiologist in UK is excellent. Clinical Radiology Workforce Census 2014 by RCR stated that there has been only slight (1-2%) increase in the number of radiologists which falls far shorter than 10-12% yearly increases in workload. UK has 7 radiologists per 100,000 people which is worse than any other western European country and European average of 11.7. Whether you are interested in medical education, research activities or becoming an expert on a particular sub-specialty of clinical radiology, there are multiple centres in the UK which can offer you a perfect combination and good work-life balance.
Acute Medicine

Mohan Thapa (mohanthapa@gmail.com)

Different routes after F2:
1. Completion of Foundation training and application to GP training
2. Application to core and higher specialty training
3. ACCS:
   - one year emergency medicine and general internal medicine: acute (usually six months each)
   - one year anaesthesia intensive care (minimum of three months in each)
   - one further year within chosen parent specialty

Guide to speciality training:
1. Successful completion of F2/core training: Good use of e-portfolio
2. Application process: online and interview
3. ARCP: successful ARCP outcome
4. Audit: organiser, completion, presentation (audit cycle)
5. Research: local/index journal
6. Quality improvement projects
7. Publications/Posters
8. Taster week: help to decide which specialty to take
9. Royal College exams: eg MRCP part 1
10. Any post graduate degrees/other relevant undergraduate degrees
11. Teaching: organisation in local/regional teaching
12. Commitment to higher speciality
13. Training and courses

Application process:

Online

Marks allocated to variety of activities:
1. **Audit or quality improvement project:** Organising, completing and presentation of clinical audit (Complete Audit cycle)
2. **Research:** involvement in clinical research
3. **Publication in journal/poster presentation in various forums**
4. **Relevant Royal College exams: MRCP or Any post graduate degrees or courses eg: PG certificate in medical education**
5. **Teaching:** Involvement in clinical teaching: organising local/regional teaching days
   - Teach the trainer/teacher course
6. **Commitment to higher speciality training:**
   - During HST application - this is assessed in application and interview.
   - Any other training or courses: eg: ALS/IMPACT/ALERT
7. **Performance during Interview**