



Royal College  
of Physicians

Global

# Supervision pack: the medical training initiative (MTI)



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## Background

The medical training initiative (MTI) supports international medical graduates (IMGs) who are seeking short-term opportunities to work and train in the NHS (up to 24 months). Each medical royal college, 10 NHS organisations and three separate organisations run the MTI, overseen by the [Academy of Medical Royal Colleges \(AoMRC\)](#). This document specifically references the [RCP MTI](#).

### Quick facts

- > On average, there are 250 doctors in post at any one time on the RCP MTI.
- > Most doctors are employed at ST3 or ST3+ level.
- > MTI doctors most commonly come from Sri Lanka, India, Egypt, Singapore and Pakistan.
- > The RCP MTI is open to doctors in all physician specialties. The five most popular specialties are haematology, internal medicine, cardiology, respiratory medicine and neurology.
- > Doctors joining the MTI have varied objectives including, but not limited to, general NHS experience, subspecialty experience or development of specific procedural skills.

## Securing a post

Doctors joining the MTI most commonly secure their post in the following ways:

1. Through application to a job advertised on the NHS Jobs website.
2. Through an established link between their home organisation/professional contact and an NHS trust.
3. By contacting a trust directly to enquire about available vacancies.

FAQs for prospective applicants to the MTI can be found here: [FAQs for applicants | RCP London](#)



# Experience of doctors on the MTI

To be eligible for the MTI, doctors must have a minimum of 3 years postgraduate experience, including at least 1 year in the specialty in which they intend to train in the UK. They must also hold a primary medical qualification recognised by the GMC and possess a postgraduate qualification in medicine or a medicine subspecialty (eg MRCP part 1).

Doctors employed on the MTI are expected to have the minimum knowledge, skills and competencies equivalent to a UK trainee at IMT level.

English language is assessed either via the OET or IELTS tests, as per the requirements for [GMC registration](#).

## What the RCP can offer

The RCP MTI team strive to support doctors and NHS trusts throughout the entire MTI experience. Areas where the RCP offer support include:

Utilising a dedicated <b>MTI panel</b> – MTI posts are reviewed and quality assured prior to the doctor arriving in the UK.	The RCP MTI team offer a regular <b>online induction</b> to all MTI doctors (scheduled every 2–3 months).	<b>Tailored resources</b> designed for IMGs.
All MTI doctors get free <b>RCP membership for year 1 and a 50% discounted rate</b> for year 2. Benefits to becoming an RCP member include: <ul style="list-style-type: none"><li>&gt; full access to <i>Clinical Medicine</i> and <i>Future Healthcare Journals</i>, with specially curated member email alerts</li><li>&gt; free access all e-learning courses (except PACES masterclass)</li><li>&gt; free access to clinical and CPD material including e-journals, e-books and databases (via an RCP Athens account)</li><li>&gt; access to the RCP library free Wi-Fi, dedicated study spaces and a range of library services</li><li>&gt; free access to RCP Player for webinars and conferences</li><li>&gt; discounts to RCP events and conferences</li><li>&gt; regional and international support networks.</li></ul>		Doctors are issued with a <b>certificate of completion</b> at the end of the MTI post.
		<b>Pastoral support and guidance</b> to doctors and NHS trusts is available throughout the doctor's post.
		<b>Periodic surveys</b> offer a platform to articulate feedback regarding the placement to both the MTI doctor and their UK supervisor.

# MTI post requirements

Each MTI post will differ in content and structure. Posts **must** contain a training element. The training component of an MTI post should be highlighted explicitly during the initial supervisor meeting/job planning discussion.

Please also consider opportunities for learning, such as:

- > departmental teaching
- > specialty training
- > regional teaching and training

- > access to outpatient clinic experience
- > opportunities to take part in quality improvement or research.

Please see Appendix A for the 'MTI checklist' which is given to each doctor upon starting the MTI. While intended to be used as a guide rather than being mandated, we hope this supports doctors/supervisors, particularly during the first few months while the MTI doctor settles into post and their place of work.



# Recommended support from NHS organisations for doctors on the MTI

## Onboarding

- > Consider whether it would be possible to arrange a 'meet and greet' service when the doctor first arrives in the UK.
- > Share information in advance regarding accommodation in the local area. It may be helpful to issue a standard reference letter for the doctor to use when securing rental accommodation.
- > Consider sharing information about the local area, schools/childcare, shops and transport links, as well as any social support networks that might be of interest.
- > Please inform the RCP MTI team of the doctor's start date so that they can access relevant support and events during their MTI post.

## Induction

All MTI doctors must attend a local induction programme.

Consider whether any additional training may benefit the doctor, such as adult life support or simulation sessions to familiarise the doctor with equipment and standard procedures for clinical skills such as venesection, cannulation and catheterisation.

An additional virtual induction will be delivered by the RCP MTI team; this is held every 2–3 months.

We recommend signposting the GMC '[Welcome to UK practice](#)' workshop and reviewing guidance as laid out in '[A guide to induction for IMGs](#)'.

## Supernumerary period

We advise a flexible approach depending on the needs of the individual but would recommend a **minimum 2-week period** where the doctor works in a supernumerary capacity. Any out-of-hours duties should be undertaken in a supernumerary capacity in the first instance, and reviewed closely by supervising consultants, alongside regular discussion with the doctor.

## Supervision

Each doctor must have a named educational supervisor who has undertaken supervision training. If the educational supervisor does not work regularly in a clinical capacity with the doctor, it is recommended that the doctor also has a named clinical supervisor. Supervisors must ensure suitable supervision in their absence. It is recommended that supervisors have 0.25PAs in their job plan per week per MTI doctor.

We recommend meeting the doctor at least every 2–3 weeks in the first few months as they settle into post. Early investment in close supervision and support will give the best chance of the doctor settling into their clinical environment and establishing confidence in their role within your team.

## ePortfolio

Doctors on the MTI get free access to the JRCPTB ePortfolio for the duration of their post. While there are no mandated requirements for MTI, regular engagement in the form of meetings, reflections and workplace-based assessments are recommended. **We suggest completion of one multi-source feedback, eight SLEs and four reflections per year.** Some doctors may prefer to use their own ePortfolio equivalent, if available. Please support the use of ePortfolio as this is likely to be a new concept to many doctors on the MTI.

**As a minimum, it is expected that each doctor completes an induction appraisal, mid-point review and an end of attachment appraisal,** and that these are logged on ePortfolio or equivalent. Where possible, please arrange the induction appraisal within the first week of post. As part of the induction appraisal objectives, a personal development plan should be set and reviewed throughout the course of the MTI post.

## Pastoral support

Adjusting and integrating to life in the UK and work in the NHS is likely to be both exciting and challenging.

Please signpost to relevant wellbeing and occupational health resources within the trust that the doctor may wish to access.

Consider any networks or peer support mechanisms within your trust that may be helpful for a doctor new to the NHS.

While English language is assessed as part of acquisition of GMC registration, colloquial English and acronyms may take some time to get used to. Consider whether any additional communication skills training may benefit the doctor, such as breaking bad news, angry patients or human factors training.

## Support with exams

Many doctors on the MTI use the opportunity to study for postgraduate examinations such as MRCP PACES. Please explore this with the doctor and signpost to any local teaching or training.

## Appraisal

Every MTI doctor should have an annual appraisal that is logged on the ePortfolio or equivalent.

## Annual and study leave

During your induction appraisal meeting, please familiarise the MTI doctor with how to book annual and study leave, as well as how to access available study budget.

## Special considerations

There may be some areas specific to NHS practice that are brand new to the doctor and may require support and/or focused training. These may include:

- > prescribing
- > death certification
- > NHS ethics (including consent)
- > advanced life support
- > palliative care
- > communication training.



# Appendix A

This checklist can be used as a framework to ensure you are covering the basic requirements of the MTI. It is not mandatory, but we recommend its use as a personal guide.

Item	Completed (tick)	Date (MM/YY)	Comments
<b>Before/upon UK arrival</b>			
Read RCP relocation and welcome guide			<a href="#">RCP relocation guide</a> and <a href="#">MTI welcome guide</a>
Complete GMC 'Welcome to UK practice'			<a href="#">Welcome to UK practice – GMC (gmc-uk.org)</a> Registration requires your GMC number.
Inform RCP of work start date			Essential task
Register with a GP			<a href="#">How to register with a GP surgery – NHS (www.nhs.uk)</a>
Consider organising professional indemnity cover			<a href="#">NHS medical indemnity (bma.org.uk)</a>
Collect British residence permit (BRP) and confirm national insurance number			
<b>During MTI post</b>			
Attend MTI induction			Invitation sent via email from RCP
Attend your hospital induction			Invitation from your NHS organisation (usually the HR/onboarding team)
Sign up to JRCPTB ePortfolio			<a href="#">NHS ePortfolios</a>
Create your personal development plan (PDP)			Form found on ePortfolio
Complete 'Induction appraisal form' with your supervisor (ideally in your first 2 weeks)			Form found on ePortfolio
Complete 'Mid-point review' supervision meeting with your supervisor			Form found on ePortfolio
Complete 'End of attachment appraisal' with your supervisor (ideally 4 weeks before your end date)			Form found on ePortfolio
Complete your annual appraisal form with your educational supervisor			
Complete the RCP end of post survey			Email sent from the RCP
<b>After MTI post</b>			
Contact RCP to inform them of your UK work end date			
Contact RCP to request completion certificate			



# Guidance document: where there are concerns regarding performance of a doctor on the medical training initiative (MTI)

Doctors on the MTI do not have a dedicated curriculum or training requirements. This is because doctors join the MTI for various reasons and have varied postgraduate experience. In many instances, local resolution of issues can be achieved quickly and informally. Here are some suggestions that may be helpful:

- > Meet with the doctor and share your concerns, suggest a development plan with clear objectives (SMART) and a schedule for subsequent meetings. Keep a written record.
- > Utilise workplace-based assessments to help evidence development.
- > Consider the use of multi-source feedback.
- > Consider whether a change in working pattern, role or environment may support the development of the doctor.
- > Consider whether any additional training may help to support the doctor.
- > Consider personal circumstances that may be affecting performance.
- > Consider wellbeing support or a referral to Occupational Health, where appropriate.
- > Utilise your local supporting performance policy and involve HR personnel, where appropriate, for guidance and support.
- > For cases relating to attendance, utilise your supporting positive attendance policy. Please also consider work absence in the context of visa regulations.
- > For cases involving staff from a BAME background, consider involving a cultural ambassador to provide independent and objective support.
- > Please inform the RCP for additional support and guidance, where appropriate.

# Guidance document for HR/medical workforce: doctors joining your NHS organisation on the medical training initiative (MTI)

## Recruitment

- > Within medicine specialties, consider whether your vacancies might be suitable for MTI. If so, make it clear on any NHS jobs advertisement that you would consider applicants via the MTI.
- > While many jobs require a doctor to have GMC registration (listed as essential criteria), some doctors on the MTI will obtain GMC registration via the RCP should they be successful at interview. Please consider your shortlisting processes to avoid exclusion of prospective doctors on the MTI.

## Onboarding

- > Consider whether it would be possible to arrange a 'meet and greet' service when the doctor first arrives in the UK.
- > Share information in advance regarding accommodation in the local area. It may be helpful to issue a standard reference letter for the doctor to use when securing rental accommodation.
- > Consider sharing information about the local area, schools/childcare, shops and transport links, as well as any social support networks that might be of interest.

- > Please inform the relevant Royal College MTI team of the doctor's start date so that they can access relevant support and events during their MTI post.

## Induction

All MTI doctors must attend a local induction programme. Ideally, this should be both a trust and departmental induction and contain elements relevant to international medical graduates (IMGs) new to the NHS.

Consider whether any additional training may benefit the doctor, such as adult life support and resuscitation or simulation sessions to familiarise the doctor with equipment and standard procedures for clinical skills such as venesection, cannulation and catheterisation.

An additional MTI-focused induction will be offered to each MTI doctor, hosted by their associated Royal College.

## Supernumerary period

We would advise a flexible approach but would recommend a minimum 2-week period where the doctor works in a supernumerary capacity. Please ensure that rota planning is organised to reflect this prior to the doctor arriving in the UK.

Any out-of-hours duties should be undertaken in a supernumerary capacity in the first instance and reviewed closely by supervising consultants, alongside regular discussion with the doctor.

## Pastoral support

Adjusting and integrating to life in the UK and work in the NHS is likely to be both exciting and challenging.

Please signpost relevant wellbeing and occupational health resources within the trust that the doctor may wish to access. Consider any networks or peer support mechanisms within your trust that may be helpful for a doctor new to the NHS.

While English language is assessed as part of acquisition of GMC registration, colloquial English and acronyms may take some time to get used to. Consider whether any additional communication skills training may benefit the doctor, such as breaking bad news, angry patients or human factors training.

Thank you for your time and consideration and we hope you have a positive experience working alongside doctors on the MTI. Should you have any queries, suggestions or comments, please do not hesitate to contact us.

**Emma Mitchell**  
Associate global  
director for  
international  
medical graduates

**Sandra Syme**  
Global project  
manager



# Royal College of Physicians

11 St Andrews Place  
Regent's Park  
London NW1 4LE

The Spine  
2 Paddington Village  
Liverpool L7 3FA

[www.rcp.ac.uk](http://www.rcp.ac.uk)

[mti@rcp.ac.uk](mailto:mti@rcp.ac.uk)

[global@rcp.ac.uk](mailto:global@rcp.ac.uk)



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