Medical Training Initiative scheme and coronavirus

Academy of Medical Royal Colleges, HEE and NHS Employers Statement

In response to the Coronavirus pandemic it has been agreed NOT to suspend recruitment to the Medical Training Initiative (MTI) scheme at the current time. However:

**Entry to the UK**

The entry of doctors to the UK should be subject to the same Government rules and advice as anyone else i.e. if entry or travel from a particular country is restricted that applies to MTI applicants and similarly if there are not restrictions they can come to the UK.

**Certificates of Sponsorship**

UK Visas and Immigration (UKVI) have stated that, due to the current difficulties with travel for those doctors who have obtained their visas but are unable to travel due to restrictions, no new Certificates of Sponsorship (CoS) will be required. Under these exceptional circumstances they will consider the current CoS to be valid beyond its expiration date. Each case will be handled individually by UKVI and affected individuals should contact the NHS team inbox [UKVINHSTeam@homeoffice.gov.uk](mailto:UKVINHSTeam@homeoffice.gov.uk) with details of their situation, role and employer to get advice on the best course of action depending upon their particular circumstances.

**Visas**

On 31 March 2020 the [Home Office announced](https://www.gov.uk/government/speeches/continued-immigration-support-for-nhs-workers) that all doctors, nurses and paramedics with visas due to expire before 1 October 2020 will have them automatically extended for one year. This extension to NHS visas will be automatic, there will be no fee attached and it will be exempt from the Immigration Health Surcharge. The UKVI will be writing to all institutions that employ NHS workers from overseas and asking them to provide the details of those whose leave will expire prior to 1st October 2020. For those whose visas expire shortly after 1 October 2020, UKVI have stated that the situation will remain under constant review dependent upon how the situation develops.

The visa extensions will be granted on identical leave conditions as the original conditions that are about to expire for each worker. Should an applicant wish to change route or job role, a new application would be required.

The UKVI state that they are working to identify processes for processing applications under the current reduced service being operated.

We have also received assurance that the visa extensions will not affect the annual CoS allocation and will be considered an addition to the annual CoS allocation of each sponsor.

**Support for MTI doctors in the workplace**

**Induction**

It is always important that any new MTI doctor is supported and receives proper induction when they start work in the UK. With the pressure that the service and clinicians will now be under, that will be potentially harder in the coming period. However, it remains essential both for patient
safety and for the sake of the individual doctor that there is still a proper and adequate induction.

This induction should specifically cover arrangements in relation to managing COVID-19 and the doctor’s personal safety. It is essential that MTI doctors are made fully aware of the latest guidance regarding Person Protective Equipment (PPE) and are given instruction in its use.

If it is not already usual practice, it is suggested that all employers designate a willing senior clinician to act as a ‘Buddy’ for newly arrived MTI doctors. This clinician can support and advise the MTI doctor and, importantly the MTI doctor can raise any concerns they may have about the adequacy of their induction or concerns about safety. Back-up arrangements should be made in case the ‘buddy’ clinician is off sick or self-isolated.

Colleges should also make clear that MTI sponsored doctors can contact them if they have specific concerns which are not being addressed.

Working in areas outside normal expertise

It is recognised that the epidemic may entail doctors working in unfamiliar circumstances or outside their usual areas of practice. The recent letter from the four UK CMOs, GMC and the Academy set out expectations of how the doctors should be supported when working in these circumstances.

This will be particularly important in the case of MTI doctors. We would expect that there is an assessment of readiness and capability of an MTI doctor to undertake any proposed different duties particularly in the early stages of their placement.

If the doctor is going to be working areas that may be different to their usual practice the arrangements set out in the national guidance for the safe redeployment the secondary care medical workforce should be followed.

Training

MTI doctors are, of course, here for training placements. It is important that as far as is possible MTI doctors continue to receive suitable educational and training experience recognising that this may not be as in normal circumstances.

If employers are not able to commit to ensuring the support outlined above, they should probably defer the MTI appointment in discussion with the individual doctor, relevant educational body and sponsoring Royal College.