

A guide to organizing FY2 training in Australia

Introduction

After 6 months of fantastic experiences as a houseman at a London teaching hospital, I was thrust into the new foundation year two (FY2) job application process. While struggling through the application form I decided it was time for a change. The North West Thames Foundation School offered their FY1 trainees the opportunity to train abroad for FY2. They stipulated that the year abroad should be structured in a similar way to UK-based FY2 jobs and include completion of all necessary assessments such as mini-clinical evaluation exercises and directly observed procedural skills.

Applying for jobs

This seemed an invaluable opportunity and I began the process of applying for jobs in Sydney, Australia. Working in Australia seems to be a rite of passage for UK junior doctors and it was not difficult to obtain a suitable position. Two weeks and a midnight telephone interview later Ryde Hospital in Sydney offered me a post comprising 6 months of emergency medicine and three months each of cardiology and intensive care. I eagerly accepted and smugly watched my colleagues struggle with their application forms and those 'describe your best attribute in 75 words' type questions. However, getting the job was the easy part. I did not anticipate how difficult the practicalities of undertaking FY2 abroad would become.

Applying for a temporary Australian working visa

Obtaining provisional registration with a medical board in Australia

UK graduate doctors are allowed to work in Australia for up to 2 years on a temporary working visa, subclass 442 (occupational trainee). The visa application process is lengthy and hospitals advise allowing 3 months; however, for most candidates it takes around 6 months. Your employing hospital will sponsor you for this visa and organize the Australian-based paperwork.

Dr Sarita Vamadeva is a Specialty Trainee Year One (ST1) in Plastic Surgery, Queen Victoria Hospital, East Grinstead RH19 3DZ

The first task is obtaining provisional registration with a State Medical Board and this is only possible in New South Wales once a candidate is sponsored by an Australian medical college.

Obtaining sponsorship from an Australian medical college

The Australian College of General Practitioners is the only college who sponsors doctors with less than 2 years' work experience. They request copies of the following: curriculum vitae, degree certificate, proof of English language proficiency, three employment references, a certificate of good standing from the General Medical Council and a letter from the foundation school stating that the time abroad would be beneficial towards a candidate's training. My A-level certificates were deemed acceptable proof of English language proficiency. The College takes a few months to process the paperwork and once sponsorship is finalized, the Medical Board is informed. The New South Wales Medical Board meets twice weekly to discuss registration matters and usually provides provisional registration within a week of receiving all documents.

Visa medicals

Once provisional registration is obtained the Australian High Commission grant a visa subclass 442 upon completion of a medical. This is supposed to consist of full systemic examination, blood tests (human immunodeficiency virus, hepatitis B and C serology) and chest X-ray. Warning to those who try to complete this at their place of work – many have tried and failed. The High Commission only accepts medical reports from their list of registered medical practitioners and for those in London, most of these seem to practise on Harley Street. The medical costs upwards from £250 and the cheaper places are fully booked months in advance. Medical centres are not licensed to release the medical reports and they are couriered directly to Australia House, at your expense.

Obtaining a visa subclass 422

Once the medical is completed an applicant can send the visa subclass 442 form (downloadable from the High Commission

website) together with his/her passport to Australia House. They aim to process visas within 5–7 working days. The cost of the visa at the time of writing is £80.

The journey down under

The next hurdle was the 24-hour flight to Sydney. I flew via the USA to use the generous 48 kilo baggage allowance Americans are given. This lengthened my journey to an epic 36 hours but I convinced myself that as I was away from home for a year, being able to pack that extra pair of shoes was worth it.

Important jobs to do on arrival

Register with the New South Wales Medical Board

Before commencing work in Sydney full registration with the New South Wales Medical Board must be obtained – the provisional registration granted before arrival in Australia is only for means of obtaining a visa. The Board request originals of all documents that were needed to obtain sponsorship with the Australian College of General Practitioners are presented in person at their offices. The application process tends to vary, some candidates have been given a medical viva before registration was granted. At the time of writing registration with the New South Wales Medical Board costs AUS\$490.

Obtain a tax file number

Apply for a tax file number as soon as possible or 47% of your earnings will be taken by the government as income tax. It can be done online and takes up to 28 days to arrive.

Open a bank account

The common banks in Australia are ANZ, Commonwealth and Westpac. Citibank and HSBC also have branches but are not as widespread. Accounts need to be opened in person at a branch and only a passport and additional piece of photo ID is required. Free banking does not exist in Australia; most banks charge a few dollars a month for keeping an account open and charge for cash withdrawals from any ATM not owned by them. Banks also only guarantee a set number of free Switch card

(known as EFTPOS) withdrawals a month and any over that are charged for. An additional premium can be paid for the privilege of being able to use one's Switch card an unlimited number of times.

Health insurance

Any UK citizen is allowed free emergency medical treatment at public hospitals and GP surgeries upon presentation of a Medicare card. Medicare provide this service and card free of charge once all necessary forms are completed.

Accommodation

The Sydney Morning Herald newspaper provides a rental list of flats (known as units) every Wednesday and Saturday. Units for rent are open by real estate agents to the public most Wednesdays and Saturdays for 15 minutes only, reminding you of the first day of the Christmas sales at the more desirable places. Many units are completely unfurnished with shared laundry facilities, but there is a vast market in rental furniture and kitchen appliances.

Transport

Public transport in Sydney is reliable but not as extensive as in the UK and many temporary residents buy cars. UK driving licences are valid and Australians also drive on the left-hand side of the road. Some insurance providers offer a discount for Australian licence holders and a UK licence can be converted to an Australian one, without repeating a driving test, at a cost of AUS\$40. Auctions are a popular method of buying

cars in New South Wales and government-held auctions provide the extra security of fully tested and guaranteed vehicles. Once a car is purchased it must be registered with the Road and Traffic Authority. Registration costs approximately AUS\$30 plus stamp duty (3% of the cost of the car) and provides automatic third party insurance.

The year at work

I spent the first 6 months of my FY2 in the emergency department at Ryde Hospital. Most emergency departments in Sydney operate a rota of 10-hour shifts with 4 days on and 4 days off. There is no 4-hour time limit or pressure to refer patients to the relevant specialty and consultants expect all patients to be completely worked up before referral. This provides an excellent environment in which to learn how to assess and manage acutely sick medical and surgical patients. As Ryde is a small district general hospital there is a very limited pathology service overnight and no radiology service. I spent my first set of nights terrified but now appreciate the benefits of this setup as a lack of further investigations forces one to enhance history taking and clinical skills.

From the emergency department I moved to a 3-month post in the department of cardiology and the coronary care unit (CCU). After 6 months of bleep-free existence, this post was a challenge as there was rarely a moment when my bleep was silent. I was the only resident medical officer (RMO – equivalent to senior house officer) working for one registrar and five consultant cardiologists. We were on call daily, patient turnover was enormous and I was responsible for covering the wards, CCU and the near daily ward rounds of the five consultants. Luckily for me they conducted their rounds with great efficiency and under their guidance, I gained confidence in the management of acute coronary syndromes, hypertension and arrhythmias. In addition, the experience of being on call daily really honed my time management skills.

I spent the final 3 months of my FY2 working in the intensive care unit (ICU). The rota involved 12-hour shifts with 7 days on and 7 days off. Each morning the ICU consultant would complete a ward round and the individual medical/surgical teams would review their patients. During the day there was no specific registrar cover-

ing the ICU and as the only doctor present, this job was exhausting. It was a crash course in critical care medicine, invasive procedures, communication and team working skills. However, by the end of the post I was learning how to discuss end of life decisions with patients and relatives and was comfortable with inserting arterial and central venous lines and managing patients on vaso-pressors and inotropes. It was a steep learning curve and a truly invaluable experience.

Is Australia for you?

Australia is a magnificent continent; one can go skiing, learn to surf and sail, navigate the rainforests and Great Barrier Reef and hike in the vast national parks. My highlights included sailing in Sydney Harbour under the shadow of the glorious Sydney Opera House and the sunny afternoons spent on Sydney's beautiful eastern beaches. However, working in Australia for 12 months was a huge professional and personal challenge. I had to learn to work in a different health-care system in departments I had no prior experience of while ensuring I completed my foundation competencies. I also had to adapt to life in a new country where I knew no one. I believe challenging myself in this manner benefited me tremendously and I would encourage others to seek similar experiences. I returned to the UK to commence my surgical training with a broadened mind, a new appreciation for life and many fond memories to light up those dark, dreary days of winter. **BJHM**

Conflict of interest: none.

Useful websites

Australian High Commission (www.uk.embassy.gov.au)

Australian Government Department of Immigration and Citizenship (www.immi.gov.au)

New South Wales Health Service (www.health.nsw.gov.au), Northern Sydney Central Coast Health (www.nscchhs.health.nsw.gov.au/), Sydney South West Health (www.sswahs.nsw.gov.au), South Eastern Sydney Health (www.sesiahhs.health.nsw.gov.au), Sydney West Health (www.wsahs.nsw.gov.au)

New South Wales Medical Board (www.nswmb.org.au)

Australian Tax Office (www.ato.gov.au)

Accommodation (www.domain.com.au, www.realestate.com.au)

Tourism (www.australia.com)

KEY POINTS

- The General Medical Council recognizes overseas training during foundation years if the post meets the requirements of the foundation curriculum.
- FY2 is an ideal point in one's career to work abroad before committing to specialty training.
- Preparatory work for organizing FY2 abroad should begin at the start of foundation year one.
- Options should be discussed with the foundation school director in the first instance.
- 'Experience, travel – these are as education in themselves' Euripides (ca. 480–406 BC).