

**The Phoenix Project: Participant Leaflet**



# THE PHOENIX PROJECT

**Registered Charity No: 1191100**

***This leaflet is intended for the use of displaced healthcare professionals who are hoping to qualify to work in the UK. It includes information about The Phoenix Project, and details of how our support may be useful to you.***

### **Contact Details**

Website: <http://thephoenixprojectuk.com>

For general enquiries:

TPP Outreach: [phoenixprojectoutreach@gmail.com](mailto:phoenixprojectoutreach@gmail.com)

For branch specific enquiries:

TPP Leeds: [thephoenixprojectleeds@gmail.com](mailto:thephoenixprojectleeds@gmail.com)

TPP Nottingham: [nottsphoenixproject@gmail.com](mailto:nottsphoenixproject@gmail.com)

TPP Bristol: [thephoenixprojectbristol@gmail.com](mailto:thephoenixprojectbristol@gmail.com)

TPP Birmingham: [thephoenixprojectbirmingham@gmail.com](mailto:thephoenixprojectbirmingham@gmail.com)

### **Our aim:**

To support displaced doctors' qualification to practice in the UK.

### **The story behind The Phoenix Project:**

TPP was set-up in 2019 by medical students at the University of Nottingham as a way to combat the growing staff crisis within the NHS and support marginalised refugee

communities in Nottingham. After a positive response from our first cohort of participants the ambition of the organisation has grown and in order to support more participants we registered as a charity in 2020 and began expansion to other medical schools, including the Universities of Leeds, Bristol and Birmingham. There are 33 medical schools in the UK, with over 40,000 medical students between them. We believe this untapped resource could be of huge benefit to the displaced medical community.

### **What we do:**

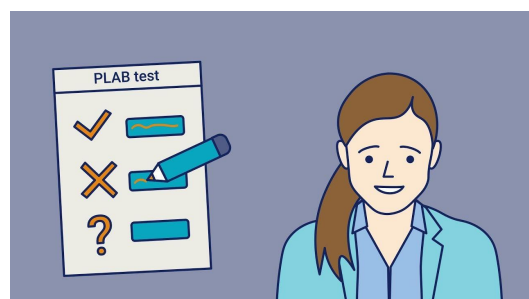
- Provide English Language teaching sessions to help displaced doctors, nurses and midwives prepare for qualification exams
- Help familiarise participants with the NHS and how it operates
- Run group sessions that link our participants to others in their position
- Help participants find work experience in NHS hospitals
- Part-sponsor exam fees, once an assessor has judged that a participant is ready to pass

### **What we don't do:**

- Logistical support in obtaining a visa or right to work
- Pay for other resources, such as laptops or textbooks
- Provide sessions for those taking the IELTS exam
- Offer support to those not currently living in the UK

### **Who we teach:**

Displaced doctors, nurses and midwives who are working towards the Occupational English Test (OET), or the Professional and Linguistic Assessments Board (PLAB) 2.





OCCUPATIONAL ENGLISH TEST *Photo: OET, 2021*

*Photo: GMC, 2021*

### **Our sessions:**

- OET
  - Focus on one of the assessed core skills (writing, listening, speaking, and reading)
  - We use both OET practice tests and resources we have developed in their mould to help participants prepare for the exam
    - *An example of a resource we developed for a speaking session is appended to this leaflet.*
  - Important principles and features of NHS practice are discussed, such as informed consent and the role of the occupational therapist, that may not have equivalents abroad
- PLAB2
  - Sessions run as clinical role plays focusing on exam scenarios
  - Participants have the opportunity to hone their English language skills, discuss the particulars of practising in the NHS and review the medical knowledge required for the exam
- Both types are run exclusively by students on placement and PLAB sessions are only undertaken by final year students with a firm grasp of the core clinical concepts required

### **How COVID-19 has impacted on our work:**

Prior to COVID-19, participants would attend face-to-face sessions. In response to the pandemic, TPP has moved **completely online** until further notice. Our sessions take place on Microsoft Teams, and are either one-to-one or multiple teachers to one participant. This move has been a successful one and we have seen several advantages including individual teaching and the logistical ease of remote learning. In the future, we will adopt a mixed approach of both online and face-to-face teaching.

**How you can get support from The Phoenix Project:**

- Contact us by email.
- We will be in touch and arrange a telephone call with you, to find out how we can best help you.

***Thank you for taking the time to read this leaflet and don't hesitate to get in touch with any questions.***

Example speaking exercise:

## ROLE PLAY GUIDE

### Patient Card

Setting: A&E

Patient information:

You are a 56-year-old complaining about pain in your chest (if asked, point to sternum), which started after you came back from a birthday buffet with your friends. When asked, the pain radiates up behind your sternum, and is exacerbated by lying down and drinking alcohol. Sometimes you feel some liquid come up the back of your throat. No radiation to arm. Pain feels like a burning rushing up your chest, 7 out of 10. Has happened a few times before but has been getting more frequent (at least twice a week for the past month). This time is worse (you think the previous times were angina and have been slowly panicking each time it happens until you decide to go into A&E today thinking it's a heart attack). Have a sore throat after waking up some mornings. No change in appetite, weight loss, or other symptoms

Currently on medication for hypertension (if asked, on Amlodipine). No over the counter medication. NKDA. You are very worried that it is a heart attack, as your father passed away due to a heart attack and your mother has stomach ulcers, so you feel that you've got a lot of health problems. No siblings or children.

You live with your partner in a one-bedroom apartment. Has been warned by the doctor many times to control diet, but still eats a lot of fatty and spicy food. Smokes 10 a day for 20 years. You work as a bank officer and it gets busy at times, so you don't go home until quite late some nights, leading to a late supper. Work is not too stressful. Drinks a glass of wine with dinner most days. Worried that it is a heart attack and wants the best treatment money can offer.

When candidate explains that this is most likely not a heart attack, ask them how they can be so sure

### Candidate Card

Setting: A&E

You are a junior doctor at the A&E working the night shift. This 56-year-old M/F has come complaining of chest pain. They are worried that it is a heart attack. A to E assessment was normal and an ECG showed no abnormalities.

Tasks:

§ Take a history from the patient

§ Explain to the patient:

- They are not having a heart attack, it is acid reflux, most likely GORD but will need further observation
- Investigations/tests the patient may require
- Management - emphasise more on lifestyle changes and conservative measures
- Safety netting - if the patient starts vomiting blood, excessive weight loss, sudden severe pains in abdomen.
- Offer patient leaflet on GORD

GORD - Gastro-oesophageal Reflux Disease

*Last Updated 24/03/2021.*