“Very few doctors will be able to describe their last year’s work as ‘normal.’ Many of us were redeployed from our usual clinical roles to act as a transient workforce where we were most needed. This is what I have learnt from a unique year.

‘Firstly, don’t be afraid to say no. Nobody expects you to be comfortable or familiar with work outside your normal scope of practice. As always in medicine, be safe and be honest, and don’t attempt what you cannot do.

‘Think about your skill set. What can you transfer to your new area of work from your usual role that will allow you to be maximally effective?

‘Don’t be afraid to get stuck in wherever you can—senior consultants have done healthcare assistant and nursing shifts in some trusts. Other sites have used extra hands for family liaison roles or for ensuring that all staff can take breaks and have a decent rest and a drink. Help comes in various guises.

‘Look at your curriculum. Training doesn’t stop just because you’re in a different role. What can you reflect on or be assessed on in your temporary role? Education, teamwork, and soft skills are all universal.

‘Finally, look after yourself. Working somewhere new is going to be stressful. Recognise that, access appropriate support, and take some time to unwind and reflect.”

“Our advice is to stick to the same basic principles of good practice and to follow our guidance which advises doctors to recognise and work within the limits of their competence, to use their judgment in applying principles, to assess risk, and deliver safe care.

“Decisions often need to be made quickly but, if in doubt, doctors should seek advice and supervision from colleagues. If you are faced with working outside your area of practice in an emergency, you should provide the safest care you can.

“We encourage you to take thorough notes about any concerns that could impact on patient safety and to raise your concerns with your line manager. If you are a trainee you should seek advice from a supervisor or senior colleague, especially if asked to undertake any work that may be beyond your capabilities.

“All doctors deployed to a different clinical area must receive appropriate induction and training and be aware of who to contact for advice.

“These are extraordinary times and the additional pressures on resources and changes to normal working arrangements have had a significant impact. Doctors can be assured that if a concern is raised about their practice during the pandemic, the environment in which they were working at the time will always be taken into account.”

“If you’re moved to an unfamiliar clinical area during the pandemic, you should receive an induction, training, and be given an opportunity to familiarise yourself with the new environment.

“To work as safely as possible, engage in additional training to improve your skills and knowledge, such as local or nationally arranged online learning.

“Continue to follow GMC guidance as far as practical, such as recognising and working within the limits of your competence. The GMC acknowledges, however, that these are exceptional circumstances and you may find yourself working in unfamiliar settings and at the limits of your comfort zone, or beyond it.

“In an emergency, provide the safest care you can. You have a duty to raise concerns. If patients are being exposed to avoidable risk, inform a senior colleague or manager, and offer your skills and knowledge to find possible solutions.

“If an incident occurs, it’s understandable to have concerns about the consequences. It may be reassuring to know that the GMC accepts the need to depart from established procedures and guidelines on occasion.

“Above all else, look after your own health and wellbeing. Seek support when you need it from your colleagues, family, and friends and, if necessary, your own GP.”

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