



RACGP

*General practice
management toolkit*

Professional career management

Module

1

General practice management toolkit: Professional career management

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Contents

<i>Acknowledgements</i>	<i>i</i>
<i>Introduction</i>	<i>v</i>
<i>1. Psychology</i>	<i>1</i>
1.1 What motivates you as a GP?	1
1.2 Job competencies	2
1.3 Personality types	4
1.4 Career orientation and career anchors	6
<i>2. Planning your medical career</i>	<i>8</i>
2.1 Assessing your current career position	8
2.2 Career and professional development goals	8
<i>3. Managing your medical career</i>	<i>9</i>
3.1 Career breaks	9
3.2 Re-entering general practice after a break	9
3.3 Career progression – career growth and flexibility	10
3.4 Employment choices and recruitment	12
3.5 Part-time work – a real possibility in general practice	12
3.6 Career mentoring and coaching	13
3.7 Career based support services for GPs	13
3.8 Exploring your medical career options – the practice environment and other GP work environments	14
<i>4. Professional and life stages</i>	<i>16</i>
4.1 Career development stages	16
4.2 Life stages	17
4.3 The ‘learning life’ of a general practitioner	19
<i>5. Managing your health and wellbeing – professionally and personally</i>	<i>20</i>
5.1 Recognising and dealing with stress and maintaining resilience	20
5.2 Achieving a work–life balance	21
5.3 Tips for achieving a satisfying and healthy GP career	22
<i>References</i>	<i>24</i>
<i>Resources</i>	<i>25</i>
<i>Activities</i>	<i>27</i>
Activity 1. Strengths and challenges	27
Activity 2. Career planning	28
Activity 3. Life stages impact statement and personal values inventory	34
Activity 4. Personal values inventory	36
Activity 5. Personal business plan	37

Introduction

Most general practitioners (GPs) recognise that general practice is distinctly different from other medical disciplines. The community in which GPs work, the astounding range and complexity of illnesses (which often start with subtle symptoms), the fascinating life stories entrusted to us, the ability to make a difference in people's lives with thoughtful, and timely diagnosis and advice, all contribute to the rich and appealing fabric of general practice.

While general practice is worthwhile and valued, it can be highly stressful. To be effective and caring GPs, it is essential that our personal lives are rich and fulfilling enough to enable a successful medical journey.

We need to plan and build our careers around our lives to ensure we meet our personal and professional needs.

Importantly, GPs must consider whether they want, at any point in their professional lives, to commit to practice ownership (and its additional responsibilities, risks and possible rewards) or focus on being an employee or contracted GP.

Each option has advantages and disadvantages that, along with personal competencies, shape the success of the professional and personal aspects of your life. Identifying these competencies and preferences can help you fine-tune your management capabilities as a practice owner.

Life is unpredictable, so it is important to learn to be flexible, adaptive and resilient. This module aims to increase your understanding of yourself, as a person and as a health professional, to assist you to work through some of the issues relevant to your professional life.

Learning outcomes

After completing this module, you will be able to:

- understand your personality and your preferred style of practice
- recognise the professional and life stages of a GP
- develop a vision and plan for your personal and professional life.

1. Psychology

As GPs, we use our whole selves as a ‘therapeutic instrument’ to produce beneficial outcomes for our patients. Therefore, it makes sense that to be effective GPs, we must understand ourselves well.

There have been numerous psychological theories put forward to understand what motivates people, for example, Maslow’s hierarchy of needs, Herzberg’s two factor theory and Bandura’s social learning theory. While these models have limitations, they have stimulated consideration of the factors that cause us to act in a particular way and how these differ between individuals.

1.1 What motivates you as a GP?

1.1.1 Theories that have influenced motivational psychology

Maslow’s hierarchy of needs

In 1943, Abraham Maslow proposed that humans have basic (or deficiency) needs that must be satisfied in order to pursue growth needs (self-actualisation) (Figure 1).¹ He later recognised other growth needs such as a need for knowledge, meaning and understanding, a need for aesthetics and the need for transcendence (helping others achieve self-actualisation). While the theory has been criticised for lacking supportive evidence, it has been a popular framework for considering motivation.

Consider your own motivations and whether you need:

- financial security
- to be loved or respected
- to have a deep understanding of the human condition
- to help others in order to feel worthwhile.

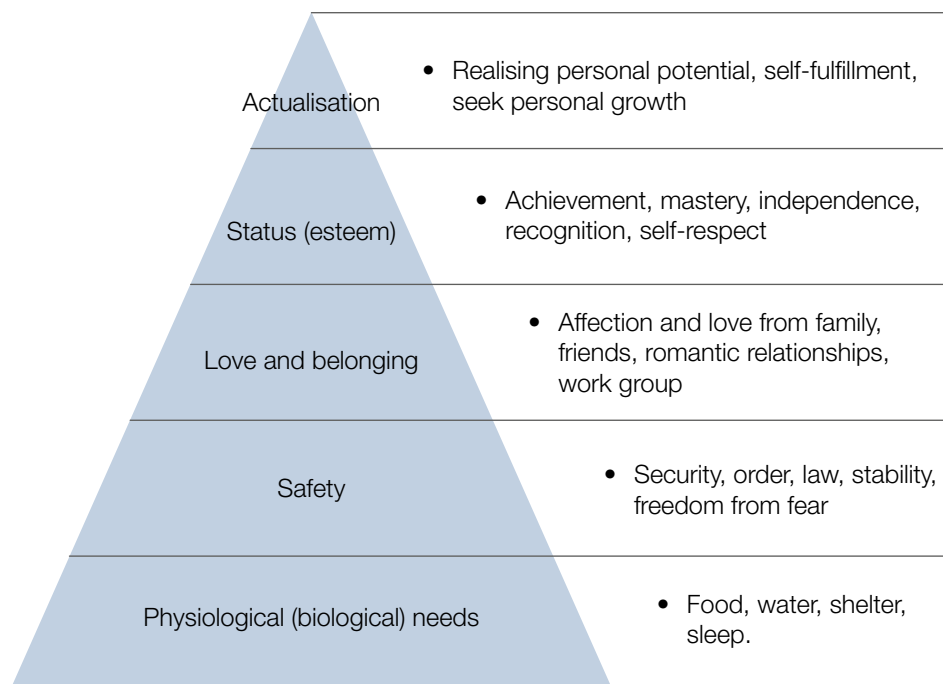


Figure 1. Maslow’s pyramid¹

Hertzberg's two factor theory

Hertzberg postulated that satisfaction and dissatisfaction with work were related to different factors (*Table 1*).² He described 'motivation' factors, which provide satisfaction, and 'hygiene' factors, which do not provide satisfaction but need to exist to avoid dissatisfaction. Current thinking does not separate satisfaction and dissatisfaction on differing scales.

Hygiene factors	Motivation factors
Practice policies and procedures	Achievement
Support from colleagues	Recognition
Working conditions	Work itself
Salary	Responsibility
Relationships with staff	Advancement
Personal life	Growth

Bandura's social learning theory

Social learning theory suggests that learning occurs by observing the behaviour of others and the outcomes of those behaviours.³ Learning may occur in the absence of any behavioural change. Modelling is an important aspect of social learning theory. Hence, the positive observation of other GPs is a significant influence in becoming a GP.

1.2 Job competencies

There are determinates or competencies for a successful medical career apart from academic skills. Consider those people who performed well at university but do not appear to have achieved success and those who did less well but have gone on to be highly successful.

Competencies are the underlying characteristics that determine patterns of behaviour or thinking in a wide range of situations. They endure for extended periods of time. Spencer and Spencer⁴ describe five types of competency characteristics that determine how we act consistently throughout our professional careers:

- Motives – determine what we consistently think about and pursue through our actions.
- Traits – physical characteristics and consistent responses to situations or information.
- Self-concept (or image) – a person's attitudes, values and beliefs.
- Knowledge – the information a person has in specific content areas.
- Skill – the ability to perform certain physical or mental tasks.

Richard Boyatzis⁵ suggested that effective managerial performance is the combination of three key variables: individual competencies, job demands and organisational environment. We can use this framework to consider what is required for effective performance by a GP (*Figure 2*). By appreciating that effective performance is dependent on more than knowledge base, this model provides a framework for assessing a range of competencies required by the GP, the demands of the job and the practice environment, and the interaction between these elements.

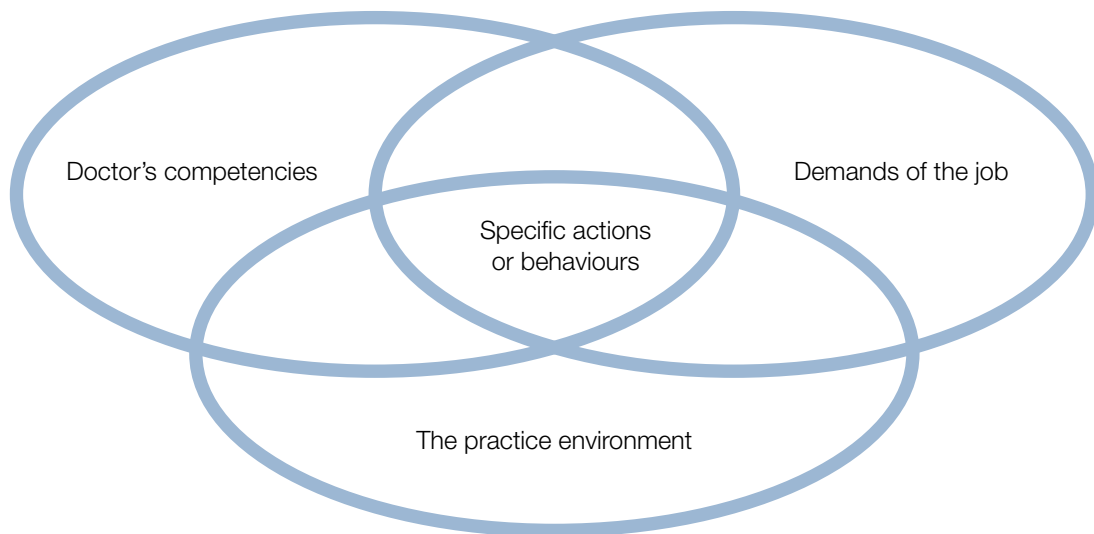


Figure 2. Model of effective work performance⁴

A generic competency model of helping and human service workers is shown in *Table 2*.

Table 2. Generic competency model for helping and human service workers ⁴	
Competency	Examples of behaviour
Impact and influence	Working to establish credibility and trust
Developing others	Assisting patients to manage their own health
Interpersonal understanding	Taking time to listen to patients
Self-confidence	Expressing confidence in skills and judgment, independence, willing to take responsibility
Self-control	Controlling emotions in response to upset or angry patients, resistance to stress
Other personal effective competencies	Accurate self-assessment, learning from mistakes, acknowledging own feelings
Professional expertise	Maintaining up-to-date knowledge and skills
Customer service orientation	Attention to patient satisfaction, probing to discover underlying needs
Teamwork and cooperation	Working with others and sharing information
Analytical thinking	Prioritising health problems, breaking complex tasks into manageable parts, recognising multiple causes for illness
Conceptual thinking	Diagnosing illness early in its development by applying complex learned concepts
Initiative	Doing more than is required, being proactive
Flexibility	Working effectively in a range of situations or with individuals
Directiveness/assertiveness	Directing individuals when required, demanding high performance, saying 'no' to unreasonable requests

Information seeking, concern for order, quality and accuracy are other competencies relevant to general practice.

The competencies required to be an effective GP are often not sufficient to enable effective management of the practice. Management requires particularly strong achievement orientation (measuring performance, improving efficiency or effectiveness, setting goals) as well as strong teamwork and initiative competencies. If GPs are not strong in these competencies, they need support from someone who is, such as a partner, employer or employee.

1.3 Personality types

There are a wide range of psychometric tests that can be used for the healthcare and medical profession:

- personality tests (most popular)
- numerical reasoning tests
- verbal reasoning tests
- abstract reasoning tests.

1.3.1 Personality tests

Personality tests measure behavioural styles, attitudes, opinions, motivators and personal attributes (eg. temperament, career interests and personal values) that are relevant to the workplace.

These tests typically measure your:

- attitude towards and ability to work with stakeholders
- project and task management skills
- behaviour style towards other people such as co-workers and managers
- ability to cope with stress in the workplace
- decision-making style
- level of creative thinking and your acceptance of change, as well as other elements.

Like all people, GPs have different personalities. The work some GPs find energising, others find stressful. Increasing understanding of your own personality will assist you to manage your career and personal life. There is a wide range of psychological tools designed to help you understand your personality. It is a small career investment to secure the services of a psychologist experienced in this field to conduct psychological testing. Improving your understanding of yourself will make you a more effective GP and guide your job selection.

Some typical personality characteristics of a GP are:

- caring, respectful and empathic
- sensitive to others' needs and feelings
- structured and planned in approach to tasks
- ability to make decisions based on objective data such as up-to-date scientific evidence and clinical judgment
- socially skilled (friendly and engaged in social situations)
- confident and able to take charge (directing and helping others)
- collaborative with other professionals including those from other disciplines.

A personality test can give you an indication of the jobs that match your personality type and your aptitude for a particular career. Remember that the test results are only an indicator and you should not rely on them as an absolute determinant of which career or job is best for you.

It is worthwhile taking a career test or career assessment, as well as reviewing career options to consider how they may fit with your personality. Evaluating your goals and lifestyle can provide additional insight into the most appropriate jobs for you.

Several career tests are available online. Some are paid assessments, while others are free. The more in-depth analyses provided by top-rated assessment instruments like the Myers-Briggs Type Indicator (MBTI), the Strong Interest Inventory or the Keirsey Temperament Sorter, charge a fee for products and services, but are highly recommended for their reliability and effectiveness as career assessment tools.

1.3.2 Top career tests – overview

Myers-Briggs Type Indicator (MBTI)

MBTI is one of the top-rated instruments to help assess your personality type and explore career options (fee). For more information, visit www.myersbriggs.org

Career Key

Career Key is an online career assessment tool that determines your similarity to six different personality types (fee). The results are linked to occupational choices.

It is available at www.careerkey.org

Keirsey Temperament Sorter

The Keirsey Temperament Sorter is another highly rated test that helps you discover your temperament, which is classified as Artisan, Guardian, Rational or Idealist (free description, option to purchase full report).

It is located at www.keirsey.com/sorter/register.aspx

Strong Interest Inventory

This test matches your interests with professional careers and helps you discover your preferred work style, learning environment and leadership style.

It is available at www.cpp.com/products/strong/index.aspx

For more information, please go to: www.psychometricinstitute.com.au

1.3.3 MBTI in focus

The MBTI is designed to translate Carl Jung's theory of psychological type into an indicator of personality preferences on four dimensions (*Figure 3*). The MBTI is a self-report questionnaire used extensively in organisational psychology to help people understand their personality, motivations, natural strengths and potential areas for growth (see *Resources*). Although most people can and do work in different ways, at times it is useful to appreciate your preferred mode of relating to people and situations. Understanding yourself (and others) better will assist you to work more effectively.

Extraversion	How are you energised?	Introversion
Prefer to draw energy from the outer world of people, activity and things	←————→	Prefer to draw energy from the inner world of ideas, impressions and thoughts
Sensing	How do you acquire information	Intuition
Prefer to take in information from the five senses, deal with facts, and focus on reality	←————→	Prefer to deal with ideas, consider the unknown and focus on patterns and possibilities
Thinking	How do you make decisions?	Feeling
Prefer to make decisions based on logical analysis	←————→	Prefer to make decisions based on personal values
Judging	What lifestyles do you adopt?	Perceiving
Like to live in a planned, stable and organised way	←————→	Like to live in a flexible and spontaneous way

Figure 3. MBTI personality preferences

1.4 Career orientation and career anchors

When people select a career in medicine, they often do so with limited understanding of the medical role. Once in the role, doctors experience medical life in different ways. For some, a medical career develops into a very rewarding vocation; others become disillusioned or move into other areas.

While most GPs are satisfied with their jobs,^{6,7} some become dissatisfied and consider a career change. This emphasises the importance of having a clear understanding of your:

- orientation toward work
- motives
- values
- talents.

The term 'career anchor' was used by Edgar Schein to describe how an individual acquires a constellation of job preferences that influence their career development and job satisfaction.⁸ Schein acknowledged that early career decisions are often based on an incomplete understanding of the chosen field of work and personal needs. After a few years of on-the-job experience, people develop a more accurate picture of their abilities, needs and values. Schein labelled these constellations as career anchors and suggested they are relatively stable in influencing future career decisions.

Although Schein acknowledged there may be more, he proposed eight career anchors:

- Technical/functional competence – drive to develop excellence in a particular field or skill and use this to address challenging situations.
- General management competence – enjoy organising people, problem solving, taking responsibility and producing results.
- Autonomy/independence – primary need is to work under own rules and avoid working with others unless they can maintain independence.
- Security/stability* – seek stability and continuity and avoid risks.
- Entrepreneurial creativity – likes to be creative, start new business ventures and comfortable with risk.
- Service/dedication to a cause – drive to help others or make the world a better place. Using their specialised skills is secondary to contributing to a cause.
- Pure challenge – drive to confront and overcome challenges; will change jobs if no longer perceived to be a challenge, leading to a varied career.
- Lifestyle – focus on integration of work, social and career aspirations including taking extended periods off work to follow other interests.

*Research by DeLong found that security/stability had two elements: organisational stability (ie. long-term employment) and geographic security where an individual wished to stay in one location.⁹

2. *Planning your medical career*

Chapter 1 considered issues surrounding personality, career and life stages. In reading about these issues, you may have developed fresh insight into your identity as a professional person and the career ahead of you. This chapter aims to use this knowledge to assist you in developing a personal business plan.

The key business assets you possess are knowledge, skills and the ability to provide primary health care. These assets need to be managed with care and consideration, as they are valuable to you and to the community.

2.1 Assessing your current career position

It is possible to plan your career, develop your competencies and chart a course to follow. This is true for all career stages.

A personal business plan is a guide for managing your career (*Section 2.2*). It is an operating tool that enables assessment of:

- where you want to be at a certain stage of your career (eg. in 5 or 10 years) and the reasons for wanting this (ie. your vision for your career, your values and goals)
- where you are today – your current reality, your strengths and weaknesses
- the opportunities available to you and possible future problems (threats) and what will enable you to take advantage of the opportunities and minimise the threats
- big picture health sector trends, changes in the community and your current employment setting
- what you are particularly good at (your distinctive competencies).

2.2 Career and professional development goals

Personal business plan

A personal business plan (also known as 'personal strategic plan') can help you plot a path for your education, career and personal life (to achieve a work–life balance). It can be used as an effective tool in assisting you develop and manage your professional career.

A personal business plan improves the congruency between what is really important to you (ie. career anchors), what you are really good at (ie. distinctive competencies), and your career vision and goals. The greater the congruency, the better your career-related decisions.

Most successful businesses use formal planning as an integral part of management. It is appropriate to formally plan and manage your career at all stages to achieve the outcomes you want.

Developing a realistic, relevant plan will require you to consider options and determine whether the choices you have made are optimum, based on factors such as the economy, your abilities, personality attributes and your financial and personal goals and needs.

Do not place your personal business plan on a bookshelf and ignore it. Refer to it often, particularly when faced with life-changing decisions. Your personal business plan can help you make rational, well-informed decisions based on your established goals and current situation. As your career progresses, you become aware of new areas of interest, opportunities change and your goals will be revised.

3. Managing your medical career

3.1 Career breaks

GPs take a career break for many reasons, such as:

- education and training
- maternity leave
- non-medical duties
- approaching retirement.

3.2 Re-entering general practice after a break

When re-entering practice after a break, there are key points to consider when deciding whether to return to the same practice or begin new work. Planning is important. Consider the experience you gained during the time out and recognise the additional skills you may be bringing to the role rather than what you've lost.

It is important to consider:

- the areas you need to update your knowledge or skills and developing a plan to address these learning needs
- basic cardiopulmonary resuscitation (CPR) requirement for the RACGP Quality Improvement and Continuing Professional Development (QI&CPD) program
- your work-life balance and choosing a practice and situation that suits you
- extra time in your appointment book, by seeing fewer patients per hour or session; often you need to learn new practice systems, get to know patients and you may need to look up new treatment guidelines
- the financial cost for re-entry, eg. Australian Health Practitioner Regulation Agency (AHPRA) and RACGP memberships, professional development.

If you have children, you may need to consider other elements such as proximity of work to childcare; needing to finish on time to make pick-up deadline and arrangements for when your child is sick.

Medical practitioners practising in Australia must be registered with the Medical Board of Australia (MBA), which is regulated by AHPRA.

There are now mandatory requirements to participate in continuing professional development (CPD). In addition, doctors who have a period of absence of more than 1 year need to demonstrate participation in CPD activities under the MBA's *Recency of practice registration* standard.

For further information, visit www.medicalboard.gov.au

3.3 Career progression – career growth and flexibility

Like most professions, medical practitioners do not cease to learn or expand the scope of their career upon completing their formal training. As a GP, you can choose a career pathway that continues to provide stimulation, a challenge and variety until the end of your practising career.

There are so many ways to be a GP and the opportunity to shape or alter your career and your lifestyle is always available. General practice is the most flexible medical speciality. As a GP you have a greater capacity to decide where and what hours you work, and to tailor your workload to suit your stage of life and your professional life/career. This flexibility creates opportunities to pursue other career interests, have a family, travel, build up your income level or enjoy a greater work–life balance (working reduced hours).

3.3.1 Types of general practice work

Business owner

Most GPs work in small private practices. The number of solo GP practices is decreasing and practice size is increasing. You can work as an assistant, independent contractor, an associate or partner in a practice.

Some GPs thrive on the challenge of owning and running their own practice while others prefer to avoid the business side of practice altogether. In larger cities, there are now larger practices owned by corporate businesses. You can decide which business structure suits you best.

If you want better financial returns in the long term, you should consider owning or part owning a practice.

For more information, please consult *Module 3 – Business Structures*.

Advisory/consultancy roles

Experienced GPs can work in advisory roles for pharmaceutical or health insurance companies, hospitals, regional health organisations or a range of other organisations.

Academic/research roles

Research is central to progress in medical science and practice. Opportunities exist in scientific pursuits and in examining other possible determinants of health, wellbeing and other health outcomes, such as socio-economic status, behaviour and other environmental influences.

Research allows GPs to develop valuable skills to take into their clinical work and could act as a stepping stone towards an academic career.

By providing GPs with grants, scholarships and awards, the RACGP Research Foundation helps to support the role research plays in creating the evidence base for our professional standards.

The National Health and Medical Research Council (NHMRC) is Australia's peak body for supporting health and medical research. It develops health advice for the community, health professionals and governments and provides advice on ethical behaviour in health care and in the conduct of health and medical research. The NHMRC operates a number of funding programs for a variety of research needs, scholarships, research fellowships and career development awards. For more information, go to www.nhmrc.gov.au

Teaching/supervisory role

The most accessible teaching role for a GP is working with GP registrars in the practice environment, as part of the regional training providers' (RTP) team. RTPs provide training for GP supervisors. This training includes being a teacher, collaborative learner, coach/mentor and role model, as well as the professional and ethical aspects of the role.

A GP supervisor's role is complex and challenging. General practice is a difficult discipline to teach and learn, stretching from practical skills to counselling skills. This is overlaid by a multi-dimensional relationship; the prolonged attachments GP registrars have with GP supervisors in a close apprenticeship relationship, the shared responsibility with the registrar for patient care and safety, and often an employer–employee relationship.

Some GPs combine practising with being a medical educator for an RTP, teaching and advising GP registrars, and may also be involved in program management and policy work. Another option is teaching medical students in the university environment. While within the practice, there is the opportunity to be part of programs that offer medical students and prevocational doctors a taste of general practice.

Special or specific interests and sub-specialities

General practice gives you the freedom to follow your passions, sub-specialise and create the career that is right for you. GPs develop specific interests in paediatrics, anaesthesia, emergency medicine, academia, military medicine, sports medicine, rural general practice, public health, Aboriginal and Torres Strait Islander health and many other areas.

Assistance for procedural training for GPs is available for rural GPs through Medicare programs such as the Rural Procedural Grants Program. This particular program supports training in emergency medicine, anaesthetics, obstetrics and surgery. Metropolitan GPs doing rural locum work may also be eligible for some training grants.

Working overseas/overseas posts

If you enjoy travelling and are keen to gain clinical experience in another country, there are opportunities to take on exciting positions overseas. International terms have involved many locations, including the United Kingdom, Ireland, USA, China, Malaysia and the Middle East.

Australian medical recruiters often have overseas positions among their services and can provide advice on the requirements for their postings.

Aid organisations

Many aid organisations (eg. Red Cross, Médecins Sans Frontières) need doctors to assist them with emergency and ongoing work with communities in need around the world. They may only require your Australian medical qualifications, but will often specify the length and type of experience required for the position.

International medical assistance organisations

These companies provide services to travellers and expatriates. Employment opportunities include working on teams recovering and repatriating patients to a medical facility or their home country, practising in clinics that serve expatriate communities and medical leadership positions. They usually require full medical registration in your home country. Levels of experience required depend on the position.

3.4 Employment choices and recruitment

Strategic planning and proactive management of your career pathway will allow you to maximise your opportunities for professional development.

The RACGP has developed an *Employee Guide* (3rd edition) for GP employees and independent contractors to identify and seize opportunities to promote their medical careers in line with professional aspirations. This resource includes practical information about:

- developing and promoting your profile and resume
- the variety of employment scenarios and conditions you may encounter when looking for suitable employment
- preparing for employment interviews and going through the process of negotiating employment contracts
- the factors influencing GP earnings, your income potential and forecasting
- administrative templates and tools to help you along the way.

For more information, visit www.racgp.org.au/your-practice/business/employment/employee-guide

3.5 Part-time work – a real possibility in general practice

More GPs than ever are choosing to work part-time in general practice, whether it be to care for children or to combine work in other areas such as medical education, research, a sub-specialty area such as Aboriginal and Torres Strait Islander or mental health, or surgical assisting.

While many GPs report that the advantages of part-time general practice include a greater work-life balance and an improved quality and enjoyment of general practice, there can also be many challenges that need to be considered and addressed.

Continuity of care

- Some GPs choose to spread their hours across multiple days to be more available for patients.
- Job sharing can also work where a colleague may be available to follow up results or see patients during times you are not at work.
- Other GPs may choose to do non-clinical work such as checking results, writing letters or making phone calls while not at the surgery. IT solutions such as remote access can facilitate this.
- Larger practices may make it easier to share the workload.
- Ensuring that you and your colleagues are clear about how urgent results and patients will be followed up is an important medico-legal issue.

Keeping up to date

- Not being in the practice may mean you miss practice meetings; however, it may make it easier to attend educational activities.
- Seeing fewer patients means you receive less clinical exposure, making it harder to feel confident managing less common conditions.

Juggling different roles

- For some it can be difficult to move between different roles, especially on the same day, while for others this may be refreshing.
- Each role often contains its own 'extras' such as staff meetings and educational requirements, which can further increase the non-clinical load and should be kept in mind.

3.6 Career mentoring and coaching

Mentoring is a long established and well-regarded technique for supporting the personal and professional development of individuals' careers.

The issues that doctors choose to discuss during mentoring sessions are often related to work–life balance and career decisions. They might also include topics such as how best to prepare for an imminent job interview, whether to move to a different geographical area, choose a special interest or whether to work part-time and salaried, or as a locum.

GPs are fortunate to have a wealth of opportunities in terms of flexible working, but sometimes this choice can be bewildering.

There is increasing competition for jobs for newly qualified GPs and taking time to evaluate options is important. GPs may identify numerous resources to develop their careers, which they had not considered before mentoring. GPs who are making mid-career decisions or coming up to retirement may also find mentoring helpful.

A career mentor may offer GPs:

- support through a period of change
- help in the development of their careers
- the opportunity to discuss any current professional concerns
- the space and time to reflect on, and evaluate, their work
- an opportunity to identify further learning needs
- help and support for personal and professional development.

The benefits of having a mentor include assisting the GP to:

- develop greater self-confidence and increased motivation, through assisting with increased self-reflection and understanding
- focus on key aims and objectives, which can support and develop a GP's personal business plan
- develop key competencies, such as strategic thinking, problem solving and influencing skills, and how to begin to apply these in the workplace
- obtain invaluable advice on career progression and advancement, and guidance on the importance of building networks
- focus on personal and professional development which contributes towards CPD.

3.7 Career based support services for GPs

For advice around recruitment, ongoing professional development, career mentoring, education and training, and financial/business in general practice, please consult the following recommended websites:

- The Royal Australian College of General Practitioners, www.racgp.org.au
- General Practice Registrars Australia, www.gpra.org.au
- Rural Workforce Agency Victoria, www.rwav.com.au
- General Practice Australia, www.gpaaustralia.org.au
- Rural and Regional Health Australia, www.ruralhealthaustralia.gov.au
- Medical recruitment agencies – Association of Medical Recruiters of Australia and New Zealand (AMRANZ), www.rcsa.com.au
- Medical Journal of Australia Guide to Medical Recruiters, www.mja.com.au/careers/recruiter-guide

3.8 Exploring your medical career options – the practice environment and other GP work environments

Private medical practice

A private practice is a commercial operation that needs to cover its costs and generate a profit. Like other businesses, decisions have to be made about where it is located and the services provided.

Private practice offers GPs the opportunity to create a workplace and service that suits them and provides financial and professional rewards. It can also involve a range of business and management responsibilities. The GP in private practice can become an employer, property owner, business partner and business manager.

Choosing the practice model or structure that you want to work in is an important consideration. It will influence how you work each day, your financial rewards, your commitments and the business relationships you will need to manage.

The traditional practice

Typically, GPs are owner–operators with a long-term commitment to the practice and the community. The GPs carry the principal management responsibilities and in group practices they would use company or trust structures to share profits and expenses. Often GPs own the practice premises and may have invested significant capital in equipment and other facilities.

Outsourced practice management

The practice owner contracts with a practice management company to provide business management services. These may include GP recruitment, practice reception services, patient billing services, credit management and staff rostering. As practice owners, GPs retain the overall business risk, but are able to have more focus on medicine.

Serviced medical suites

The practice owner pays a facility charge for practice support services and rent on the surgery; reception services, utilities and practice nurse services may also be provided. The GP practice owner would remain the operating agent and be responsible for all other practice and business management responsibilities including clinical consumables. It is not necessary to purchase a practice and using serviced medical suites can avoid staff employment responsibilities.

Fly-in/fly-out

A visiting GP service may be the only option available in the remotest of communities. In general, these arrangements require subsidies from the government.

The hospital with a co-located GP clinic

In some states, the doctors are primarily remunerated through their hospital work but may have rights to private general practice to enhance earnings. In some settings, GPs operate a private general practice on the hospital campus. The practice effectively leases rooms in the hospital but may also use hospital facilities such as treatment rooms.

The multipurpose centre with a co-located GP clinic

These centres can operate under a variety of management models including the GPs being employers of a range of healthcare staff. In rural health services they might include accident and emergency services, aged care beds and some acute beds.

The GP super clinic

The GP super clinic brings together GPs, nurses, visiting medical specialists, allied health professionals and other healthcare. There may be a range of contributors to the services provided through the GP super clinic such as Commonwealth, state, territory, or local government, private practitioners, including non-government not-for-profit organisations or private health insurance arrangements.

Most GPs are not taught business development at medical school, therefore using the professional skills and knowledge of others enables them to structure and operate the practice as a sustainable and profitable business.

Please refer to *Module 3 – Business structures* for more information and guidance concerning the different business structures in general practice.

Other non-practice based general practice work

GPs do not necessarily have to work in private practice. Alternative work environments for GPs working as locums include:

- cruise ships
- sporting clubs
- companies that need to provide medical services to their employees
- pharmaceutical and medical device companies
- other medical service organisations
- aid organisations.

4. Professional and life stages

A medical career develops through a number of stages in concert with other stages and events in a doctor's life. This chapter discusses some of the issues relating to professional and life changes that may have an impact on a career in medicine.

Understanding the stages in a professional career, as well as your own personal life, can help with planning and responding to different needs.

4.1 Career development stages

One way of looking at your career is to use the model first proposed by Donald Super. This model examines four key stages in career development: exploration, establishment, maintenance and disengagement.¹⁰ While originally proposed as a progression of stages, Super later recognised people may disengage and re-enter their career through the exploration phase again. You can use this framework to examine different aspects in career development:

- **Exploration** – exploring a range of options, narrowing down choices into specific areas of work roles.
- **Establishment** – settling into a job, supporting and developing skills and knowledge; making yourself secure and demonstrating your value. Increasing your level of responsibility.
- **Maintenance** – retaining your role in the face of changing knowledge, technology, systems and younger doctors; keeping abreast of changes; finding new ways of doing things.
- **Disengagement** – reducing load and pace of work. Seeking to move into a different area of work or living without paid work.

During exploration, a doctor is developing an understanding of a career in general practice and then commits to training in this field. In addition to the knowledge and skills required for general practice, you need to develop an understanding of the work environment for general practice. This environment includes the social, political, regulatory and geographic dimensions of general practice as well as the work environment of the general practice setting.

The establishment stage follows completion of vocational training and involves selecting a practice to work in. This may involve working in a number of locations and settings. Decisions regarding establishment are covered in *Module 2 – Practice assessment*. This stage takes several years, as there is a lot to learn about a new practice setting. It also takes time to establish your professional reputation with a group of patients that regard you as 'their doctor'. Developing professional and community networks is part of this stage.

When you finally make it as an 'established GP' you are likely to be aged in your mid 30s and facing ongoing changes in general practice. Learning is still taking place. Patient expectations and demands are also increasing. Government regulations, red tape, paperwork and emails demand more of your time. This can be a source of stress as there are competing priorities in your life. Now that you are in the maintenance stage, it is apparent that your professional career consumes a lot of energy. For many GPs, finding an appropriate work–life balance presents a major challenge.

Disengagement follows deciding to reduce workload because of career dissatisfaction or a change in interests. Experiencing burnout may lead to disengagement. This is potentially avoidable by recognising early signs and taking active steps to address the cause. Many professionals are now choosing lifestyle options.

A 2003 survey indicated that more than 20% of the workforce aged 30–59 years has downshifted over the past 10 years.¹¹ Downshifting describes the act of taking a job that pays less but allows greater social benefits, such as more family or recreational time. Downshifting in Australia is closely linked to 'sea change' (the habit of moving from urban areas to regional coastal areas). Usually it involves reducing hours, but it can also involve career change or ceasing work altogether.

Career development for many female doctors is affected by motherhood and family responsibilities, which can lead to interrupted career development. In this way, women may experience career development as work/family conflict. The impact of this on the medical workforce is gaining importance, as 60% of GP trainees are women.¹² Men are now more often adapting their work to contribute to childcare.

Researchers recognised that the modern work environment is more dynamic than the progression of stages proposed by Super. Schein (see *Section 1.4*) described career anchors that motivate career development.⁶ Douglas Hall coined the term the 'protean career' to describe the worker whose career is driven by themselves rather than an organisation.^{13,14} For these people, their career is re-invented as the person and their environment change. They experience a life-long series of identity changes and continuous learning.

4.2 Life stages

While career development is occurring, doctors are also progressing through their personal life journey with all the challenges, joy and heartbreak it brings. Patients are often unaware of the private life of their doctor.

Life issues that may impact career development include:

- raising children
- relationship problems, separation and divorce
- death of a spouse or other family member
- caring for ageing parents
- adapting to changes in health
- financial pressures
- loss of job satisfaction.

Marketing professionals keenly observe social trends and consider the following life stages:

- youth – ages 18–25 years
- young adulthood – ages 25–40 years
- new life stage called 'middlescence' – ages 40–60 years
- late adulthood – ages 60–75 years
- old age – ages 75–90 years
- very old age – encompasses the 90 years and over to end-of-life stage.

4.2.1 Young adulthood (25–40 years)

In young adulthood, GPs are facing the competing demands of maintaining independence, exploring the world and their options for work, friends, lovers and life partners. Increasingly, couples are deferring marriage and children.

Having children has a major impact on the careers of parents. While some parents feel comfortable juggling their roles, for many it leads to stress due to the conflicting demands of time and energy.

For many women, motherhood leads to a reduction in medical work for many years. Re-entry to the workforce is an issue that then needs to be managed (refer to *Section 3.2*).

4.2.2 Middle adulthood (or middlescence) (40–60 years)

Popular author Gail Sheehy has described the modern phenomenon of life stages being stretched out:

*'Most Baby Boomers don't feel fully grown up until they are into their 40s. When our parents turned 50, we thought they were old! But today, women and men I've interviewed routinely feel they are 5–10 years younger than the age on their birth certificates. Fifty is what 40 used to be; 60 is what 50 used to be. Middle age has already been pushed far into the 50s – in fact, if you listen to boomers, there is no more middle age. So what's next?'*¹⁵

4.2.3 Changing our linear life – late adulthood (60–75 years)

It is estimated that more than 75% of men and 85% of women intend to retire from full-time work before they reach 65 years of age.⁹

The debate around retirement age continues. The aged pension was introduced to Victoria and New South Wales in 1900, followed by other states. In 1909, the new Commonwealth Government of Australia introduced legislation that provided for the aged pension for men from 65 years of age and women from 60 years of age. From July 2013, the retirement age for women will also be age 65. Further increases in retirement are likely.

The age of 65 years became the 'magic' number in the 1880s, when Prussian chancellor, Otto von Bismark introduced, for political reasons, a 'retirement' pension for persons aged 70 years (later reduced to 65 years). Very few people at this time received the pension, as the life expectancy was only 48 years. Other countries, including Australia, followed this program of social welfare.¹⁶

As our life expectancy has increased and many people now live well into their 80s and 90s, the concept of 'old age' has changed. People in their 60s and 70s make very significant work and social contributions. Older persons frequently exhibit:

- greater experience based knowledge
- increased accuracy
- better judgment
- generally improved ability to handle familiar tasks than younger persons.

The Australian Bureau of Statistics projections suggest that in the years leading to 2016, 80% of our labour force growth will be in the 45 years and over age group, as the supply of mature age workers grows more rapidly than the supply of young workers.¹⁷ As GPs, we can expect to be able to continue working beyond 65 years of age. Given the current shortage of GPs, we will be needed in the community and can continue to make a significant contribution to the healthcare of our communities and in teaching the doctors coming through.

4.3 The 'learning life' of a general practitioner

Examining the steps to becoming a GP qualified for unsupervised practice in Australia helps define training and career needs at each stage of the path to becoming a competent GP.

Prior to entering general practice vocational training, medical practitioners will already have many years of training by a range of individuals, organisations and institutions.

A uniform general practice curriculum from the earliest stage of medical education helps support trainers. This forms a solid foundation for general practice training.

In Australia, the stages of the GP's learning life have been identified as:

- **medical student** – student who is enrolled in a primary medical degree and will undertake a general practice placement
- **prevocational doctor** – junior doctor who is undertaking supervised work in a hospital, but who has not yet enrolled in a speciality training program
- **vocational general practice register** – completion of vocational training and the Fellowship of the Royal Australian College of General Practitioners (FRACGP) equip medical practitioners with the core competencies required for unsupervised practice in Australia
- **continuing professional development** – after qualifying as a vocational GP, and as part of professional learning life requirements, all GPs need to ensure ongoing professional development and continuing quality improvement activities in order to maintain core practice competencies as well as potentially develop specific interests.

In all of these situations, GPs need to self-direct their learning requirements and may need to comply with regulatory requirements to be eligible to provide services, such as medical imaging, or to be eligible for medical indemnity cover.

Other GPs may take further formal postgraduate training and the learning professional life of GPs needs to recognise the diversity of ongoing learning activities in which GPs participate.

Some students may enter this training path at different stages of the learning lifecycle. For example, an international medical graduate (IMG) may enter at various points in the cycle depending on previous levels of qualification.

Due to the comprehensive nature of general practice, some of these steps crossover with training pathways to other medical specialties and therefore have competing training priorities.

Principles of the lifelong learning of GPs

Over a GP's professional lifetime, each level of learning builds upon the previous level and assumes that all previous requirements have been met. In reality, the path is continuous rather than consisting of discrete steps. Most learning levels will overlap.

The RACGP *Curriculum for Australian general practice* is based on the following key adult learning educational concepts and principles that are applied across the GP learning life:

- **Needs focused training** – directed toward meeting the healthcare needs and priorities of the Australian community.
- **Learning as a continuum** – integrates vocational training with undergraduate, postgraduate and continuing medical education.
- **Lifelong learning** – encourages a commitment to continuous improvement of knowledge and skills throughout a GP's learning life.
- **Experiential learning** – emphasises training as a supervised real world clinical experience of consulting with patients who present with common and significant conditions typical to general practice.

5. Managing your health and wellbeing – professionally and personally

Medicine is a rewarding and endlessly challenging career. Hanging in for the long haul requires the ability to transcend adversity.

When we consider all the complex issues we juggle every day, sometimes it seems easier to try to ignore the frustration and just get on with the job. Chronic states of stress can catch up with you and, if this happens, patient care will suffer as well your own health and wellbeing.

5.1 Recognising and dealing with stress and maintaining resilience

If we are going to be effective GPs, we need to recognise the warning signs of stress and make changes in our lives to restore a sense of balance. Most of the time we know what we need to change, but we delay making decisions and defer taking action. Sources of stress for GPs are related to the organisational, patient-related and personal aspects of the role (*Table 3*).

Most frequent stressors	Most severe stressors
Time pressure to see patients	Threat of litigation
Paperwork	Too much work to do in a limited time
Phone interruptions during consultations	Earning enough money
Too much work to do in a limited time	Patients who are difficult to manage
Intrusion of work on family life	Paperwork
Patients who are difficult to manage	Intrusion of work on family life
Home visits (in hours)	The cost of practice overheads
Earning enough money	Time pressures to see patients
Intrusion of work on social life	Unrealistic community expectations
Unrealistic community expectations	Negative media comments

We also need to think about ways to maintain our resilience – professionally and personally – in the long term and how we care for our colleagues.

Resilience is a combination of personal skills, behaviours, knowledge and attitude. There is no single blueprint for being resilient; it is a matter of finding what works for you in the situations that you find yourself in.

Dealing with issues within our control and being a resilient doctor requires:

- patient care
- achieving work–life balance
- dealing with unrealistic expectations
- leveraging time
- delegating effectively
- breaking unhelpful habits
- planning postgraduate training.¹⁹

5.2. Achieving a work–life balance

Work–life balance means different things to different people and may also change for an individual across different stages in their life. In its broadest sense, it can be defined as a satisfactory level of involvement or ‘fit’ between the multiple roles in a person’s life.²⁰

Increasingly the desire for a satisfactory work–life balance is a factor in doctors choosing general practice as their speciality, due to perceptions that this may be more possible to achieve than in other specialities. Yet work–life balance is identified as an area of concern for GPs, especially for female GPs and those in Generation X.²¹

In a study of almost 4000 GPs and GP registrars, participants were asked if they felt ‘the balance between their personal life and their professional life was about right’. Only a little more than half either strongly agreed (11.6%) or agreed (40.9%).²²

Contributing factors

This study sheds light on important factors that contribute to achieving work–life balance. There are trends across different generations, and also between men and women, which can be closely linked with the number of hours worked (*Table 4*).²²

Generation	Good work–life balance	Hours worked per week
Generation X	62.7%	33.5
Baby Boomers	46.3%	42.6
Older GPs	66.4%	35.9

Unfortunately, achieving a good work–life balance is not as simple as just cutting back your hours. The inability or difficulty to take time off when needed and unpredictable work hours have a negative impact, as does having dependent children. For example, you may expect that a female GP, who is working school hours from 9am to 3pm, may feel that she has a good work–life balance. However, if she is regularly required to stay back to deal with emergencies, which causes her to run late for the school pick up, she may perceive that her work–life balance is not quite right.

Among the factors that affect work–life balance (*Table 5*), two factors stand out as key predictors of a good balance: being in good health and having good opportunities for leisure.

Positive Impacts	Negative Impacts
Less number of hours worked	Large number of hours worked
Good health	Unpredictability of hours
Good opportunities for leisure	Difficulty in taking time off when wanted
Partner and no children	Doing on-call or after hours work

5.3 Tips for achieving a satisfying and healthy GP career

The RACGP profiled seven well-regarded GPs across different stages of their careers and their personal life stages to share their collective wisdom about surviving and thriving in general practice. Their advice follows.

Enjoy the diversity that general practice has to offer

- ‘I love the variety! ... this allows me to constantly enjoy the job and continue to learn and develop new skills.’
- ‘I love the diversity of doing different activities through my week and feel invigorated by the non-GP activities which, while at times can be quite draining, are rewarding.’

Cherish the important role you play in your patients’ lives

- ‘Throw yourself wholeheartedly into your work and ensure that every interaction, be it with patients, colleagues or non-clinical staff be positive for the other party.’
- ‘I feel each day I can make a difference to people’s lives and not infrequently save them by a timely intervention or diagnosis.’
- ‘Enjoy the privilege of people trusting you with their most intimate problems.’
- ‘Keep reminding yourself that most people are like people in your own family and come to you with problems they are genuinely worried about – avoid becoming over cynical.’

Prioritise what’s important in life and try to make it happen

- ‘Work the time you want and the way you want.’
- ‘Appreciate that different life phases will impact in different ways on your schedule and activities; don’t feel you have to be a super-doc and super-person, and don’t feel guilty about what you do to survive the stress. For instance, don’t feel guilty about using a cleaner or eating out regularly or not doing the voluntary work you otherwise think you should do.’
- ‘Have time out with family as much as you can as it flies by so quickly.’
- ‘I try to never take my son into work, I don’t want him to ever be told to play quietly in the corner while daddy needs to give attention to someone else.’
- ‘Need to take stock of self regularly. Easy to get absorbed by work demands and swept along with things and lose sight of burn out.’

Find ways to unwind

- 'Ensure there is regular time you can simply give yourself up to playing with your children (or doing other activities) and let the jobs wait – this “mindful parenting” is therapeutic and beneficial for your child.'
- 'Regularly do something you love that enables you to switch off completely from work and act somewhat like “mindfulness” – whether it be art, reading history, sailing, singing or being with grandchildren.'

Accept that knowing it all, all of the time, is simply not possible

- 'I have come to some acceptance that being on top of it all is simply not possible, and some acceptance that I can and should use specialists instead of trying to rely on myself.'
- 'It took me a good part of my training to realise that patients present with undifferentiated problems and in unusual ways, therefore it is simply not possible to always know what is going on!'

Value yourself appropriately

- 'Changing private billings led to more time with my patients and overall, better satisfaction for me and my patients.'

Have good people around you

- 'Have a good network of friends and colleagues you can discuss anything with.'
- 'Employ good people who know what they are doing and be prepared to pay them accordingly.'

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Resources

Mentoring and coaching

- Bayley H, Chambers R, Donovan C. *The Good Mentoring Toolkit for Healthcare*. Abingdon: Radcliff, 2004.
- Foster-Turner J. *Coaching and Mentoring in Health and Social Care: The Essential Manual for Professionals and Organisations*. Abingdon: Radcliffe, 2006.
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Self-care for doctors

- *RACGP General Practice Management Toolkit – Module 11 Managing the wellbeing of staff and self*.
- Clode D, Boldero J. *Keeping the doctor alive: A self-care guidebook for medical practitioners*. Melbourne: RACGP, 2005.
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Psychology resources and tools

- *Journal of Personality and Social Psychology*, www.apa.org/pubs/journals/psp/index.aspx
- The Australian Association for Psychological Type has a register of professionals with accredited training in MBTI, www.ausapt.org.au/practitioners/find-a-practitioner
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Work–life balance

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GP career opportunities

- The Australian Association for Academic Primary Care (AAAPC), www.aaapc.org.au
- JASON (a postgraduate scholarship search engine), www.jason.edu.au
- Australian General Practice Training (AGPT), www.gpet.com.au
- Australian Red Cross, www.redcross.org.au
- Médecins Sans Frontières (Australia), www.msf.org.au

General practice recruitment

- RACGP Classifieds, www.racgp.org.au/support/classifieds
- Medical recruitment agencies – Association of Medical Recruiters of Australia and New Zealand (AMRANZ), www.rcsa.com.au
- Medical Journal of Australia – Guide to medical recruiters, <https://www.mja.com.au/careers/recruiter-guide>
- The Royal Australian College of General Practitioners, www.racgp.org.au
- Australian College of Rural and Remote Medicine, www.accrm.org.au
- General Practice Registrars Australia, www.gpra.org.au
- Australian Medicare Local Alliance (AMLA), <http://amlalliance.com.au>
- Rural Workforce Agency Victoria, www.rwav.com.au
- General Practice Australia, www.gpaustralia.org.au
- Rural and Regional Health Australia, www.ruralhealthaustralia.gov.au
- Medical recruitment agencies – Association of Medical Recruiters of Australia and New Zealand (AMRANZ), www.rcsa.com.au
- Medical Journal of Australia Guide to Medical Recruiters, <https://www.mja.com.au/careers/recruiter-guide>

Support services for GPs

- R-cubed (Real Resilience Resources) is a website dedicated to supporting medical students, prevocational doctors, and GP registrars to become more resilient. It offers resources, inspiration and tips from other doctors on self-care, www.rcubed.org.au
- Australian Medical Association (AMA) doctors' advisory service & resources, <https://ama.com.au/doctorshealth>
- Doctors' Health Advisory Service, www.dhas.org.au
- General Practice Registrars Australia, www.gpra.org.au
- RACGP GP Support Program, www.racgp.org.au/yourracgp/membership/exclusiveoffers/wellbeing

Activity 2. Career planning

Career orientations inventory

Schein used the term ‘career anchor’ to describe an individual’s underlying motivation for their career satisfaction. As motivations arise from an individual’s values, career anchors can be used to identify what is important to you in developing and managing your career. Schein developed a questionnaire to help identify these anchors.

This questionnaire (adapted from Schein’s career orientations inventory) is designed to help you reflect on your career. It will not specifically show your career anchors but will give an indication of what they might be. Try to answer as quickly as possible with as much accuracy as possible.

For each of the 40 items, rate them from 1 to 6 according to your level of agreement. Enter the score in the column on the left.

Part A

Never true	Occasionally true		Often true		Always true
1	2	3	4	5	6

Using the above rating scale, score the following statements.

1	I want to be so good at my discipline that my expert advice will be sought continually
2	I am most fulfilled in my work when I have been able to integrate and manage the efforts of others
3	I want a career that will allow me the freedom to work my own way and on my own schedule
4	Security and stability are more important to me than freedom and autonomy
5	I am always on the lookout for ideas that will allow me to start my own business or develop an existing business
6	I will feel successful in my career only when I have made a real contribution to the welfare of society
7	I want a career in which I can solve problems or succeed in situations that are extremely challenging
8	I would rather leave my workplace than be required to compromise my ability to pursue personal and family interests
9	I will feel successful in my career only if I can develop clinical skills to a very high level of competence
10	I dream of being in charge of a large organisation and making decisions that affect many people
11	I am most fulfilled in my work when I am completely free to define my own tasks, schedules and procedures
12	I would rather leave a workplace altogether than accept a position that would jeopardise my longer term security in that organisation

13	Building my own business is more important to me than achieving a senior position in someone else's organisation
14	I am most fulfilled in my career when I have been able to use my talents in the service of others
15	I will feel successful in my career only if I face and overcome very difficult challenges
16	I want a career that will permit me to integrate my personal, family, and work needs
17	Being highly skilled in a medical discipline is more attractive to me than being a manager or administrator
18	I will feel successful in my career only if I become a senior manager/office holder in an organisation
19	I will feel successful in my career only if I achieve complete autonomy and freedom
20	I seek jobs that will give me a sense of security and stability

Never true	Occasionally true		Often true		Always true
1	2	3	4	5	6

Using the above rating scale, score the following statements.

21	I am most fulfilled in my career when I have been able to build something that is entirely the result of my own ideas and efforts
22	Using my skills to make the world a better place to live and work is more important to me than achieving a high level managerial position
23	I have been most fulfilled in my career when I have solved seemingly unsolvable problems or overcome seemingly impossible odds
24	I feel successful in life only if I have been able to balance my personal, family and career requirements
25	I would rather leave my organisation than accept rotational assignments that would take me out of my area of expertise
26	Being a manager is more attractive to me than being a senior practitioner in my current area of expertise
27	The chance to do a job my own way, free of rules and constraints, is more important to me than security
28	I am most fulfilled in my work when I feel that I have complete financial and employment security
29	I will feel successful in my career only if I succeed in creating or building something that is entirely my own idea

30	I dream of having a career that makes a real contribution to humanity and society
31	I seek out work opportunities that strongly challenge my problem solving and/or competitive skills
32	Balancing the demands of personal and professional life is more important to me than achieving a high level position
33	I am most fulfilled in my work when I have been able to use my special skills and talents
34	I would rather leave my organisation than accept a job that would take me away from clinical work
35	I would rather leave an organisation than accept a job that would reduce my autonomy and freedom
36	I dream of having a career that will allow me to feel a sense of security and stability
37	I dream of starting up and building my own practice
38	I would rather leave my organisation than accept an assignment that would reduce my ability to be of service to others
39	Working on problems that are almost unsolvable is more important to me than achieving a high level position
40	I have always sought out work opportunities that minimise interference with personal or family interests

After completing the score for each item, locate all of the answers you rated the highest. Pick out three items that seem most true for you and give each of these an additional 4 points. You can now score your questionnaire.

Scoring sheet

Transfer the scores from the inventory sheet A (above) into the boxes with the corresponding question number and then tally them to provide a total for the right hand column.

Career anchors	Enter your scores for each question beside the question number. Include the 4 bonus points you gave for each of the three strongest responses. Add the totals for each row in the right hand column.										Total
Autonomy/independence	Q3		Q11		Q19		Q27		Q35		
Security/stability	Q4		Q12		Q20		Q28		Q36		
Technical/functional competence	Q1		Q9		Q17		Q25		Q33		
General management competence	Q2		Q10		Q18		Q26		Q34		
Entrepreneurial creativity	Q5		Q13		Q21		Q29		Q37		
Service/dedication to a cause	Q6		Q14		Q22		Q30		Q38		
Pure challenge	Q7		Q15		Q23		Q31		Q39		
Lifestyle	Q8		Q16		Q24		Q32		Q40		

Part B – Schein’s career anchors

1. Autonomy/independence

The key motives for this anchor are freedom from organisational constraints in order to pursue professional or technical/functional competency. Organisational life is experienced as too restrictive, irrational and/or intrusive into one’s personal life. There is a need to be on your own, setting your own pace, schedule, lifestyle and work habits. There is little conflict about missed opportunities for promotion and little sense of guilt or failure about not aspiring higher.

2. Security/stability

People anchored in security tend to do what is required of them by their employers to maintain job security, a decent income, and a stable future in the form of flexibility to reduce work, retire and have adequate superannuation. These people will, more than others, accept the organisation’s definition of their career and have to trust the organisation to do the right thing by them.

3. Technical/functional competence

The primary concern in this area is the technical or functional content of the work being done. The self-image of people in this group is tied up with their feeling of competence in the particular area they are in. They are not interested in management per se, although they will accept management responsibility within their technical or functional area of expertise. But it is the area of work that really excites them and career growth means continued advancement within that work area only.

4. General management competence

This anchor is a combination of three competencies:

- analytical competence – the ability to identify, analyse and solve problems under conditions of incomplete information and uncertainty
- interpersonal competence – the ability to influence, supervise and lead people at all levels of the organisation toward the more effective achievement of organisational goals
- emotional competence – the capacity to be stimulated by emotional and interpersonal crises rather than exhausted or debilitated by them, the capacity to bear high levels of responsibility without becoming paralysed, and the ability to exercise power without guilt or shame.

5. Entrepreneurial creativity

This anchor is characterised by the overarching need to build or create something that is entirely your own product. People with this anchor find that none of the other anchors completely matches their key motives and values, but that there is a degree of overlap with several of the anchors, for example autonomy, managerial competency, freedom to exercise special talents, and a desire to build wealth for security.

6 Service/dedication to a cause

People in this group feel the need to maintain an adequate income and do something meaningful in a larger context. They are actively service oriented and interested in a career that provides solutions in areas such as product safety, overpopulation, inequality between the rich and poor, and the environment.

7. Pure challenge

People in this group define their career success by overcoming impossible odds, solving the unsolvable problem and winning out over the competitors.

8. Lifestyle

People anchored in lifestyle want and need to integrate their personal and family concerns into their career. They look for balance of work and social life. People who anchor in lifestyle also value their autonomy and have, in many cases, a high concern for independence.

Part C

From your questionnaire score sheet, and with consideration for the explanations of Schein's career anchors in Part B, rate your career anchors on a scale from 1 to 5. More than one anchor can be entered at any level of importance.

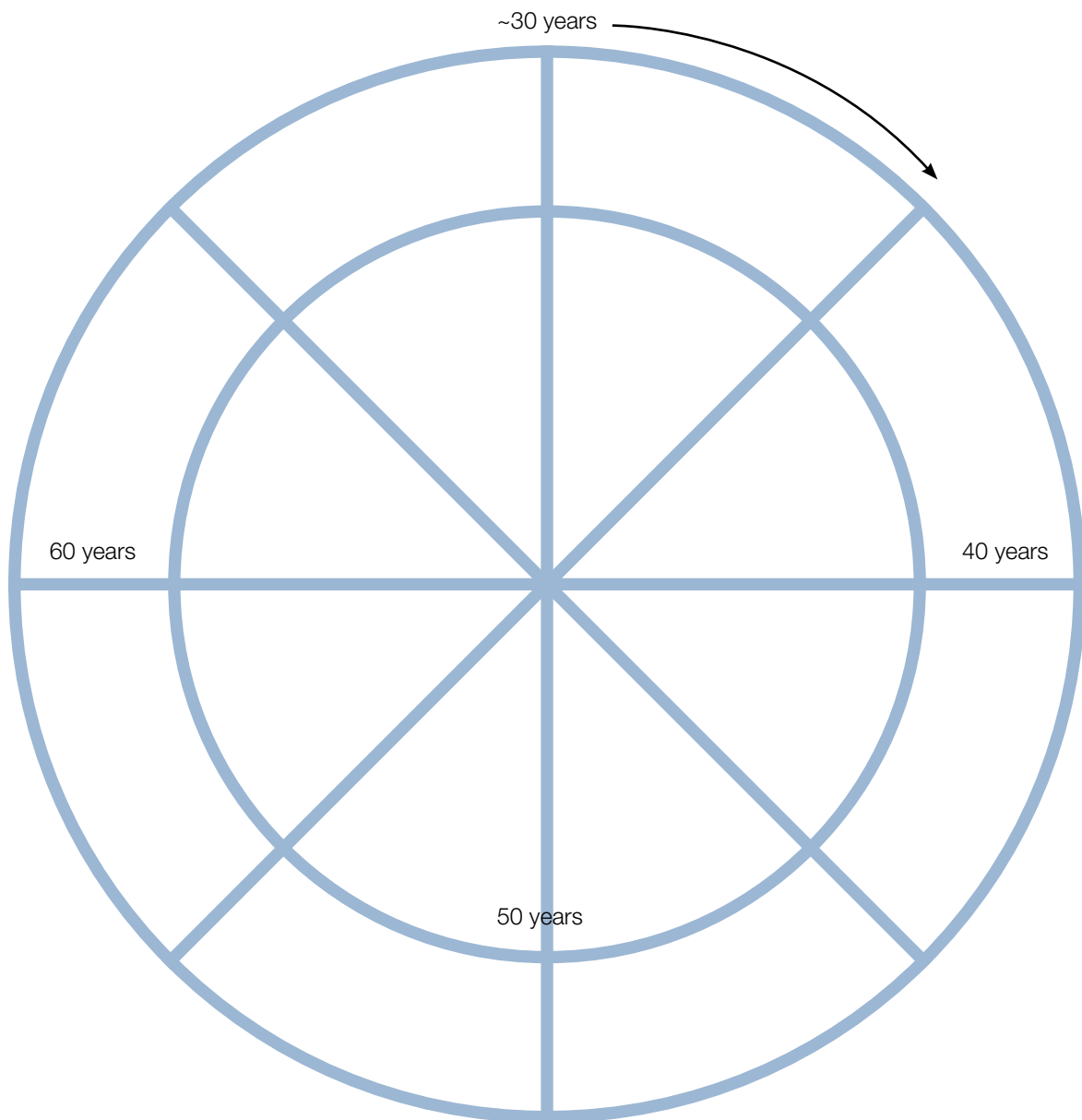
Importance 5 = most important 1 = least important	Career anchors
5	
4	
3	
2	
1	

Activity 3. Life stages impact statement and personal values inventory

Using the diagram below, chart your personal life stages, starting from recently qualified GP and moving clockwise over 5 year intervals.

Part A – Plotting your life stages

In the inner circle below, write down your personal life stages over 5 year intervals, followed by your professional life stages in the outer ring.



Example only	
Personal life stages	Professional life stages
Purchase house	FRACGP/further study
Marriage	Reduction in hours
First child	Increase in work hours
Last child	
Last child turns 5 years of age	
Travel overseas/long service leave	
Children leave school	
Children leave home	

Now that you have plotted your stages, go through each stage bearing in mind the following questions:

- Are they compatible in terms of time required?
- Are there opportunities (synergies) or conflicts between your personal and professional aspirations?

The quality of your professional and personal life may be decreased by competing demands and stages.

Activity 4. Personal values inventory

Consider the following list of attributes and add any other values important to you. Mark the 10 items that you care most about. Rate these with a score out of 3.

(Scale: 1 = generally important, 2 = very important, 3 = absolutely important)

Aesthetics	Appearance	Arts
Health	Play	Pleasure
Tradition	Financial security	Wealth
Power	Teamwork	Competition
Recognition	Public service	Security
Authority	Wisdom	Influence
Stability	Helping	Rationality
Creativity	Nature	Knowledge
Competence	Achievement	Environment
Loyalty	Self-acceptance	Family
Honesty	Marriage/partnership	Fairness
Courage	Challenge	Friendship
Spiritual growth	Intimacy	Belonging
Community	Peace	Religion
Freedom	Justice	Forgiveness
Tolerance	Adventure	Perseverance
	Integrity	

List your top three – these represent your core personal values.

1.	
2.	
3.	

Step 2. From the career orientation inventory, list the career anchors you believe to be important in guiding your career.

My career anchors

Step 3. What personality attributes do you possess from your Myers-Brigg Personality Inventory (if you performed this)?

My personality attributes

Vision

Vision is how you see your future personal and professional life. Your values will influence your vision for your future. In turn, articulating your vision may also inform you about your true core values. It is important to be realistic in your vision. It is something which you must believe to be achievable and will take deliberate actions to realise.

A vision will sustain effort over a long period. However, it need not be a fixed view of the future. As you develop your plan there will need to be re-assessment of your vision as a result of your analysis and changes in your situation.

Record your vision for your personal and professional life.

SWOT analysis

SWOT is a tool used in business as a method of analysing the internal environment (strengths and weaknesses) and the external environment (opportunities and threats). You can use this matrix to consider aspects of your personality, competencies, clinical skills, health and significant relationships, as well as how the environment for medical practice may present opportunities and threats.

My strengths	My weaknesses
Opportunities	Threats

Feedback from others

Getting feedback from others is an important element in managing life and can also provide valuable information in developing and managing your career. The ‘Johari window’ was described by Joseph Luft and Harrington Ingham to describe how things that we know about ourselves may be known (public) or unknown to others (private) and that others may know things about us that we are unaware of (hidden).

Johari window

	I know	I don't know
Others know	Public	Hidden
Others don't know	Private	Unknown

360 degree feedback

Tools are available to assist with getting feedback from others that improve knowledge about yourself. 360 degree feedback is a multi-rater assessment tool that provides feedback from supervisors, colleagues, employees and clients. Increasing knowledge in this way may reveal unknown strengths and weaknesses as well as reinforcing or correcting existing knowledge about oneself. It can be challenging to ask for this form of feedback; but feedback can be valuable.

Develop a list of items you would like to get feedback on and ask a range of people to provide this to you verbally or using a questionnaire.

1.	
2.	
3.	
4.	
5.	

Needs analysis

Needs analysis identifies gaps between the current situation and the desired situation (your vision). This will assist with the development of a learning plan as well as personal and practice issues. Take a holistic view of your professional career including aspects such as health, relationships, workplace, workload and recreation.

From the previous activities, list the areas important for you to develop, change or maintain.

Issue	What is the gap between your current situation and your desired future?

Goals

Goals describe the outcomes you will achieve through deliberate action. Setting goals increases your motivation when the outcome is perceived as worthwhile. SMART is a useful acronym in setting goals – specific, measurable, appropriate, realistic and time defined.

Use the tables below to set out your goals.

Goal	Date
Actions 1. 2. 3. Resources required	
Outcome measure (target)	Review date
Results	

Goal	Date
Actions 1. 2. 3. Resources required	
Outcome measure (target)	Review date
Results	

Goal	Date
Actions 1. 2. 3. Resources required	
Outcome measure (target)	Review date
Results	

Goal	Date
Actions 1. 2. 3. Resources required	
Outcome measure (target)	Review date
Results	

Summary

List the three most important things you have learned about planning your general practice career.

1.	
2.	
3.	



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