

Curriculum vitae (CV) inflation

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James' interest in medical education, especially that of early career doctors, grew during his role as the Director of Prevocational Education and Training at Royal Prince Alfred Hospital, Sydney, from 2008 to 2014. This led to his current role as the NSW Prevocational Training Council Chair at the Health and Education and Training Institute (HETI). James works clinically as an Emergency Physician at Royal Prince Alfred Hospital and is Director of the Department. The need to better prepare students for their first years of practice led James to take on the role of the Chair of the Sydney University Pre-internship (PRINT) block in 2012. James has a Masters in Medical Education from the University of Sydney. When not being a husband, father to two beautiful girls, juggling his multiple roles he loves to watch the Adelaide Crows (AFL) win and play tennis.

What is CV inflation?

During my years working as Director of Prevocational Training at a tertiary hospital, I have reviewed many resumes and curricula vitae (CVs) and noted a relatively recent phenomenon; **CV inflation**. CV inflation is similar to **credential creep** (1) whereby the credentials required for a certain position are increasing. This may happen when a professional organisation increases the entry to practice requirements for the profession. Alternately, it may be the result of "one-upmanship" among candidates for a job, creating a kind of de facto increase in required credentials for a position. The latter is currently occurring in selection to vocational training.

What are the driving forces behind CV inflation? Most significant is the expanding number of medical graduates and junior doctors without a commensurate increase in the number of vocational training places. Competition for limited places has led junior doctors to look to improve their CVs to give them an edge. That has led similar junior doctors to do the same, what Dr Tim West (NSW JMO Forum Chair) describes as an **"arms race"**.

Selection into vocational training is a high-stakes decision and to ensure fairness, accountability and transparency the selection process has become increasingly standardised. CV inflation is a potential unintended consequence. Historically, selection was based on a group of consultants' global judgement of a junior doctor through working with them rather than the content of their CV. We still try to replicate this through rating scales and structured references (albeit self-selected). But it is hard to discriminate between two candidates, especially junior doctors, who are likely to have had similar clinical experience.

Should junior doctors do a postgrad degree?

Junior doctors have recognised that the easiest way to distinguish themselves from a colleague is to have a stronger CV. This has led to resume building and junior doctors to undertake Master's degrees, research and courses to boost what can be measured within a reductionist system for selection.

A further postgraduate degree is an expectation for many vocational training programs despite it not being officially recognised in the position requirements. This is based on an underlying assumption that the acquisition of an extra qualification is positively correlated with greater ability.

But do they make you a better doctor? The answer probably lies in how you view the qualities of a medical practitioner. Excellent clinical and procedural skills, clinical reasoning and decisions are still highly desirable qualities for future vocational trainees. Those skills are predominantly learnt on the job and supplemented with study on clinical topics. However, there has been greater recognition of the different roles of the doctor through influences such as the [CanMEDS framework](#) (2) (medical expert, communicator, collaborator, health advocate, scholar, leader, professional). The CanMEDS framework forms the basis of the selection criteria for most vocational medical programs including basic physician and surgical training in Australia. It is within the areas outside of the medical expert that doctors are trying to improve their CVs to find an edge and where postgraduate study and courses provide the most value.

Meeting the job selection criteria

A way of getting ahead (or keeping up) is to ensure that you have met as many of the job selection criteria as you can. For instance, you may need to show evidence of involvement in [quality safety projects](#), teaching, community involvement, advocacy and leadership depending on your career choice. Demonstrating a breadth of skills and knowledge is usually required for entry into a vocational training program. Interestingly, this contrasts to future success in gaining consultant positions where developing a reputation of having expertise in a specific area is desirable.

On a personal note, I commenced my career as an ED consultant doing a bit of everything (teaching, research (not much!), QA, administration, etc.) in a variety of clinical areas. After a number of years as a consultant I recognised that my lack of focus was holding me back. I now mentor senior trainees and junior consultants that they need to look and find a niche and concentrate their limited clinical and non-clinical time on a specific area of interest to thrive in the longer term.

The risks of CV inflation

If this competition for vocational positions is driving doctors to improve their training and education, then why am I concerned about CV inflation? Because CV inflation is potentially associated with risks to the junior doctor.

1. There is the potential for there to be a devaluation of job and work experience with junior doctors focusing on boosting CVs rather than spending time with patients and consolidating learning on the job.

2. There is [the risk of burnout for junior doctors](#). The increasing competition and uncertainty around gaining a vocational place is a developing stress for junior doctors. If junior doctors' spare time is spent improving their CV in addition to a busy clinical workload there is little time to exercise, catch up with friends and do nothing (without the nagging feeling that you should be doing something work-associated).
3. CV inflation reflects a selection process that motivates junior doctors to respond to the external reward of building an impressive CV and ticking the boxes rather than fostering internally motivated, self-direction and passion.
4. Completing a postgraduate qualification at the wrong time in your career. I completed a Master's in Medical Education as a consultant and this was in the context of working as a Director of Prevocational Education and Training and having taught registrars, junior doctors and medical students for over 10 years. I cannot imagine undertaking the course without that experience which influenced, situated and integrated my ongoing learning. However, universities are recognising that there is a demand for postgraduate qualifications for the prevocational doctor and are basing courses for this stage of junior doctors' careers.

What matters most to senior clinicians?

For junior doctors caught up in this arms race, I can reassure you for most senior clinicians the presence of a postgraduate qualification, clinical audit or research publication, in addition to your medical degree and clinical experience, has little influence on your suitability for vocational training. What matters most to senior clinicians? We expect that we can trust your judgement when you call us in the middle of the night; we want you be reliable and punctual; to [work well within a team](#) and [communicate effectively and sensitively with patients](#). Vocational colleges are recognising that a combination of CV, references and interviews is required to capture these characteristics.

I would suggest that CV inflation is more to do with junior doctors' understandable fear that without ticking every box they will miss out on a position. Does this mean that you can spend your weekends relaxing and ignoring your CV? Unfortunately, not. But your clinical competence and performance is pivotal for your future career success and you should not neglect these duties for courses/QA/research to build your CV.

Will CV inflation stop any time soon?

Postscript

This blog was originally published on Sunday 26 April 2015.

References

1. Wikipedia, [Credential creep](#).
2. The Royal College of Physicians and Surgeons of Canada, [CanMEDS framework](#).

Useful resources

- Podcast: Top 5 mistakes junior doctors make with their Cvs
- Podcast: Job interview preparation
- Blog: Should I do a Master's degree?

Related Blogs

- [Top 5 mistakes Junior Doctors make with their CVs](#)
- [Onthejobs Blog #3 - Curriculum Vitae](#)

Related Podcasts

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