

# House of God Rule #15: Part 3 - Planning ahead

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***“Planning ahead is essential, but from the vantage point of medical school or your JMO years it can look impossible because so many things about your career are uncertain. There are, however, many things between you and goals that can be known now.*”**

***With all the information available there is really no excuse for being surprised by a training program.”***

Welcome back! If you're just joining us for the first time, this series is written by two consultant physicians where we discuss what we've learned about planning for, and achieving, a happy work-life balance in Medicine - no matter what that means to you.

In [Part 1](#) we introduced ourselves and discussed the importance of sharing. In [Part 2](#) we covered being realistic about the benefits and costs of work-life balance and how to judge whether or not that opportunity you've just been offered is a *good* one.

In Part 3 we're going to try and convince you of the importance of planning ahead, some of the things to consider, and one way to make a plan.

## Planning ahead

Planning ahead is essential, but from the vantage point of medical school or your JMO years it can look impossible. There is uncertainty about your jobs, terms, geographic locations, shifts, opportunities and perhaps (commonly) [what you even want to do with your career](#).

No matter what you choose, there are many things between you and that goal which can be known now. For example, all the possible training pathways ahead of you have already been described. There are other things you can predict as well - more below.

The *reason* to plan ahead is that it informs all the other decisions you make; when to say 'yes', when to say 'no', what trade-offs to make and when to achieve your ideal work-life balance. Among other benefits, planning ahead led us to load shift-work-intense and [rural terms](#) early in our Advanced

Training before we had children, which left us mostly business-hours terms close to home once they arrived. (We didn't manage to time it perfectly because you just can't control everything, but we did get a lot of tricky training out of the way before kids).

We're suggesting you plan ahead in three parts:

## Part 1: Choose your own adventure

It's perfectly normal not to know exactly what you want to do with your career as soon as you've left medical school. There are many successful people who have ended up in their final profession after meandering down a few pathways. Having a destination in mind does help a lot though.

One thing a lot of career advice we've received omits or touches upon only lightly is consideration not just of what you'd like to do at *work* but how that's going to affect what you do at *home*. When you think about what career you'd like, make sure you also consider the following:

1. What kind of life outside of work would you like?
2. What are your non-work goals?
3. Would you like to work full-time or part-time, business hours or shift-work?
4. How much flexibility do you want in on-call, overtime, weekend work and for taking time off to have children or travel?

If some of these are tricky questions and you're not sure yet – that's ok! Speak with your family and friends, colleagues, take some time and look around at your options.

## A note on planning your career

There are plenty of resources available which can help you imagine what life might be like in different specialties. Some of the ones we have seen and used include:

- [Careers evenings held by hospital networks, the AMA and some Colleges](#)
- [Meetings with your director of training or term supervisor](#)
- [Coffee with registrars already in a specialty you are interested in](#)
- [This article on how to choose your specialty \(with lots of useful links\)](#)
- [This NSW guide to workforce planning, which tells you how many existing specialists there are in each field and what the predicted demand will be over the next 10 years](#)

## Part 2: Common hurdles

No matter which training program you choose, the 3-8 years from internship are going to include some or all of these hurdles:

### 1. Exams

Hard ones with much-lower-than-you'd-think pass rates (just 50% pass both parts of the Physician's exam the first time) and much-longer-than-you'd-think preparation times (up to 12 months or more of serious after-hours study).

Also, they are usually *expensive*, and may include the cost of preparation courses.

### 2. Blocks of inconvenient shift work or rural time

### 3. Mandatory training in a variety of geographically diverse hospitals or practices

### 4. Research projects

### 5. Career-building activities unrelated to mandatory training requirements, but which are required to earn future employment

These might include, but are not limited to:

- a) presentations, audits, conferences, courses, case-reports or research
- b) all with significant time, and sometimes financial, implications
- c) again, see [Part 2](#) of this series for our guide to navigating these

## 6. Finding employment

There can be a surprisingly large difference between the requirements for *training* and those for *employment*. Consultant specialist positions in the capital cities are increasingly tough to get. If you decide to become a specialist you may need (or choose) to work in private practice, live rurally, spend time in teaching, research, or earning a PhD or international fellowship to secure a job. Other training pathways might lead you to work in the community, non-government organisations, a lab or non-medical workplaces.

Whether it's a training position or a consultant job, finding employment takes time, energy and preparation. You'll need to plan for it.

You might not be sure exactly *when* these hurdles are coming, but it's likely that they will.

## A note on being informed

With all the information available there is no excuse for being surprised by training program requirements. If a training program includes mandatory rural terms, think about how you'll manage those if you have children and your partner can't leave their job in the city for 6-12 months.

If the College documents specifying the training pathway you are interested in are incomprehensibly complex, go and find a sympathetic trainee already in that program and ask them. As discussed above, senior trainees can be a wonderful asset – they know the program, have ideas about spoken and unspoken employment requirements and best of all they don't fill in your term assessments or sit on interview panels.

If you don't know what you'd like to be as a consultant, get informed for all the programs you're interested in. Do it now. No wait – finish this article first, *then* do it. Both are important.

## Part 3: Putting it all together

There are many different ways to put it together but this is ours. We started our planning two years before our physician's exam and we've revised the plan every year since. It doesn't really matter where you are now though – what matters is where you would like to end up.

1. Use Part 1 of this article to pick the specialty you're most interested in at the moment. Make sure you list all the things outside of work you're hoping to achieve in the next five to ten years – holidays, children, hobbies, study, etc.
2. Find out as much as you can about the requirements for *training* and *employment*, using the list of common hurdles in Part 2 of the article as a guide to which questions to ask.
3. Use a table like the one below and fill in the hurdles and life goals for every year for the next five to ten years. If you can predict income and expenses (buying real estate, weddings, courses, lost wages while travelling or off with children, etc.) add them in too.

Scenario 1	2016	2017	2018	2019	... 2025
My Age	Eg: 26	27	28	29	...35
Training Requirements	Eg: shift work, rural time	Exam preparation	Exam year, rural time	Parental Leave ?Re-sit exam ?Research	?Employment ?PhD
Non-Work Goals	Eg: buy an apartment	Health, relationships	Post-exam baby	Baby	Family, Hobbies
Income and Finances	Eg: Full income, new mortgage	Full income, exam prep costs, mortgage	Full income, exam costs, baby costs	Lost income, mortgage, baby costs	?Part-time income

## Identify conflicts and different scenarios

Many people find this exercise confronting. It can bring up some uncomfortable conflicts between our imagined work and personal lives in 5-10 years. If it all fits perfectly – congratulations! If there are serious conflicts – that’s ok. At least you have identified them. Take some time to mull over them. Chat to your family, friends or a supportive colleague. There’s always a way through.

Try out different scenarios based on different training programs, or different numbers of children, or bringing forward or delaying your passion project outside of Medicine. Career planning like this should be an essential part of term supervision and trainee mentoring, but often it’s not. If you have or [find a mentor](#), discuss your plans with them.

There’s always a way through. It might require “[Being Realistic](#)”, “[Making Good Choices](#)”, “[Saying ‘No’](#)” or “[Asking for What You Want](#)”. It will probably have [financial implications](#). We’ll cover all these things right here. See you in a month.

Good luck out there.

Bridget and Chris

## About Chris and Bridget

We’re two consultant physicians sharing what we’ve learned about achieving work-life balance in Medicine.

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