

Faculty Development – Careers support

Defining the territory

Pick up a book or article on the provision of career support, and you might see all sorts of different terms used, such as career information, career advice, career guidance and career counselling. The Glossary gives [The Learning and Skills Council](#) definitions of the three terms ‘career information’, ‘career advice’ and ‘career guidance’. In addition, a definition of ‘career counselling’ taken from Kidd (2006) is also included.

But to begin with it is helpful to think about how these terms map on to the task of providing career support to medical students and trainee doctors.

Career information

In a medical context this might include the provision of career-related information in the medical school or postgraduate centre library, as well as online information on deanery, Royal College, British Medical Association and NHS websites. It also includes purpose-built resources such as the specialty choice inventory, Sci59.

Career advice

In a medical context an example of career advice would be a medical student/trainee asking their educational supervisor to clarify something they have read, or information they have been told about by another consultant. The student/trainee doesn't need help working out the personal significance of this information once the particular point has been clarified.

Career guidance

A medical example would be a student/trainee bringing their learning portfolio to their educational supervisor or the Director of Medical Education and asking for help in deciding on the next stage of their career. They know that they don't want a career in any of the surgical specialties, but beyond that, they haven't yet made up their mind.

Career counselling

A medical example would be a series of meetings between a qualified careers professional and a student/trainee who is contemplating leaving medicine.

Two further points

In real life these activities often overlap, so in a given session an educational supervisor might be providing all four types of support.

The use of counselling skills such as respecting the autonomy of the client, active listening and reflecting back can be used in all these activities and is not restricted to the provision of career counselling. Counselling skills can also be used when providing advice and guidance. See Teachers' toolkit and Ali and Graham (1996) for a clear account of the use of the counselling approach to career guidance.

Explaining the need

With the introduction of the UK Foundation Programme in August 2005, junior doctors were required to make major career decisions 18 months after finishing their undergraduate training. Yet prior to the introduction of Modernising Medical Careers (MMC), the majority of junior doctors still did not regard their career choices as definitive three years after leaving medical school (Goldacre et al., 2004).

Currently it is unclear what changes will be implemented in light of the [recent inquiry into MMC](#). However, the recommendations highlighted the need for accurate information about the competitiveness of different specialties and also for greater access to career advice at undergraduate level. This accords with earlier studies that demonstrated that medical students and junior doctors tend to view the quantity and quality of career support they receive as inadequate (e.g. Lambert et al., 2000; Jackson et al., 2003; Lambert and Goldacre, 2007).

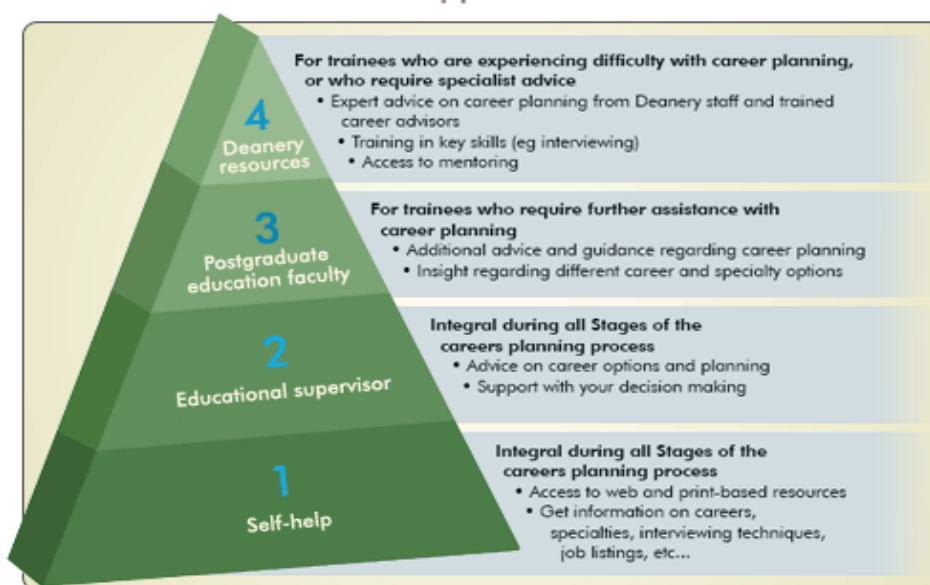
Who should provide support?

A study of medical students and junior doctors carried out in 2003 found that the most frequent source of career advice was senior doctors (Jackson et al., 2003). Prior to MMC, there was minimal training available for clinicians in how to provide career support. Since the inception of MMC, training initiatives have begun to be provided for educational supervisors, and more comprehensive courses are on offer for clinical tutors and other designated faculty members. Qualified careers advisors have also been appointed in many regions. So the next question to consider is ‘Who does what?’

Tiers of support

The notion of tiers of support can be helpful.

Tiers of Career Support for Junior Doctors



With this model all educational supervisors should have access to some basic training in providing career support (such as this module). Trust-based clinical staff with additional educational responsibilities can take referrals from educational supervisors and this will be sufficient for the majority of trainees. But those trainees who need specialist career support can be referred to the deanery or university careers service.

A framework for career planning

In a large-scale research study of work-based career discussions, Hirsh et al. (2001) found that if the providers and recipients of career support shared a common framework, the recipients thought the discussions were more useful. The implication of this for practice is that students/trainees are most likely to find the career support you provide helpful if you are both working from the same framework.

Just as there are lots of different models of patient consultation, so too are there different approaches to career support. But the four-stage model outlined below is the one that is most commonly used in higher education.

- Stage 1 Self-assessment
- Stage 2 Career exploration
- Stage 3 Decision making
- Stage 4 Plan implementation

Using this four-stage framework, and sharing it with your trainee, helps you approach the task of providing career support in a systematic way. So, for example, if a trainee comes to you asking for help with their CV (a Stage 4 task), you need to establish whether they have spent adequate time on the previous three stages and that their career decision is robust. Similarly, poor career decision making (Stage 3) often rests on inadequate self-assessment and career exploration (Stages 1 and 2).

Bearing in mind the importance of the model, in your first session with a new trainee it is good practice to check their understanding of the four-stage framework. It is also useful to ask your trainees to bring their learning portfolios and career-planning folders to all of their meetings with you. This will help them to review their work and facilitate the development of a systematic approach to career planning.

Each of the four stages will now be explained in further detail.

Thinking points

- Thinking back over the career decisions you have taken to date in your own career, identify one that you feel (in retrospect) worked out well. With this decision in mind, think about how you approached each of the four stages: self-assessment; career exploration; decision making; and plan implementation.
- Now see if you can identify a career decision that you feel, in retrospect, didn't work out so well. With this decision in mind, think again about how you approached each of the four stages.
- From this personal comparison of two previous career decisions you have taken in the past, what observations can you make about the four-stage model?

Stage 1: Helping the trainee with self–assessment

There are a number of different aspects that each student or trainee could consider as part of the self–assessment phase. Moreover, for each aspect there are different possible ways of carrying out the self–assessment. As a bare minimum, you should encourage your student/trainee to reflect on:

- achievements/skills/interests
- aspects of work they find particularly stressful
- work values.

Self–assessment resources

Some medical schools and postgraduate education centres provide career–planning workshops in which students/trainees are given an opportunity to complete various self–assessment activities. But if this doesn't happen where you work, at the end of this module there is a list of self–assessment resources to which you can direct your student/trainee. Encourage them to get hold of at least one of these publications (they should be in the medical school or education centre library), work through the exercises in their own time and then bring the exercises to your supervision session.

But don't waste your supervision session by getting the trainee to complete self–assessment exercises during the session itself. Instead, the supervision session should be seen as a time for facilitating and deepening the learner's understanding of themselves, using the self–assessment exercises they have previously completed as a starting point or prompt.

The questions listed below give a flavour of the sorts of question you could pose to a student or trainee about their achievements, skills and interests.

- Using the results from an exercise where you examined specific achievements to tease out the underlying skills, what key skills did you identify?
- Of these skills, which are you particularly interested in using at work?
- How does your list of key skills tally with any relevant assessments that have been carried out at medical school, or as part of the foundation programme?
- Are there any key skills you are not currently using at work that you would like to be able to use to find work more satisfying?

You should pose similar sorts of question to help your trainee explore other self–assessment exercises they may have carried out, for instance on work values or on aspects of work that they find particularly

stressful.

What about psychometric testing?

Some trainees struggle with the self–assessment exercises or, having carried them out, have difficulty using the results to identify possible career options that might suit them. For these trainees, completing a personality assessment such as the Myers–Briggs Type Indicator, or an interest inventory such as the Specialty Choice Inventory Sci59, can be useful.

But it is important to be clear about what psychometric tests can and cannot tell you. So, for example, in their review of the literature on personality tests and medical specialty choice, Borges and Savickas (2002) concluded that:

- there is more variation in personality traits within medical specialties than between them
- all personality types appear in all specialties
- more than one medical specialty fits the personality of any particular medical student.

These authors recommend that completing personality tests should be used as a way of increasing self–knowledge, rather than as a diagnostic process that will “match” a particular personality to a particular specialty.

Similarly, if your student/trainee decides to complete Sci59, the resulting print–out should be regarded as a list of possible careers they might want to explore further, rather than as a “diagnosis” of specialties that will definitely suit that particular individual.

Ultimately, what a trainee will get out of completing a particular psychometric test is highly dependent on the skills of the person who is giving them test feedback. If that person challenges them to think about the ways in which the results of the test accord (or don’t accord) with their other self–assessment activities, and if they are appropriately aware of what a psychometric test can and cannot tell somebody, then the process can be useful. But if the person giving feedback doesn’t approach the task in this way, completing psychometric tests can at best be useless and at worst misleading.

Stage 2: Helping the trainee with career exploration

The key task for you at this stage is to encourage the student/trainee to conduct a thorough, systematic exploration of different career options that might interest them before they make any final decisions.

At the outset, it can be helpful to remind them of the following.

- Career exploration takes time. If they want to end up with a robust career decision, they need to start early enough and devote sufficient time to the task.
- Career exploration doesn't take place in a vacuum. Instead, just as pointers you hear while taking a patient history will lead you to carry out certain clinical examinations, factors the student/trainee comes to realise about themselves from the self-assessment phase should influence the particular questions they research in the career exploration phase.
- Career exploration can start with written materials (books, articles and the Web) but needs to extend beyond this, to talking to people who are currently working in the particular specialty the trainee thinks they might want to pursue
- Even if they think they know what they want to do post-foundation, they still need to go through the career exploration phase. This is because being able to articulate their particular skills, abilities, interests, etc., from Stage 1 and then linking this systematically with the demands of a particular specialty (Stage 2) forms the basis of providing solid answers on written application forms, or at interview.

Where your trainee can get information

As a starting point, they can look at:

- deanery and Royal College websites
- [BMJ Careers](#), which contains articles on all the different specialties, and on a variety of other relevant career issues affecting doctors
- [medical career guides](#).

Beyond this initial reading, you want to encourage your students/trainees to talk to at least two people who are currently working in that specialty before they make any major career decisions. Moreover, they shouldn't just have a random chat with these people; instead they should plan what specific questions they wish to pose, based on their understanding of the personal factors that are key for them in a career (i.e. based on their Stage 1 self-assessment activities).

You can also encourage your students/trainees to look at the key journals in their area of interest and spend some time looking through recent

issues. Remind them that many of the articles will be too specialised, but they can still look at the journals and ask themselves whether they are gripped and intrigued by the articles, or whether they leave them somewhat cold.

Tasters

Undoubtedly the best way to find out if you are suited to a particular career option is to try it out. Medical students have options such as electives or special study modules, which may provide opportunities for exploring career options in subspecialties and different clinical or laboratory settings, and for extending a placement in an area in which they have already worked. Some trainees will be able to try out a career option, as they will be applying for an option they worked in during one of their foundation placements. But if this wasn't possible (either because there are no foundation placements in that specialty, or because the trainee didn't succeed in getting that particular placement) then they should try to arrange a 'taster' week. And if that fails, then in your role of educational supervisor you need to encourage the trainee to talk to as many people as possible in that specialty and complete the Stage 1 and Stage 2 activities as carefully as possible, to maximise the chances that they are making a robust decision.

Stage 3: Helping your trainee with career decision making

The next two stages are more relevant to trainee doctors than medical students, as the latter group are not immediately faced with making major career decisions. But they will be useful for anyone involved in the supervision of a student or colleague faced with a difficult decision.

There are two related ways in which you can help a trainee with their career decision making. First, it can be useful to encourage them to think about how they have made critical decisions in the past, i.e. you may want to spend a bit of time exploring the process of career decision making.

Second, you need to help your trainee with an in-depth exploration of the actual content of their career decision making, i.e. what it is they have actually decided to apply for next.

The process of career decision making

The simplest way to explore this with your trainee is to ask them about any previous important decision that they feel, in retrospect, worked out well. It doesn't necessarily need to be a career decision. Ask them about what made it a good decision, and how they went about reaching that particular decision.

You can then do the opposite, and see if they can identify a decision that they now think didn't work out so well. What can they learn from this example about how not to make an important decision in future? You might wonder about the sorts of issue that emerge from asking these questions. Typical answers might be that they rushed through the decision, that they let themselves be unduly influenced by key people in their lives, that they ignored a strong gut feeling, etc. Insights like these can be useful to highlight, as they can form the basis of personal guidelines on how best to approach a career decision in future.

Crux time: making the decision

The ROADS acronym (Elton and Reid, 2007) can be used to structure a discussion about the robustness of a career decision. Specifically, you can ask your trainee the following questions.

- **Realistic:** are you being realistic about yourself and about the demands of the job?
- **Opportunities:** have you given serious consideration to all the opportunities available?
- **Anchors:** have you built in the things that provide support in your life?
- **Development:** do your choices fully develop your potential?

- Stress: have you considered those aspects of work that create particular stresses for you?

When discussing the ROADS criteria with your trainee, it is helpful if you not only draw on the self–assessment ([Stage 1](#)) exercises, but more generally that you ask them to show you evidence from their learning portfolio that demonstrates the robustness of their career planning.

A plan and a back–up

Borges et al. (2004) in a study of medical specialty choice concluded:

Early in their training medical students should be disabused of the idea that there is one perfect specialty choice for each person. Instead, they should be helped to understand how they could use different specialties to construct satisfying and successful careers.

It is therefore sound practice to encourage your trainees to have a back–up plan (preferably in a less competitive specialty) that they would be happy to pursue if they are not successful with their first–choice option. It is often worth reminding students/trainees that the notion they will only be happy in one specialty is not borne out by the psychological literature on medical specialty choice.

And the trainee who is seriously considering leaving medicine

In your role of educational supervisor, your first task is to explore whether there are some educational difficulties in the student or trainee's current placement or current mental or physical health issues that are contributing to the situation. In both of these situations you should liaise with the local training programme director in the first place.

If it seems that lack of educational support or health issues are not the issue, then you would be well advised to suggest that your trainee seeks specialist career support. This could be ‘third–tier’ support (see [Tiers of support](#)), or it could be provided by a suitably qualified private career specialist. The resources at the end of the module offer suggestions on how to access private career support.

Stage 4: Helping your trainee with planning implementation

The focus of your support at this stage should be on encouraging the trainee to give adequate attention to completing their application forms or CVs and also preparing for the interview process.

How much help is it permissible to give?

Whether or not you are involved in shortlisting or interviewing, it is certainly permissible for you to help your trainee plan Stage 4 appropriately. The sorts of issue that you might want to discuss with your trainee include the following.

- The practicalities of the application process. These include: how many applications they can submit; deadlines, and when they need to start drafting answers/their CV in order to meet them; and the importance of reading through forms extremely carefully before they start writing a single word.
- Looking at the process from the recruiter's point of view. This involves tailoring application form answers or one's CV to the person specification. But it doesn't involve simply re-iterating the person specification, which is irritating in the extreme for the reader.
- Checking and double checking. Spelling or grammatical mistakes give a sloppy impression, and even if they don't involve the loss of marks, they convey the message that the candidate does not always pay adequate attention to detail.
- Plagiarism. The trainee needs to look at the advice that has been given as part of the application process and then adhere to it. If they have to sign to confirm that a given answer is their own work and it later transpires that it was written by somebody else, then their application would be in jeopardy.

Beyond this initial support, you can look at CVs or draft application forms and make general comments. For example, "I don't think that you have adequately answered the second part of the question" or "You could give a bit more detail about the practical implications of your audit project". But you should avoid suggesting specific wording for an application form or CV.

If you are going to be involved in shortlisting or interviewing then it is probably advisable to suggest that your trainee has a more detailed conversation about their application or the interview process with another colleague.

Useful resources

The [resource section](#) contains a list of resources that the trainee can consult to help them with written applications, and also when preparing

for interviews.

Interview preparation

Encourage your trainee to think through the sorts of question they are likely to be asked at interview and prepare strong answers to them. They can also prepare a small number of examples (taken from their learning portfolio) that clearly demonstrate their key skills and abilities. In addition, they should have thought through some examples of areas in which they are weaker, or of mistakes they have made in the past and what they learnt from them.

If you are not involved in the interview process, then you might want to provide a 'mock' interview with a trainee, or group of trainees.

How to support a trainee who consistently underperforms at interview

The first task is to identify the roots of the problem. Did they prepare adequately for previous interviews? Have they done sufficient background reading on how best to prepare for an interview (see [References section](#) for useful resources).

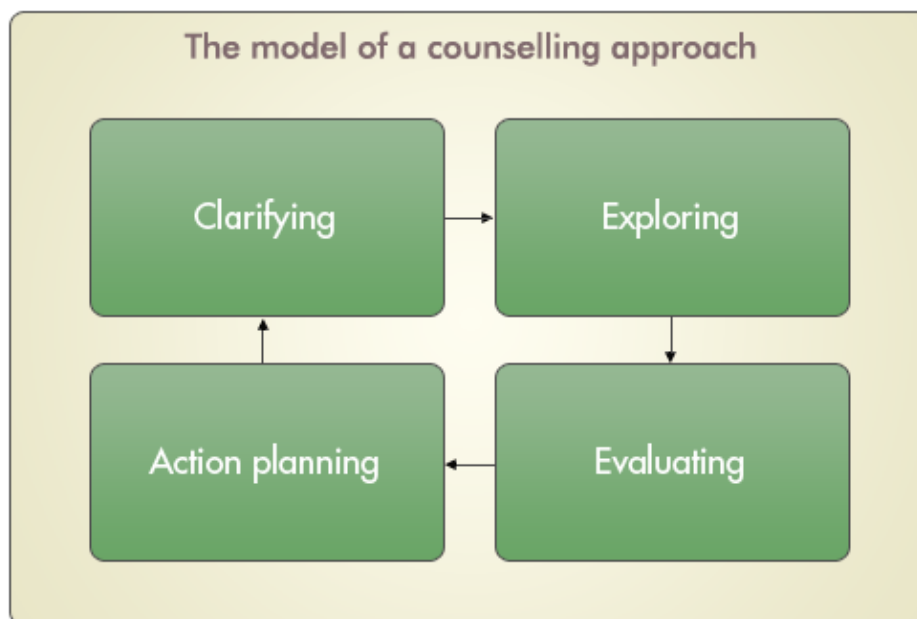
If it seems that the trainee understands the interview process and has prepared adequately, then it can be very helpful to offer them a mock interview with detailed feedback. Somebody with additional career support experience, such as a member of the foundation faculty or the deanery careers team may be able to do this (see 'Tiers of career support'). But if this support is not available locally, or if the interview difficulties are particularly severe, you might want to suggest that your trainee invests in specialist interview help (see the [Resources section](#)).

A structure for a careers support session

The four-stage framework describes the sequence of career-planning tasks a trainee needs to complete in order to be able to make robust career decisions at the point when they have to decide on their future career pathway. In other words, progress through the four stages takes place over an extended period of time from medical school, through to the time they have to make definite career decisions. The four stages can also be repeated in miniature each time a trainee is faced with a subsequent career decision.

But how does the four-stage approach map on to the career support that you might be providing in any one session?

The answer to this is that in a given session with a student/trainee you may be spending most of your time on one stage (e.g. Stage 4 activities such as CVs and interview preparation), or you may be moving between a number of stages (e.g. using the results of Stages 1 and 2 to make a career decision, Stage 3). But whichever stage or stages are being discussed, by the end of the session you want the student/trainee to feel that they have moved their career planning forward in some way. This can best be achieved by having an overall structure for each session.



Clarifying

- Explaining to the student/trainee how long you have and the purpose of the session.
- Making sure that the student/trainee feels you are interested in what they are saying.

- Through discussion, reaching an agreement on which issues to focus on during the session.

Exploring

- Helping the student/trainee explore focal issue in greater depth.
- Renegotiating the focus if another issue emerges as being more pressing.

Evaluating

- Challenging inconsistencies in what the student/trainee is saying.
- Helping the student/trainee weigh up the pros and cons of different options.
- Prioritising between different courses of action.
- Checking whether you are still keeping to the main focus.

Action planning

- The student/trainee decides on specific tasks they need to complete within a specified agreed time frame.
- Reviewing the session.

Examples

Clarifying

A trainee comes to you saying that they want to talk about a forthcoming interview and also about whether they might want to train flexibly at a later date. You remind the trainee that you only have 40 minutes in this session, although you could arrange a subsequent session if necessary. You then ask them which issue they feel is more pressing. After a brief discussion they decide that they want to focus on interviews during this session.

Exploring

You ask them to give you a fuller picture of their specific interview concerns. They give a rather confused answer, so you then ask them to tell you about what happened in the two most recent interviews they attended. From this it becomes clear that they tend to ramble on. (You clock, but don't at this point comment, that their answers to you in the current session have actually demonstrated the precise problem you have been discussing, namely their answers are long-winded and lacking in focus.) You ask the trainee (while taking care not to sound overly judgemental) about how they previously prepared for interviews. It becomes clear that previously they just turned up on the day and hoped for the best.

Evaluating

You ask the trainee about what ideas they have for improving their interview practice. They say that perhaps they don't need any help, and they will be fine next time. You gently point out that actually, even during this session, they have tended to give long-winded answers to your questions, and that it does seem to be an issue they need to work on. They then suggest that perhaps they should do some reading on the subject, prepare answers to the sorts of question they might be asked and then have a mock interview session. Or there again, perhaps they should go on a course. You discuss these different options and, as the timescale is tight, the trainee decides that the course option might not be realistic, and anyway, courses often aren't sufficiently targeted to one's needs.

Action planning

The trainee decides to prepare for mock interview and you agree a timescale. You review the overall focus of the session, and agree that following this round of interviews you will meet up again to discuss flexible training.

Supporting the trainee with unrealistic career plans

Educational supervisors often express concern about how best to support a trainee whose career plans they believe to be unrealistic. The example described below could be regarded as typical of this problem.

A trainee has been graded as ‘borderline’ for F1 completion; on some of the DOPS (Direct Observation of Procedural Skills) assessment, and it seems that they struggle with tasks requiring fine motor skills. The educational supervisor is then surprised when the trainee tells them during a supervision session that they want to apply for core surgical training, with a long-term goal of training in a particularly competitive surgical specialty. How should the educational supervisor respond?

The importance of posing challenging questions

In this situation, the educational supervisor should focus on posing the following types of challenging question to the trainee.

- What does the trainee see as their key strengths?
- How does this self-assessment of their key strengths tie in with some of the assessment evidence in their portfolio?
- In which areas have they been assessed as being less strong? Are any of these areas important in terms of demonstrating suitability for surgical training?
- Is there a match between their areas of personal weakness and areas that are critically important in terms of suitability for surgical training?
- Have they researched the likely competitiveness for core surgical training?
- What are their thoughts on the fact that they are interested in a particularly competitive surgical specialty but they have not scored highly on the relevant key competences?

It also needs to be pointed out that suggesting you pose challenging questions to your trainee is not equivalent to suggesting you move into ‘Socratic’ mode. The content of your questions can be tough, but you need to ensure that there isn’t a breakdown in rapport between you and the trainee. So watch your pacing of questions and your tone of voice and be alert to the effect of your questions on your trainee. It can be helpful if you acknowledge that you understand that discussing these issues is very hard for the trainee, but you do want them to do some serious thinking about their career plans.

The advantages of this approach

Some of the potential benefits of the approach outlined above (i.e. posing challenging questions) as opposed to a more directive approach (i.e. ‘If I were you, I’d ditch surgery’) are as

follows.

- The directive approach absolves the trainee from taking responsibility for their own career decision making.
- Posing challenging questions rather than providing answers makes it more likely that the discussion will be opened up, and the trainee will start to think critically about their position.
- With the ‘If I were you’ route, there is the danger that the advice given will be influenced by the supervisor’s own pet likes and dislikes. Quite unconsciously the supervisor may be less likely to suggest career options that they personally disliked, and instead may suggest options that they have previously enjoyed. But the ‘If I were you’ approach has a more basic flaw: the trainee is not you.
- And perhaps (though it may be unlikely) the educational supervisor could be wrong. For example, perhaps something is going on in the trainee’s private life that means they have been sleeping poorly or been anxious about the assessments and in turn getting poor assessment results, but the trainee knows that at medical school they received highly favourable feedback on their potential for surgical training, and they didn’t have any problems with fine motor control.

See Nathan and Hill (2006) for a fuller discussion of the limitations of directive advice.

If the trainee still persists in wanting to pursue their dream

If you have challenged the trainee in the way outlined above, but they are unwilling to shift their career aspirations, then you should suggest that the trainee has a further discussion, either with a colleague who is in that particular specialty or with somebody else (who could be a clinician or a careers adviser) who has had additional training in career support. You should then prepare a brief summary outlining your specific concerns and give it to the person who will be providing this additional support.

It is also important to realise that while you have to behave responsibly towards the trainee, you are not responsible for their career decisions. So if your trainee wants to ignore clear feedback that they have been given about their below-average performance in their current job, or ignore the facts on how competitive it is to succeed in their chosen pathway, then ultimately that is their decision. Your job is to ensure that you have raised these challenging issues in a clear, yet supportive way. But it is not always possible to stop some people from making poor career decisions.

To sum up

This module highlights the importance of:

- understanding the overall structure of the career–planning process and sharing this understanding with the student/trainee
- encouraging the student/trainee to spend sufficient time at each of the four stages and knowing what resources you can direct them to
- understanding what psychometric tests can, and cannot, tell you
- knowing when and where to refer on if it seems likely that a particular student/trainee may need specialist career support
- Having an overall structure for each career support session so that by the end of the session the student/trainee feels that they have ‘moved forward’ with their career planning in some specific way
- posing challenging questions when faced with a trainee whose career plans you believe are unrealistic, but without losing rapport.

Congratulations

You have now reached the end of the module. Provided you have entered something into your log you can now print your certificate. To generate your certificate please go to ‘my area’ and click on ‘complete’ in the course status column. Please note, you will not be able to print your certificate unless you have entered something in your ‘reflections area’.

Please now take a moment to evaluate the course and enter your comments below.

Further Information

This module was written by Caroline Elton. Caroline is a chartered psychologist who works part time for the Kent Surrey and Sussex Deanery (as strategic lead on careers) and part time as a career counsellor in private practice. The module relates to area 6 of the Professional Development Framework for Supervisors in the London Deanery.

Teachers' toolkit

[Core career counselling skills](#)

References

Ali L and Graham B (1996) *The Counselling Approach to Careers Guidance*. Routledge, London.

Borges NJ and Savickas ML (2002) Personality and medical specialty choice: a literature review and integration. *Journal of Career Assessment*. 10: 362–80.

Borges NJ, Savickas ML and Jones BJ (2004) Holland's theory applied to medical specialty choice. *Journal of Career Assessment*. 12: 188–206.

Elton C and Reid J (2007) *The ROADS to Success: a practical approach to career planning for medical students, foundation trainees (and their supervisors)*. Postgraduate Deanery for Kent Surrey and Sussex, London.

Goldacre MJ, Turner G and Lambert TW (2004) Variation by medical school in career choices of UK graduates of 1999 and 2000. *Medical Education*. 38: 249–58.

Hirsh W, Jackson C and Kidd J (2001) *Straight Talking: effective career discussions at work*. National Institute for Careers Education and Counselling (NICEC), Cambridge.

Jackson C, Hirsh W and Kidd J (2003) *Informing Choices. The need for career advice in medical training*. National Institute for Careers Education and Counselling (NICEC), Cambridge.

Kidd JM (2006) *Understanding Career Counselling: theory, research and practice*. Sage, London.

Lambert TW and Goldacre MJ (2007) Views of doctors in training on the importance and availability of career advice in UK medicine. *Medical Education*. 41: 460–6.

Lambert TW, Goldacre MJ and Evans J (2000) Views of junior doctors about their work: survey of qualifiers of 1993 and 1996 from United Kingdom

Medical Schools. *Medical Education*. 34: 348–54.

Nathan R and Hill L (2006) *Career Counselling* (2e). Sage, London.

Further reading/Resources

General career planning guides

Hopson B and Scally M (2000) *Build Your Own Rainbow: workbook for career and life management*. Kogan Page, London.

This can also be used as a self–help guide by students or trainees who want more help with Stage 1.

Medical career guides

Chambers R, Mohanna K and Field S (2000) *Opportunities and Options in Medical Careers*. Radcliffe Medical Press, Oxford.

Elton C and Reid J (2007) *The ROADS to Success: a practical approach to career planning for medical students, foundation trainees (and their supervisors)*. Postgraduate Deanery for Kent Surrey and Sussex, London.

MacDonald R and Hadridge P (2003) *My Beautiful Career*. BMJ Publishing Group, London.

Royal College websites

These sites contain a wide range of information covering things such as person specifications, education and training, information about flexible training, etc.

- [Academy of Royal Colleges](#)
- [College of Emergency Medicine](#)
- [Royal College of Anaesthetists](#)
- [Faculty of Dental Surgery](#)
- [Royal College of General Practitioners](#)
- [Royal College of Obstetricians and Gynaecology](#)
- [Faculty of Occupational Medicine](#)
- [Royal College of Ophthalmologists](#)
- [Royal College of Paediatrics and Child Health](#)
- [Royal College of Pathologists](#)
- [Faculty of Pharmaceutical Medicine](#)
- [Royal College of Physicians of Edinburgh](#)
- [Royal College of Physicians of London](#)
- [Royal College of Physicians and Surgeons of Glasgow](#)
- [Royal College of Physicians of Ireland](#)
- [Royal College of Psychiatrists](#)
- [Faculty of Public Health](#)
- [Royal College of Radiologists](#)
- [Royal College of Surgeons of Edinburgh](#)

- [Royal College of Surgeons of England](#)
- [Royal College of Surgeons in Ireland](#)

Medical careers websites

- [NHS careers](#)
- [BMJ careers](#)
- [Doctors.net](#)

Resources ‐ access to private career support

Please note that career counsellors could also be called career advisors, career guidance professionals, career consultants, career practitioners or even occupational psychologists. Increasingly, people are also offering career coaching.

Institute of Career Guidance

The ICG accredits career guidance professionals and has a section on its website to help you find a career advisor.

AGCAS

The Association of Graduate Careers Advisory Services is the professional association of career professionals in higher education. University careers services are usually members of AGCAS and your medical school may have access to the services of the university careers service. You can often be a graduate member of a university careers service.

Prospects

This is the UK's official website for graduates and it is supported by AGCAS. You can email a careers consultant and also find a career coach if you want to work with someone on an individual basis. This is one of the services offered by Prospects Professional. (At the time of writing these services were advertised at the bottom of the home page.)

NAEGA

The National Association for Educational Advice for Adults is a practitioner organisation run by members for members. The website has links to guidance providers in its 'Looking for guidance' section.

British Psychological Society

The BPS is the representative body for psychology and psychologists in the UK. You can use its main site to find a psychologist.

The BPS also accredits practitioners in the use of psychometric instruments and has a separate website for the Psychological Testing Centre (www.psychtesting.org.uk/). The directories section contains

details of qualified testers, and in the directories section you need to search for a Level B instrument (as personality instruments such as the MBTI are categorised as Level B).

Coaching

Coaching is an increasingly popular tool, which can be used to help support personal development. It can also be offered as life coaching, career coaching, personal development coaching, etc. The European Coaching Institute defines coaching as a ‘simple yet effective form of personal development where client and coach create an alliance that promotes and sustains the client’s personal growth and competence’.

At the moment there are no official regulatory standards for coaching and no governed training standards that need to be attained before individuals can become a coach. However, there are two internationally self-appointed accreditation bodies that aim to self-regulate the industry, and within the UK the Chartered Institute of Personnel and Development (CIPD) provides advice to human resource professionals on coaching and mentoring.

Here are some websites if you would like to find out more:

CIPD

European Coaching Institute

International Coach Federation

Course Glossary

Assessment

Assessment is the term used to indicate an appraisal of students' performance. Typical formal assessments in medicine include written examinations, Multiple choice questionnaires (MCQ), observations of clinical or communication skills, Objective Structured Clinical Examinations (OSCEs) and Multi-Source Feedback (MSF). Assessments may be summative (where the marks gained contribute to a formal grade or award) or formative (where the focus is on providing feedback for ongoing development).

Career Advice

Providing an immediate response to the needs of clients who present an enquiry or reveal a need that requires more than a straightforward information response. It is usually limited to helping with the interpretation of information and with meeting needs already clearly understood by the client and may include signposting to a guidance interview where a more in-depth response can be provided.

Career Counselling

The Learning and Skills Council do not provide a definition of career counselling. But Kidd (2006), in a comprehensive handbook uses the following definition. A one-to-one interaction between practitioner and client, usually on-going, involving the application of psychological theory and a recognised set of communication skills. The primary focus is on helping the client make career-related decisions and deal with career-related issue.

Career Guidance

An in-depth interview or other activity conducted by a trained adviser which helps clients to explore a range of options, to relate information to their own needs and circumstances and to make decisions about their career (ie their progress in learning and work). It may include psychometric assessment.

Class

Class refers to hierarchical differences between individuals or groups in societies or cultures . Factors that determine class may vary widely from one society to another. However, economic disadvantage and barriers to access services are major issues within class discrimination.

Competences

Competences are similar to objectives and outcomes in that they provide a means of specifying and detailing practical skills in relation to the ultimate intended performance that the competences underpin (Grant, 2007, p 21). The use of competences has been widespread in practical vocational subjects such as healthcare, management and engineering. Competence based curricula can be used as a basis for learning and teaching, for assessment and to help ensure professional accountability. Programmes for professions such as medicine usually include specific practical competences and the integration of more complex skills, knowledge and behaviours.

Supervision

Usually a formal one-to-one relationship, focussed around professional conversations to help the supervisee develop reflective professional practice, learning and skills with the aim of improving patient care.

Learning Activities

Select one or more of the activities below to develop your skills in supervision.

If you are registered on the site, you can write up your reflections in the 'reflections area'. Click on the 'my area' link at the top of the page to access your personal pages. Please note you must be logged in to do this.

1. Using psychometric tests

If you have already completed Sci59, find the results print-out. If you haven't done so already, arrange to complete the questionnaire. It is available for BMA members on the [BMA website](#).

- Looking at the suggested specialties in the print-out, to what extent do the suggestions match specialties that you are interested in?
- With reference to the guidelines given above on the use of psychometric testing, describe how you would approach a career support session in which you were discussing the Sci59 results of a student/trainee who was having difficulty making career decisions.

2. Reviewing the robustness of a career decision using ROADS

Next time a trainee comes to you to discuss their career plans, use the ROADS criteria in the discussion ([see page 7](#) for explanation of the ROADS criteria).

- What specific issues did the trainee raise as you discussed each of the ROADS questions?
- In what ways did having the ROADS checklist help structure the discussion?
- Were there other issues not covered by ROADS that were also relevant? If so, describe these?
- What skills did you need to use as you facilitated the discussion of the ROADS questions?
- What was the outcome of the discussion?

3. Structuring a career-planning session

After you have completed a career planning session with a trainee, reflect on the following questions.

- To what extent did the session follow the suggested structure: clarifying; exploring; evaluating; action planning?
- Describe whether there were any stages that you should have spent less (or more) time on?

- The aim of a career–planning session is to ‘move the recipient forward’ in some way during the session. Do you feel that you achieved this aim?
 - If ‘Yes’, identify what it was that you did during the session that helped the trainee.
 - If ‘No’, looking back over the session, what could you have done differently for the session to have been of greater use to the trainee?

4. Career–counselling skills

Interpersonal skills based on responding appropriately to an individual or group cannot simply be learnt by reading about them. As Kidd (2006) points out, you need to practise these skills and receive appropriate feedback. Next time you have had a particularly sensitive career support session with a student/trainee, try to write down as much as you can remember about what was discussed during the session. It is best if you do this as soon as possible after the session has ended.

- Looking through your account of what happened during the session, how well do you think you listened? What stopped you listening at any point?
- Can you identify specific examples of where in the session you used ‘understanding skills’? And in retrospect, can you identify places in the session where greater use of these skills might have been helpful?
- Similarly, can you identify specific examples of where in the session you used ‘interpretative skills’? And what about places in the session where greater use of these skills might have been useful?
- Looking back at your answers to these questions, what skills do you want to focus on developing in your next career support session?