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The rise and rise of the portfolio career

Fiona Pathiraja and Marie-Claire Wilson argue that portfolio careers are the future of the medical profession

Portfolio careers have been known in medicine since at least the 19th century, when Anton Chekhov combined his medical practice with writing plays. Medicine no longer has to be a doctor's sole occupation or a job for life, and today it is common for consultants and general practitioners to diversify into other areas.

Charles Handy, a leading business thinker, described the "portfolio career" in the early 1980s.¹ He argued that as long as earned income is sufficient, job satisfaction will derive from a widely based portfolio of jobs, tailored to suit the needs of the individual. Within medicine, the portfolio career was pioneered by general practitioners and is gaining popularity among hospital doctors. Common portfolio careers include management, medical education, medicolegal work, or research, but a growing number of doctors are developing portfolios in less traditional areas such as business, media, humanitarian aid, and health policy.

Why have a portfolio career?

Portfolio careers have many benefits for individual doctors and also for their

employing organisations.

Medical students soon find their various interests squeezed out by the pressures of burgeoning careers, demanding training schemes, and subspecialisation. A portfolio career can help to redress the balance, bringing enormous personal satisfaction by enriching a doctor's skill base, presenting new challenges, and reducing the risk of burnout. It has also been suggested that portfolio careers could help to reduce unhappiness in the medical profession.² A happier workforce is less likely to take sick leave and is more likely to be productive. Furthermore, the new skills gained in a portfolio career mean higher quality employees for the NHS.

Doctors wishing to negotiate time to pursue other interests are encouraged to develop a robust business case outlining the tangible benefits to themselves and their organisation. Junior doctors interested in diversifying their career should contact their deanery or college in the first instance.

The disadvantages of a portfolio career include overcommitment, exhaustion, and

loss of interest in the main employment. Importantly, a considerable amount of time will need to be spent in the areas of special interest before these become paid jobs. Junior doctors may face longer training if trying to create a portfolio career while progressing up the career ladder. Anyone pursuing a non-traditional career path risks criticism from their peers and seniors. However, one consultant who was berated as a junior for pursuing other interests now leads his field, and quotes Robert Frost to explain that it was all worthwhile: "Two roads diverged in a wood, and I took the one less travelled, and that has made all the difference."

Case studies

Hugh Montgomery

Consultant intensivist, director of the UCL Institute for Human Health and Performance, an award winning author of children's books, and founder of Project Genie. Has delivered the Royal Institution's Christmas lectures, carried out research on Everest, and been appointed a "London Leader" by the Greater London Authority.

My low threshold for boredom and my diverse interests mean that I undertake a variety of simultaneous roles. It is a great sadness to me that juniors today are so rapidly funnelled into a five year career track: one should be allowed to take careers to a higher level, sample others, and move on.

I have worked with some truly inspirational people who have helped to guide and shape my career. It was at the Hammersmith that I was first taken aside and pointed in the direction of intensive care. It can be challenging to create a career that doesn't fit the template that has been established nationally, but it's important to persist with diverse interests. You would be surprised how often one interest informs another.

I'd much rather be a player, not a spectator, and I'd encourage others to never ever do less than their best and to try to have fun. Trust your instincts and never say "no" until you run out of hours completely—you just never know where a path might lead.

Kevin Fong

Consultant anaesthetist, physiology lecturer, columnist for the *Times Higher Education Supplement*, *BBC Horizon* presenter, and an expert in space medicine.

In addition to my clinical and teaching commitments at University College London, I work for the Science Technology and Facilities Council's Futures Programme, which explores areas where medical researchers might collaborate with the physics and astronomy community. My portfolio career developed naturally—I'd studied astrophysics before medical school and cultivated my interest in human space exploration and space medicine with an elective at NASA.

None of this fitted well with any conventional medical career pathway, but I was lucky enough to win a grant from the National Endowment for Science, Technology and the Arts, which funded a series of visiting fellowships to NASA's Johnson Space Center and a masters degree in astronautics and space engineering.

The upside to doing lots of different things is that life never gets dull, but there has been quite a lot of personal sacrifice. Portfolio careers are unconventional and can appear incoherent to potential employers. You can find people who can give you advice, but in the end you have to find your own way. You do it hopefully because you enjoy it, and you have to understand that enjoyment might be your only reward.



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Gawande is included in the current *TIME 100* list of the most influential people in the world and provides a powerful endorsement for the portfolio career through his realisation that "in turns you can be a doctor and be almost anything else"

Ed Wallitt

General practice specialty trainee year 1 and founder of Podmedics.com

I set up Podmedics.com (www.podmedics.com) in 2007 to provide high quality video and audio lectures to medical students. What started out as a small website with a few listeners has grown to become one of the most highly rated medical podcast series in the world—we frequently hit the top spot on iTunes. Devising the lectures has been great for my professional development, and I've delivered live podcasts at universities nationwide. My advice to others would be to explore how your interests could be applied to medicine. If you find motivated people with similar interests, it is well worthwhile cultivating working relationships with them. Podmedics is now diversifying into web consulting and has a number of projects underway within the NHS. It can be challenging to find time for the business, alongside full time clinical medicine, but my experience has allowed me to collaborate with really innovative people, and I would highly recommend it to others.

Sarah Jonas

Specialty registrar year 6 in child and adolescent psychiatry, and clinical fellow at the King's Fund.

I work four days a week as a psychiatry trainee, and one day a week seconded to the King's Fund, a health think tank. As a clinical fellow, I have a wide range of responsibilities, including developing policy documents and writing responses to government consultations, such as the recent white paper. Having previously being seconded to the Department of Health, I wanted to experience working in health policy outside government. Thus a role at a think tank was a natural next step and fortunately this counts towards my psychiatry training as a special interest. I would absolutely recommend maintaining a varied career. Apart from enjoying the different thinking styles involved in policy and clinical work, I feel the crossover means my skills are strengthened in both roles. Although I can't claim to have strategically planned my career, I do grab opportunities when they arise. Overall, I have developed a diverse range of skills that

will be useful when I gain CCT [certificate of completion of training] next year.

Tips for those interested in taking the first step

Start by working out what your interests are and which ones could realistically be pursued as employment. Then think critically about your career. What does ultimate job satisfaction look like to you, and where do you see yourself in 10 years' time? Answer these questions honestly—you may surprise yourself.

If you have a well cultivated interest, try to find a sponsor or role model in this area. A good sponsor can be instrumental in providing useful contacts and advocating your skills; they can also help you to define clear goals for your portfolio career.

Most importantly, remember that a medical career is a long journey. Think beyond your certificate of completion of training or even your first few years as a consultant; you don't want to be wondering "is this it?" a few years from now.

Conclusion

Anyone doubting the power of a portfolio career should look to Atul Gawande. Arguably the doctor with the most high profile portfolio career, his resumé lists his work as a practising surgeon, Harvard professor, bestselling author, World Health Organization patient safety lead, *New Yorker* magazine staff writer, and former health policy adviser to President Bill Clinton. Gawande is included in the current *TIME 100* list of the most influential people in the world and provides a powerful endorsement for the portfolio career through his realisation that "in turns you can be a doctor and be almost anything else."

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- 1 Handy C. The age of unreason. 2nd ed. Century Business, 1991.
- 2 Edward N, Kornack MJ, Silvesin J. Unhappy doctors, what are the causes and what can be done? *BMJ* 2002;324:835-8.

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