Mentoring made easy: Reflection is the way

Rajan Madhok
This Journal belongs to <<<Put your name here>>............................................
Do you pay regular visits to yourself? Start now.

Rumi
Note on using this journal

This is your journal. Use it as you see fit, personalise it, throw it away, whatever.

Inside you will find some common topics that have come up, in my interactions with junior clinicians and public health trainees. For each topic I have listed my ‘qualifications’ for talking about it – so that you can see where I am coming from, then my views on it, and finally there is space for you to make your notes. You do not have to share these notes with me and we can talk about them generally. You may want to periodically add your observations and new topics as you progress, and maybe talk to other mentors. Write as much or as little as you want, but do remember with time memory will fail and unless your notes are clear they may not make sense- guess if it is worth noting then it is worth noting well.

You may want to take care of this Journal, and over time it will be a source of great joy as you review your life!

Remember two rules: be honest with yourself (nobody else needs to see this Journal, without your permission), and only use it if it helps you and you enjoy writing it. There is no requirement to do anything, it is entirely your choice.

Start by writing about yourself, why you have picked this journal up, what you hope to achieve by your interactions with me (and others, in time).

And to stretch you a bit: Think about yourself after 40 years, imagine yourself then and looking back on your life: would you be at peace? Did you achieve what you wanted? And then use this visualisation to set out your goals.
Parent’s lament

When they were ready to learn
you were not
now when you want to teach them
they are too busy
to talk to you about
love, life, loss, peace and joy

You missed the chance, they say
but how could I have taught them
without knowing myself first
now they must make own mistakes
find the hard way, its all avoidable
and the cycle goes on
Introduction

Thank you for asking me to mentor you.

These days the usual reason one seeks a mentor is to explore how to be successful and famous, and I will do my best for you but we may have to agree what these terms mean. If it is professional success then beware that I have been out of practice for some time and I have few contacts in positions who can help you and I do not use SoMe. So, I am useless for people who want ‘practical’ fast track route to success. But if success to you means living a fulfilled life—when at the end (hopefully not for a long time yet) you can be at peace having done a good job, then may be. Similarly with fame—unless of course you become a Nobel Prize winner or Prime Minister, and why not and enter history books, traditional fame is ephemeral. Do not get me wrong, recognition is important but not to be chased—let it ensue and do not pursue it; the only fame worth having is living in the memories of those whose lives you have touched.

What are my qualifications for being a mentor? What makes one a good mentor: is it age and grey hair, as signs of wisdom and hence worth finding out and is it someone who makes it ‘happen’ for the mentee? Well, the first is true in parts in that I am old and grey but for the rest I will let you be the judge, and this journal is an attempt to help you decide whether I can be of any help.

But for now, let me start with some declarations: I am not a trained mentor, do not have an MBA or PhD or any formal teaching qualifications, I put these here at the start and not in small print so proceed at your own peril. Knowing little about lots rather than lots about little has always interested me—so I have superficial and broader ‘knowledge’ rather than an expertise.

We can talk but for those who want to cut to the chase—as young folk like to do (and I was young once too)—in essence the most important things I want to get across are from Rainer Maria Rilke’s ‘Letters to the young poet’—if only mentors were like Rilke, and Khalil Gibran’s ‘The Prophet’—since everything one needs to know about being a good person is there. Because all a mentor can and should do is to help one to become a good person and live a good life.

I do not pretend, though aspire, to have their wisdom, compassion and ability to communicate such fundamental lessons:

You ask whether your verses are any good. You ask me. You have asked others before this. You send them to magazines. You compare them with other poems, and you are upset when certain editors reject your work. Now (since you have said you want my advice) I beg you to stop doing that sort of thing. You are looking outside, and that is what you should most avoid right now. No one can advise or help you—no one. There is only one thing you should do. Go into yourself. Find out the reason that commands you to write; see whether it has spread its roots into the very depths of your heart; confess to yourself whether you would have to die if you were forbidden to write. This most of all: ask yourself in the most silent hour of your night: must I write? Dig into yourself for
a deep answer. And if this answer rings out in assent, if you meet this solemn question with a strong, simple “I must,” then build your life in accordance with this necessity; your whole life, even into its humblest and most indifferent hour, must become a sign and witness to this impulse.

Rilke

On another occasion, he writes

.........to have patience with everything unresolved in your heart and to try to love the questions themselves as if they were locked rooms or books written in a very foreign language. Don’t search for the answers, which could not be given to you now, because you would not be able to live them. And the point is, to live everything. Live the questions now. Perhaps then, someday far in the future, you will gradually, without even noticing it, live your way into the answer.

Rilke

And here are a few quotes from Gibran

Work is love made visible,

And if you cannot work with love but only with distaste, it is better that you should leave your work and sit at the gate of the temple and take alms of those who work with joy.

Gibran on Work

No man can reveal to you aught but that which already lies half asleep in the dawning of your knowledge.

For the vision of one man lends not its wings to another man.

Gibran on Teaching

You talk when you cease to be at peace with your thoughts;

And when you can no longer dwell in the solitude of your heart you live in your lips, and sound is a diversion and pastime.

And in much of your talking, thinking is half murdered.

Gibran on Talking

With that background, in the following pages are my views on some of the questions that come up during my sessions either during one-to-one discussions or whenever I am asked to give a ‘talk’ to aspiring leaders. This is not a definitive or static account – please see it as work in progress for both of us. As we ‘talk’ we will learn and improve. I do have strong views on a few subjects, though increasingly less, but by expressing them I do not seek to impose them. By all means disagree with whatever I say and, in any case, form your own views and follow them up. This is especially since I am not ‘current’ and have little idea of what it is like in the ‘real world’ of practising medicine now, though I doubt if the fundamentals have changed much.
To finish this section, I want to share an interesting conversation I had recently with my (good) friend during one of our regular walks in the Welsh hills when talk turned to meaning of life and state of the world, and he asked me if I had always been a ‘contrarian’ – and which set me thinking since I did not feel I am/was. I am by nature a glass half-empty person and seek improvements, my interest has always been in seeing the full picture before deciding and this means asking questions. But he said many (?most) people do not like such discussions, as the questions are seen as challenging or as showing off, and that has stuck with me. Genuine discussion is uncommon and most conversations are about persuading the other party these days, we agreed on this point, but then we are both old (er). For the record it never was, and is, not my intention, and if it comes across as such then please accept my apologies. How can I presume to know everything when most of my time is spent on trying to be an expert:

I must disabuse you of two things at the end. In case you think I have always followed the advice that I give then it would be misleading. I made too many mistakes and this is my attempt to prevent them, by sharing my ‘hard earned’ learnings. Do as I say, not as I do (did). And that what follows ignores the real world – I am very aware that things do not go to plan, life is not linear but has ups and downs, and not everyone behaves professionally or has the same values as you. My point is simply this: What are you going to do about these – accept defeat and give up or pick yourself up and continue? This was the hardest lesson for me to learn, I let certain people and things get me down at times but it neither helped me nor solved the problem. It was much later that I discovered Stoicism, amongst other
things, and which helped me; I am not proselytising and only suggesting that once you start looking there is help there.

I believe, and hope, that you can and will be better than me – nothing will please me more.

Let us get started, if you are still so minded.

Good luck.
#1 On Leadership

My qualifications (throughout the document, unless indicated otherwise as current, all are in the past):

- Periodic psychometric assessments of various types either as part of personal/team developments or job interviews
- Some formal courses including the Judge Institute (Cambridge) International Health Leadership Programme, Kings Fund course and Greater Manchester Common Purpose
- Jobs as a director of public health and medical director in the NHS and other roles in academic, private and voluntary sectors
- First member of the Faculty of Medical Leadership and Management
- Director of Clinical Leaders Network

My views

The usual reason I get asked to be a mentor is that there is a belief that I am, and have been, a medical leader since I did manage to get some positions that are seen as marks of success, so let us start by nailing this one.

I do not like the Leader label, its much misused and there is an industry driving it now - do not get me wrong there are some good things happening to develop people to their potential, after all how I can be critical since I did attend many leadership courses during my career. Rather the reasons for my provocative remarks are that there is no mystique about it nor any sophisticated techniques; basically, it will boil down to

1. do you know yourself – everything will always come down to knowing your values, strengths, weaknesses and most importantly having insight; do not ever fool yourself
2. following your passion – be very clear what you believe in, my life mantra has been Do good, Have fun and Make (decent) money; and be flexible in terms of methods to use to stay true to your passion
3. doing your best at whatever stage of life you are at – student, practitioner, child, parent, friend, whichever role you are in at that time do it well, live in the moment, and if it does not feel good then ask why and change
4. stepping up if there is a problem and doing the best you can – do not wait for permission when things are going wrong, get involved, and take the lead if necessary or defer to someone who is leading ‘better', nothing like being a good follower
5. checking if you are being kind to others – do not complain and always respect others, apart from a few truly evil people, most are trying their best
6. constantly learning – read widely, remain curious, meet different people, travel, and all with an open mind, not to reinforce existing views – the biggest problem these days esp with SoMe- cut down time on it; I do not use any (but I did warn you about strong views!)
7. finally looking after yourself – most important, if you do not self-care you are doomed, both physically and mentally; do not take things too seriously and laugh daily and often

and now I have saved you all the expense and time! It’s all in the Doing, not talking or reading.

There is nothing else (sic) in books or courses; in different ways they will come down to these basics, but do let me know if I have missed anything! So, my suggestion would be to go inside first, find out about yourself, read widely and especially biographies, and the latter will confirm what I have said above and in particular that success and fame came from following passion and hard work. And then practise, small steps, daily, which will add up and yes, do take a course/s with an open mind – learning itself is agnostic, in the sense that you may learn what to do but also what not to do; be thankful to those who teach you the latter: who push you, block you, or put you down because they make you stronger and better.

And before you know it, you will be a leader, so start by doing good...... now... always...

Your notes
What do you agree with?
What do you disagree with and why?
What will you do now?

Date:

Further note/s

Date/s:
# 2 On Reflection

**My qualifications:**

Another confession, I have no formal qualifications in the subject of reflection, and my learning has been on the job, so to speak. In fact, I have arrived at, and am still learning about, the academic basis of reflection through lived experiences; a rather back to front approach to traditional education.

I had no idea that what I was doing was reflection until much later in life when I started collating what I had been doing; all that material is available [https://www.nhs70.org.uk/story/rajan-madhok](https://www.nhs70.org.uk/story/rajan-madhok)

**My views**

I could bore you with the oft repeated quotes like *“By three methods we learn wisdom; first, by reflection, which is the noblest; second, by imitation, which is the easiest and; third, by experience, which is the bitterest”* (Confucius) or *“The unexamined life is not worth living”* (Socrates), but in today’s busy and practical world this does not cut the mustard.

But guess you really want to know how to do it- given that you have the reflection monkey on your back. So here goes:

Reflection is easy actually - do not get bogged down in the technicalities. Basically, it is asking yourself:

- What am I doing?
- Why am I doing it?
- How well am I doing it?
- Can I do it better?

As you get going, the practice will become easier and more meaningful with the why (should I do this?) coming before the what to do (doing the right thing based on evidence and learning from reflection). You will get better at making sure that your time is well spent and only on activities that are part of your life goal. You will move from reflection-on-action (the retrospective look) to the real-time reflection-in-action and start living in the moment.

There is no one right way, no checklist, no one watching; do whatever works, try writing in prose or verse and do it alone or with a mentor. I fundamentally disagree with current approaches with templates and assessments of reflection – the only person who should do it is yourself, it is your life and you are your own judge, try and be honest with self.

So, in essence, reflection is about being wise. To weave in another personal interest (poetry), Piet Hein puts this much better in his ‘grook’: *The road to wisdom*
The road to wisdom? - Well, it's plain
and simple to express:
Err
and err
and err again
but less
and less
and less.

I am aware that, like leadership, reflective practice is also very fashionable these
days, with all sorts of advice/helpful resources from various professional
organisations- use them but also be mindful of not becoming mechanical in your
practice; yes, you may have no choice but to ‘feed the beast’ but be careful to not let
that divert you from personal goal of learning and improvement.

Do not wait for anything, just get started with this Journal ..............

Your notes
What do you agree with?
What do you disagree with and why?
What will you do now?

Date:

Further note/s

Date/s:
# 3 On Racial Discrimination

**My qualifications**

- An overseas doctor, son of immigrant parents who were in turn refugees and moved to India from what became Pakistan after the Partition
- Worked on various initiatives to address race inequality in the NHS, over the years
- Chairman of British Association of Physicians of Indian Origin and Co-Chair of the GMC BME Forum
- A public health doctor interested in all inequalities

**My views**

Racial discrimination is a disgrace, not just in the NHS but generally in society and a global problem. Regardless of our ethnicity we should be concerned and do whatever it takes to address it. But this is where the problem starts because what will it take to address it is the issue. More enquiries with long lists of recommendations and doing more of same are not the answer.

The term BAME itself is a problem as it divides us and promotes ‘Otherness’; the repetition of old struggles and stories keeps the wounds raw; our current approaches, especially seeing it as a problem of proportional representation only reinforces the problem as either people appointed are ignored or only compliant ones get selected; and reliance on mechanisms such as inspection and regulation through bodies like CQC or the GMC is neither enough nor helpful, for example.

In summary, continuing as we are is a triumph of hope over evidence of serial failure.

So, what should be done – turn the other cheek, forget the injustices and stop challenging. Yes and No. Forgiveness is stopping thinking of a better past- what happened cannot be changed but we can learn from it and make things better; the way to do that is by taking stock of the situation and understanding the underlying causes as to why these still persist.

Once we start going down this route, we will discover that the answer is not in vertical programmes – race/gender/sexual orientation/disability etc but in systemic improvements to promote humanistic values and creating person-centric systems and processes which respect each person as an individual.

Too much like apple pie and motherhood and preachy, but only because meaningful discourse in the current environment with the SoMe cacophony is difficult. The binary: with us or against us, reductive approach to societal issues is not helping. Yet, unless we find some common ground it is hard to see how to move forward. My understanding of all great movements is that this is how they started- Gandhi, Mandela, King and current living examples like Dalai Lama and Desmond Tutu show that only through changing Thinking can major change be achieved. My proposal is about creating space for that thinking to happen, and to enable us to get clarity on
the ‘Organising Principle’ for any future work – for example, Gandhi with his Non-violence and Dalai Lama and Desmond Tutu with Forgiveness and Truth and Reconciliation.

Fundamentally, we need to start by deciding whether we want to be different (in terms of race) or unique (at individual level) and whether we want (past) justice or (present and future) equality and peace? We need to work together with all stakeholders to ensure equality for all through a clear road map. Do not worry about influencing nationally (though do what you can) and focus on what can be done in your own settings, at workplace and your community.

One of my favourite quotes comes from James Rebanks, when he poses the test: Are we being good ancestors? Are we, if we do not tackle this blight?

Donot leave it to BAME folk, join in, the only way is together......... and your time starts now........

Your notes

What do you agree with?
What do you disagree with and why?
What will you do now?

Date:

Further note/s

Date/s:
# 4 On Public Health

**My qualifications**

- Formally trained in public health
- Formerly a trainer in public health
- Chair of an organisation that delivered on-line public health education globally
  http://www.peoples-uni.org/

**My views**

I am thinking of training in public health, what do you suggest? This is usually from younger doctors at the start of their career and from those who have had some international exposure, and are often torn between clinical and public health careers. Well, it is not up to me to suggest anything except that you reflect, dig deep to find out what you mean by public health and your motivation. Because public health is everywhere and is everyone’s business – both, personally and professionally; by exercising right lifestyle choices and behaviours you can look after yourself and near and dear ones and that is public health, as a professional of whichever specialty you can look at all aspects including primary, secondary and tertiary prevention and that is public health. But that is not enough and you want to do ‘proper’ public health and now global health? Do you know what that is? Is it about looking after the most vulnerable and those unfortunate folk in poorer countries, but then have you looked within your own setting – it is not inter-country but intra-country differences that matter as inequalities are everywhere? or is it that you want to fly around the world, saving lives, improve the lot of the poor and disadvantaged?

Do you know what the most important public health issues are? Lifestyle leading to chronic diseases, microbial resistance or mental health problems or is it climate change, income inequality or education? Do you have a passion for any of these? Are you more interested in making a difference practically and hence service delivery – which may need more focus on management of change- there is danger of ignoring the ‘art’ at the expense of ‘science’ of public health, or teaching and research to build capacity through academic public health and hence the science? Do you want to work ‘full time’ in ‘public health’ or combine it with a ‘clinical’ career?

If pushed, I will suggest that you consider three things: develop empathy for the disadvantaged; acquire some basic public health knowledge and skills such as in epidemiology and research methods; at every job you do see what the population health implications are whilst attending to the individual patient – see their community beyond them.

Play the long game with public health – you may be able to do this formally after some time in clinical practice, as one gets ‘older’ the recognition of the importance and lure of public health becomes strong. Unless you are ready to jump ship now and have decided the specialty is for you, in which case join a training scheme. And then be ready for the roller coaster- as it will exhilarate as you see successful programmes which can impact on large numbers of people as opposed to the small
numbers in clinical practice and exhaust as you will find how difficult policy making and managing change is, and how long it can take.

Do not form any fixed ideas about ‘The Public Health’, see it as a way of doing good at population level from any position as a professional or a citizen.

Start by talking to some colleagues in Public Health....... and jump when you feel ready....

Your notes

What do you agree with?
What do you disagree with and why?
What will you do now?

Date:

Further note/s

Date/s:
# 5 On Patient Safety

**My qualifications**

- Extensive experience in quality and safety from 1990s when the movement started with medical audit, within the NHS and internationally (still an associate of https://www.icha.in/)
- Worked closely with the National Patient Safety Agency for many years including on the Never Events

**My views**

It is over thirty years since the start of patient safety movement – from its beginning as medical audit, to clinical audit via clinical governance to patient safety – and which came about as a result of a number of initiatives separately in USA, Australia and the UK around the 1990s and which highlighted the problem of the harm being done to patients as a result of medical care. So, are patients safer now? What makes you think so – either way. And what next?

Just consider this: for example, in the US by 2016 medical harm had increased and care itself was the third (*sic*) leading cause of death begging questions about whether all the effort had any effect. In the NHS successive reports continue to show failures, with good quality and safe care being more of a lottery with some providers doing better than others.

As a medical director I got frustrated with investigations of critical incidents since these showed repeated failures of lack of communication, documentation, following basic rules etc, and more effort and resources were going into inquiries than into implementing learning. More and more professionals were becoming inspectors rather than operators/change agents in own settings. Less is definitely more in this regard; especially if done well.

I tend to categorise problems as being simple or complex - getting to the moon was a simple problem since it was a technical issue while patient safety is a complex problem since it is a human behaviour issue. The danger is that by treating complex problems as simple we make them complicated and end up wasting resources – hence the more that is being done in the name of patient safety the less safe the public is. And to use one of the classical techniques of patient safety – to ask the 5 Whys, at each step why things are the way they are - one can get to the nub of the problem. Patient safety and worker safety are two sides of the same coin, and both reflect society – and hence important to look at the issue ‘in the round’.

What does this mean practically then? It is essential to continue work on various training programmes to equip professionals with the necessary tools to promote safe practices in whichever specialty they are working in. In addition, not instead, however, it is important to design systems which make it easy to do the right thing – design physical spaces, design processes and design policies. In doing so employ
technology – it can support systems and processes but not supplant them and above all invest in and develop people who are able and interested in professionalism, humanistic values and reflective practice – and who will model the behaviours and practices you want to see.

Forget Never Events, look out for ‘Ever’ events- what should always happen, starting with making sure to First, Do no harm. Ask yourself: Am I likely to harm by either an act of commission or omission. Make a list of the things you can and will do – simple stuff like I will always introduce myself, remember My name is ...movement; I will ask How can I help you... and then listen without interrupting; I will check if they got what they needed before finishing; and if made a mistake then own it and apologise and learn and if you see anyone else making a mistake, call it out. Remember although professionals we are all also patients, so frankly we are doing this for ourselves – there is no ‘They’, it is ‘Us’.

Don’t worry about what is happening elsewhere, focus on your own practice, is it as safe as it can be, how do you know, how can you improve.......

**Your notes**

What do you agree with?
What do you disagree with and why?
What will you do now?

Date:

**Further note/s**

Date/s:
# 6 On Teaching

**My qualifications**

- No formal qualifications but extensive experience from clinical time when started teaching students and juniors and then throughout public health career including through Peoples-uni
- Various management roles in education including in setting up Hull York Medical School, chairing Health Innovation and Education Cluster and an online education charity
- My anthology celebrating my teachers is available at [https://www.nhs70.org.uk/story/rajan-madhok](https://www.nhs70.org.uk/story/rajan-madhok) - resource 6

**My views**

We have truly messed up education; mechanical approaches to cramming facts with little development of critical faculties and creative thinking from young age onwards means whilst ‘educated’ people can manage the typical situations in their careers, their ability to cope with unknown and uncertain situations is limited. The need to breakdown any problem to its basic components to get to the core and then designing solutions is increasingly lacking. At a medical school (to remain nameless) the MB BCh course was known as DIY or more unkindly as FOFO (the second FO being Find out) as students were left to own devices with self-directed learning absolving faculty from their responsibility. Well, I did warn you about strong views and of all the subjects education is the one that upsets me the most.

I am not denying that there are still good places and that there are many good and great teachers. I also recognise the attempts made to recognise teaching contributions and formal systems set up especially in the last two decades and it is encouraging to see more people acquiring formal teaching qualifications. But what is missing is the curiosity and imagination that is the basis of all learning, lost in the crowded curriculum, structured learning, need to pass tests and acquire degrees.

My involvement with teaching really came about after a discussion with the then dean of health faculty in Hull when I asked him to provide a job description for the academic post that he wanted to establish with funding via my health authority; his reply was that there was no job description since the whole purpose of academic life was contemplation, reflection, discussion, reading and generating new knowledge. He was clearly an extreme case but the point was and is still valid, as universities have lost the sense of vocation and turned these institutions into businesses.

Enough of my rants, what is the way forward, given that despite several major international reports criticising the education sector, not much has changed? Guess it means one has to take responsibility for own education, which needs to become second nature, an ongoing, lifelong learning process; this is all the more relevant for younger generations as knowledge is exploding and the work places are changing rapidly. And it needs to become broad based – medical education, given its
competitive nature, is forcing students into narrower areas; knowing lots about little when the need is for exactly the opposite. Learning the answer is no use compared to learning how to solve the problem. “See one, Do one, Teach one” is not good medicine, unless done in controlled environments but there is some truth in it, since teaching itself is a good way of learning.

Well, in essence you are on your own on this one, take charge of own development, learn constantly, develop curiosity, ask questions, teach others – there is a saying ‘Take a fool to lunch’ which implies explaining your idea to someone who does not know anything about the problem – to clarify own learning.

This Journal itself is a good start, use it to drive your own learning......

**Your notes**

What do you agree with?
What do you disagree with and why?
What will you do now?

Date:

**Further note/s**

Date/s:
# 7 On Research

**My qualifications**

- No formal research degrees and largely learnt on the job; breakthrough as a result of a sabbatical at the Mayo Clinic, USA during training in public health
- Formally involved with The Cochrane Collaboration to promote systematic reviews
- Supporting students with research and dissertations and publications
- Using research for policy making
- Referring and grant reviewing experience
- Various management roles in research including chairing Research Networks

**My views**

I used to get upset when some clinicians took pride in never having done any research or published a paper; driven by the gulf between service and academia, with academics being in ivory towers and unconnected to the real NHS, the two sides were in different worlds. Since then, on the one hand there is much more integration as research has become more accepted in all branches and settings of medicine and on the other diverged as the pressures on both parties have grown-the demanding service targets for clinicians and publication and grant targets for academics. I did and still feel that we do not emphasise the value of research enough, research as a way of organising thinking – the most important issue is the question itself, define it and you are already there -and for problem solving, not just the technical aspects but seeing it through to publications to invite peer-review. The whole process is so enlightening when well done and I would encourage everyone to go through it.

I do, however, have some major concerns – about the quality of research itself – there is a lot of poor quality stuff out there driven by pressure to have publications and which has led to proliferation of for profit ‘so-called journals’; the type of research with more of Me too than original, with strong industry influence and loss of independence; the imbalance between basic, clinical and applied research – my own emphasis has always been on the last and where the academic: service integration is crucial to enable the best evidence for patient care and public health; and lastly overall research like everything else is also a victim of the fashion to ‘specialise’- I worry when there are discussions about qualitative or quantitative methods for example or research is conducted from a narrow discipline point of view. I have always felt that it should be the question that should define the methods and now a days it is unlikely that any one alone can answer it and hence important to work in multidisciplinary teams. Yes, one can be a specialist researcher and we do need them especially when it comes to more sophisticated and complex questions but for the majority of clinicians it is not necessary and they should have a broader understanding. From research aware to supporter and ‘passive collaborator’ to active collaboration and then leader as principal investigators is a full spectrum and for
most of clinicians basic knowledge and appreciation with experience as part of a research team is enough.

Yes, I appreciate the pressures younger generations are under with demands on time and need to ‘conform’ to compete, but do not leave it at that, try and get into the spirit of research, if not at work then through a hobby. It’s not about CVs but about sharpening the brain and being curious. Searching for something and finding it is magic.

Not sure I have anything specific to add, publications are necessary for ‘career’ advancement but not for their own sake, instead focus on research; in this age of fake news unless you have the critical knowledge and skills acquired through research training, you might as well be a quack (sorry). So try and remain enthusiastic about research throughout your career.....

**Your notes**

What do you agree with?
What do you disagree with and why?
What will you do now?

Date:

**Further note/s**

Date/s:
# 8 On Professionalism

**My qualifications**
- Registered doctor
- Involved in promoting professionalism and ethics in various ways as mentioned elsewhere in this document and formally such as being on the GMC Board or a medical director looking at performance issues and informally through other roles, nationally and internationally

**My views**
I find it difficult to express what is meant by professionalism, in that as I see it, it is about making sure one is appropriately trained- and does not claim to know/do things beyond competence; do whatever is required to best of abilities – making sure the interest of the patient (person) in front overrides any other consideration and following through on any promises made; respecting co-workers – specialisation and cooperation can go together without competition getting in the way; and owning up to mistakes and challenging others where and when necessary.

What more is there? Of course, there can be a lot of detail like in the various GMC guidance for doctors but surely that is detail, the fundamentals remain. The difficulty I find is that whilst detail is necessary esp to communicate, soon one falls in the wood and trees trap and start seeing things mechanically. Avoid it.

Now, that is not the world you are in. Your world, as I hear, is full of strife- poor systems, difficult colleagues, demanding patients, people gaming the system, competitiveness, litigious culture and so on. It is not possible to be a good professional! Again, I recognise and sympathise with this, as the very bodies that should be supporting become the source of stress: the fear of the GMC, Colleges, Regulators, managers are real.

What can I tell you, and which may be helpful, is that none of that is new, the names may have changed but there have always been stresses and things outside of one’s control. What that leaves you with is a choice; you can not wish away the reality, it is what it is, and what you need to do is find a way of working with it, without losing your own values- and that is what being a professional is.

The fact that we are here, discussing these things, shows that you are already well on this journey- not because of me, but because you have that most important thing: the insight and desire to learn and improve. Try and get to the core of the issues, the danger is to follow the letter not the spirit, easily done in the checklist (which have their place) culture, form your own framework – the guiding principles/moral compass if you wish – and try and see each external development in this context.

You are a professional, and a good one, keep faith, stay strong, do the things we have been discussing in this Journal and you will be fine.
Your notes

What do you agree with?
What do you disagree with and why?
What will you do now?

Date:

Further note/s

Date/s:
Concluding remarks: The answer really is 42*

You can be forgiven for thinking: Is that it? Is this guy real? Does he know how the world works with people playing games? Rather than helping us to negotiate the complexities and telling us about the tricks of the trade he has been preaching! That is all true, but the question is do you want to stoop down to those levels or try and lift the standards, be a good person and make it a better world? Of course, you want the latter, otherwise you would not be here. This is not to deny that you will have to ‘play’ these games, just as I had to; I used to say that to survive, and thrive in management, people should read The Godfather book, and more recently I could point to the film Conspiracy with Kenneth Branagh to show how evil people can silence opposition and get their way; and on a lighter note, one should read the Parkinson’s Law or the Dilbert syndicated cartoons. For the classically trained there is always Machiavelli, and for Hindus the famous Guru: Chanakya, for example.

My reason is simply this, that whilst you will have no choice but to participate in these games, you will be more effective, and be able to sleep better, if you know yourself, follow what you believe in and take care by constantly reflecting and learning. You should watch how people play games, mislead you or misuse their positions, but rather than falling into their trap by playing by their rules take the right actions – two wrongs do not make one right. Leadership is not being an observer or a critic, it is about taking a stance: for or against things.

That is why what I have done is to describe my thoughts about some of the common issues that have come up- my purpose in this was not to address everything and make this a comprehensive document since that would go against what I am trying. Each person is unique, what I have described is what I feel is at the core of becoming a good professional and better human being, with this base it will be a case of working on what more you need to learn about – learning is ongoing, continuous and should be in context, your needs will evolve with time. So, for example, one of the first specific courses I did was on Negotiation skills- Getting to Yes and more recently on Mediation and in between on yoga! apart from general courses on leadership interspersed with personal psychometric tests to understand self. All supported by eclectic readings and going out of comfort zones.

And as I was writing this I came across (via Maria Popova’s Newsletter) two quotes from Aldous Huxley, which perhaps sum up what I was inadequately trying to get across:

*Knowledge is acquired when we succeed in fitting a new experience into the system of concepts based upon our old experiences. Understanding comes when we liberate ourselves from the old and so make possible a direct, unmediated contact with the new, the mystery, moment by moment, of our existence.*

He, thus, makes a distinction between Knowledge and Understanding with the former, passed between persons, but the latter being intimate and subjective, cannot be so transmitted.
He says:

Understanding is not conceptual, and therefore cannot be passed on. It is an immediate experience, and immediate experience can only be talked about (very inadequately), never shared. Nobody can actually feel another’s pain or grief, another’s love or joy or hunger. And similarly, nobody can experience another’s understanding of a given event or situation… We must always remember that knowledge of understanding is not the same thing as the understanding, which is the raw material of that knowledge. It is as different from understanding as the doctor’s prescription for penicillin is different from penicillin.

Understanding is not inherited, nor can it be laboriously acquired. It is something which, when circumstances are favourable, comes to us, so to say, of its own accord. All of us are knowers, all the time; it is only occasionally and in spite of ourselves that we understand the mystery of given reality.

So, what you need to work on, and develop, is the understanding; and hopefully what we have done here will help and set you up for the life long journey of personal development – since that is what it is, a journey. In embarking on it, you need to know yourself, where you want to be, how you will manage your journey, and since you have the basics now, you will be fine. And guess what, many people helped me along the way, and you will also find that there is a lot of goodwill and good people out there.

As my hero Forrest Gump would say: And that’s all I have to say about that. Well done on getting here. I am glad and now it’s time to set you free – not that you were ever ‘captive’ or that I did anything! What we did was talk and pass time and very often that is all that is needed. Because everything was, is and will be within you, you just need to let it out. Believe this and draw on your strength whenever needed. Feed it by remaining curious, having broader interests, talking to people, and going into nature – never forget to smell the roses- the joys of small things will set you free, and writing this Journal! You will have bad patches and fail at times and if you have not then you have not truly lived because that requires pushing the limits, but treat these setbacks to learn from and improve. Believe me and remember this: things do get better, if you hold your nerve and stay true to yourself.

I wish you the very best.

Thank you

What makes you think
I am doing you a favour
it is just the opposite

* Not sure how well known the phrase is to younger generations, but it is from ‘Hitchhiker’s guide to the galaxy’; and points out the futility of seeking answer until you know the question. The ultimate and the only question you, or anyone, is
concerned with is: “How to live a good life” and the answer is: “By being a good person” and that is totally in your control.
About me

You can read more about my work here https://www.nhs70.org.uk/story/rajan-madhok; there are more details about what is written in this document in either the resources or in the interviews.

Before signing off, let me share one more conversation, with my partner this time as I was finalising this document, and which was that I am by conventional standards a 'sham' (I am a pseudo-academic) as I have been speaking about a lot of things without having any formal qualifications in the subjects. Rather than learning theory and then applying lessons (many times) I have learnt things by doing them – harder but enjoyable and may be more useful and long lasting as I have owned my learning. I used to find many courses constraining – boxing me with formulaic teachings, and struggled. May be sometimes it is better not to know theory which can constrain you!

Deconstructing problems and reconstructing solutions that make personal sense is the ultimate education. And this is my rant - I am sad about the state of education, which may be getting better for technical things but is now appalling for human development – and we are all losers for this. You may want to see Resource 6 from the above website which is an anthology about my teachers.

Whether what I have said over the years proves the theories or goes against them is not for me to say; suffice to say, in my defence, that 'proper' discussion is the only way, both parties learn and improve as a result. And with that caveat do get in touch: madhokrajan@gmail.com if you want.

NOTE: The pictures are from the internet; I am thankful and apologise if I have broken any copyright rules, and will make amends if you let me know.
**Over to you**

As you use this Journal and talk to others, ask questions and listen, observe with an open mind, add more topics, document your learning from courses/projects/meetings, write in prose or verse, draw or doodle. More importantly act on what you learn slowly and steadily, all as part of your journey of improvement.

Look after the Journal and it will look after you!

You can do it.

All the best.
With a lift of his chin and a bit of a grin, 
Without any doubting or quiddit, 
He started to sing as tackled the thing 
That couldn’t be done and he did it.

—Edgar Guest