

How should I prepare for a consultant interview?

Taking the next step up can be daunting, but intensive preparation is the key to success, **Abi Rimmer** hears



“You’re joining a family”

Julie-Ann Maney,
consultant in paediatric
emergency medicine
in Belfast

“I have been a consultant for eight years and have prepared many friends and colleagues for the biggest and most daunting interview of their professional lives. It means so much and is such an important milestone.

“This interview is the culmination of years of training. The best advice I was given as a junior, and the advice I still offer, is ‘the training scheme is the longest interview you will ever do.’

“When you join a consultant team you are joining a family and you will have to fit in. The trust or health authority wants you to be able to do the job. Your new colleagues want that too but, more importantly, they want to know if you’re a nice, kind, and reasonable person. Will you have their backs when they need you? Will you swap into a Friday night on call because they have a family emergency?

“Be prepared for the interview. Know the management structure and the who’s who of hospital bureaucrats. Meet the clinical director or whoever is stated in the advertisement. Consider a mock interview with someone who will be brutally honest and constructive with their feedback.

“On interview day, dress to impress, take your time, and show the panel how you are going to add value to the organisation. The interview is the time to blow your own trumpet and blow them away.”



“Meet the panel in advance”

Perbinder Grewal,
consultant vascular
surgeon at University
Hospital Southampton

“Preparation for the interview is key and it’s imperative that you research the job and the hospital. This can take many forms, from ringing the registrar on call to researching the trust on Google. Each trust will have information on its website, such as annual accounts, minutes from annual meetings, and recent Care Quality Commission reviews.

“These will give you a good overview of the trust’s health and help you understand the local issues. If your specialty has a national outcomes registry, this will show you where the trust sits nationally. It’s also important to make sure that you’re happy with the job plan that is being offered.

“A pre-interview visit to the hospital is mandatory—you will be able to look around and meet the staff. Your shortlisting letter should give you a list of all the members of the appointments advisory committee. You need to try to visit most, if not all, before the interview. Try to gauge what they are looking for in the candidate. The questions you may want to ask could be regarding the trust’s future strategy and the specialty’s position within that. If you’re giving a presentation on the day, ensure that it is focused on the job you are applying for with data from the trust.

“Try to rehearse common questions with consultants who regularly interview to gain feedback. You must be ready to talk positively about yourself as a doctor and as a future colleague.”



“Spend time getting it right”

Rebecca Lawrence,
consultant psychiatrist
and clinical director for
NHS Lothian

“Preparing for a consultant interview may be one of the most important things you ever do. Treat it with respect and don’t be afraid to spend time, and even money, on getting it right. In some specialties it is currently a buyer’s market but the right job, in the right place, at the right time may still be hard to come by. The right colleagues are even more important. There’s a fine balance between over and under preparing for the interview. Consider an interview course, particularly if you are anxious. Or practise with a friendly colleague.

“On the day wear something smart but comfortable. Ask for water (it should be offered). Try to look at everyone in turn.

“Be prepared for the easy questions—why you want the job, why they should employ you, and what you are good at. The hard ones will be hard anyway, but if you know your stuff and take your time, you will manage. This is not the time to be modest—which may be difficult if you personally know one of the panel. If you come out squirming at your own boastfulness, it may actually have gone extremely well.

“There will be factors that you cannot influence, like bad luck, being unwell on the day, or an exceptionally good local candidate. If you don’t get the job, allow yourself a bit of time, get feedback, and move on. There is no one right job, and there will be another one for you.”



Simukai Chigudu, 32, is an immigrant from Zimbabwe who at age 16 was thrust into a Catholic boarding school in England, from which he went to Newcastle University to read medicine. He wrestled with a search for identity before experiencing an epiphany that inspired him into global health activism when working in San Francisco at the Global Fund for Women in the summer of his second year. His forthcoming book, the study of a catastrophic cholera outbreak in Zimbabwe in 2008-09, explores the links between politics, economics, and medicine. He is now an associate professor at the Oxford Department of International Development—appointed, unusually, only months after completing his PhD. His Twitter feed reveals that he has a thing about Kanye West.

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Simukai Chigudu The politics of epidemics

What was your earliest ambition?

I first moved to the UK from Zimbabwe to study medicine when my country was in the early stages of a dramatic political upheaval. Thus my earliest ambition was to become some kind of global health expert.

What was your best career move?

I left medicine after three years to retrain as an academic social scientist, specialising in politics and international development. I've recently been appointed as associate professor of African politics at Oxford University, where I'm currently completing my first book, and where I teach on a masters degree in development studies.

What was the worst mistake in your career?

When I was a junior doctor my team and I failed to recognise meningitis in a newborn infant quickly enough. Although it was an indeterminate clinical scenario, I wish that we'd been more cautious and escalated it even a few hours earlier.

What single change would you like to see made to the NHS?

A halt to, and reversal of, its insidious privatisation.

What do you wish that you had known when you were younger?

The value of learning multiple languages, both African and European.

What do you usually wear to work?

Jeans and an African print shirt.

Which living doctor do you most admire, and why?

Paul Farmer, a physician-anthropologist whose scholarship first challenged me to think about infectious disease as the biological manifestation of social inequality. This informed my research on the politics of epidemics in Africa.

What is the worst job you have done?

Neonatal SHO, in my second year as a junior doctor. It was incredibly stressful, as I felt both underqualified and overworked.

What book should every doctor read?

All doctors interested in working in resource limited settings should read Julie Livingston's *Improvising Medicine: An African Oncology Ward in an Emerging Cancer Epidemic*. She paints an intimate portrait of cancer as a social rather than individual experience.

What is your guiltiest pleasure?

I'm an avid fan of Marvel superhero films.

Where are or when were you happiest?

With close friends, listening to live hip hop, and when I'm free to read, write, and think as I like.

What television programmes do you like?

The Wire, *BoJack Horseman*, *Rick and Morty*, and *Atlanta*.

Summarise your personality in three words

Cerebral, silly, passionate.

Is the thought of retirement a dream or a nightmare?

A distant dream.

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