

# Time management

## Introduction

There is never enough time for a doctor to do everything that he/she wants to do. Time management is a challenge for every grade of doctor. However, it is often hardest for the most junior doctors, since they have the least control over their work.

## Principles of time management

The principles underlying good time management are quite straightforward. Putting them into practice is harder and takes discipline, but can be very rewarding. These principles are:

1. Determine what needs to be done
2. Decide who is going to do it
3. Prioritize
4. Make sure it gets done
5. Do not waste time.

## Determine what needs to be done

When you are a preregistration house officer (PRHO) most of the work you have to do is decided by your consultant and specialist registrar (SpR). It is important to write down the tasks you are given. Keep a list of your patients' names, hospital numbers and wards on a single piece of paper or on a personal digital assistant (if you use the latter, check that it complies with your hospital's data protection policy). Add the new day's tasks to the list at the time you are given them. Keep important contact telephone numbers (e.g. radiology, biochemistry) on the same list.

As you become more experienced you will initiate some of the jobs that need to be done for your patients. You will also start to think about a wider range of things to do. It is good practice to read about each patient's clinical condition in textbooks or online. You should also read up on each drug you prescribe, and in particular find out important side-effects. You will start to have ideas for audit projects or

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research. Before long your list of things to do will have become impossibly long. At this point resist the temptation to give up and just do the tasks you are given. You can find a way to do more if you get organized.

**'What is this life if, full of care, you have no time to stand and stare?' (Davies, 1973)**

While you are unlikely to have time to 'stand and stare' during a consultant ward round, it is important to take time to reflect on what you experience in medicine. You will inevitably be involved in patients' lives and be touched by tragedy and anger. You need time alone or with colleagues to talk through what happened. You need time to consider whether you could or should have handled things differently. Plan to take your lunch breaks with a colleague so you can discuss difficult things that have happened to you.

It is also important to ensure that you use your leisure time as an effective contrast to work. Try to continue sporting or musical activities that you did before you qualified, and do not forego them simply because you sometimes have to work evenings or weekends.

## Decide who is going to do it

In clinical firms it is traditionally the senior doctors who decide what needs to be done for ward patients and the junior doctor who does most of it. However, there are exceptions to this. Ensure you have a good working relationship with the nurses, health-care assistants and ward clerk. Increasingly junior doctors are not expected to do routine phlebotomy or administrative tasks such as finding beds, fetching radiographs and filing routine results. However, you are still responsible for ensuring results are obtained and passed on to the senior doctors. Junior doctors need to learn to give clear requests and instructions where appropriate, and to be polite at all times.

There will also be some tasks which you are given that you are not competent to do. These may be obvious; for example a lumbar puncture when you have never

done one before. Others may be less clear, such as taking consent for an operation or making an urgent referral to another consultant when you do not clearly understand the reason for the referral. If you do not feel competent to do a task then you must not do it. Ask a more senior member of the team to do it with you. This ensures that the job is done effectively, provides the best care for the patient, and helps you to learn to develop competence in this subject.

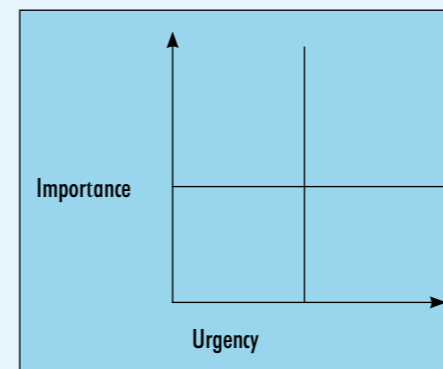
## Prioritize

Prioritization is one of the most important lessons to be learned as a doctor. As a junior doctor you should organize your task list each day and pool similar jobs.

For example you should collect together all your radiology requests for the day and take them to discuss with the radiologist at an early point in the day. By meeting face to face you can explain the relative urgency of each request and clarify the clinical question being asked. Similarly a useful afternoon task is to write out blood test request forms for the next day so that they are ready for the phlebotomist first thing in the morning.

There are two useful tools to help with prioritization of work. The first is the importance/urgency matrix (Figure 1). Tasks which are both important and urgent should be at the top of your priority list, followed by those which are important but not urgent. For tasks which are not important you should question whether they need to be done at all. As a junior in the team you should not drop any tasks from your list without discussion, but as you become more senior and you are the person generating the tasks this becomes increasingly relevant.

Figure 1. Importance/urgency matrix.



For example you may have agreed your objectives with your educational supervisor to include writing up a case report and carrying out an audit. As the job progresses you read more journals and find that few now publish case reports. Your SpR points out that many audits can lead to publications which carry more weight than case reports do. You go back to your supervisor and agree that the case report will be useful in your portfolio but that you do not need to try to get it published.

The second useful tool to remind you how to prioritize is the 'pickle jar'. Imagine a jar full of pickles. Even though there is no room for more pickles, you can drop in some small beans. When it is full of beans, there is still space for some sand. And when it is full of sand you can add some water. Now think of the jar as your work for the day. You have to write up your patients' notes, read your emails, file test results and fill in a long complex form for the social worker to facilitate a long-stay patient's discharge. It is all too easy to 'ignore the pickle' and fill the day with the easy routine tasks and leave the difficult form for tomorrow. Nevertheless that is the job which should be done first, since if you leave it this will delay the patient's discharge. This is similar to the situation that faces medical students approaching exams. The important task is revision, but it is easy to justify cleaning the flat, doing the ironing and telephoning your grandmother instead.

## Make sure it gets done

The list of patients and tasks is key to getting the work done. Tick off each job as it is done. This makes you feel good and ensures that no task is forgotten. The maxim 'Do today's work today' is crucial. Anything important and urgent should be done promptly. If you really don't have time to do all the important and urgent jobs, then can someone else in the team help you? Working flexibly with others means that when one of you is busy, the others help out. It also improves continuity of care since a wider group of people is familiar with the patients' problems.

## Do not waste time

Ensure you always have something with you to do in case you are kept waiting, for

example carry a medical journal in your bag to read. Use a diary so that you do not commit to doing two things at once. If your job involves working on more than one site, or shift-working, make sure that other members of the team know when you are and are not around and make it easy for them to leave messages for you. This will reduce the number of bleeps that interrupt when you are doing other work. Hand over to others properly, and make sure you receive good handovers too. You can waste a lot of time looking for a patient when you haven't been told which ward they are on.

For fixed commitments such as outpatient clinics or operating lists do not turn up late. This wastes everyone's time and will rapidly make you unpopular. Instead, attend on time and work well. You may find that the session then finishes early which will certainly enhance your popularity. Good working relationships with colleagues will improve patient care and save you time.

## Conclusions

Some doctors become very skilful at time management. The techniques can be learned. They enable you to be more in control of your work, and more productive, achieving a wider and more interesting range of activities. Good time management should apply both at work and at home. **BJHM**

*Conflict of interest: none.*

Davies WH (1973) In: Gardner H, ed. *New Oxford book of English verse*. Oxford University Press, London

### Further reading

[www.bambooweb.com/articles/t/i/Time\\_management.html](http://www.bambooweb.com/articles/t/i/Time_management.html)  
[www.insight.org/archives/2003/07/01/pickle-jar-theory-of-time-management](http://www.insight.org/archives/2003/07/01/pickle-jar-theory-of-time-management)  
[www.ilifecoach.com](http://www.ilifecoach.com)

## KEY POINTS

- Determine what needs to be done.
- Decide who is going to do it.
- Prioritize.
- Make sure it gets done.
- Do not waste time.