The present doctoral study aims to identify the mechanisms by which a Romanian doctor can develop a professional career in accordance with personal expectations, being educated and trained in the country and remaining to practice in Romania. Recognizing the career needs of physicians, the life values that determine them in professional decisions in the context of the functionality of the medical and health education and training systems in Romania can generate policies for managing human resources focused on individuals, on their valorization and in the context of certain cultures. well-defined organizational.

The motivation for choosing the research topic arises from the professional practice, from my experience as a career counselor at a university with a medical profile. Thus, during the current counseling activity I found that, during the faculty, most medical students lose their professional marks. Some of them no longer identify the reason for the professional choice, and others find it difficult to recognize the medical specialty that best suits them, leaving the professional decision to chance. Thus, if the professional choice does not have a strong motivation, an unpaid career is difficult to manage. In this context, even if the human resources policies within the Romanian medical system are centered on the professional development needs of the actors, the lack of knowledge of these needs leads to the impossibility of developing applicable strategies, with efficient results. Of the more than 200 students advised during the last six years, both in individual and group sessions, at about 25% we identified the loss of professional motivation and at 38% the inability to choose a medical specialty based on personal strengths, values own and professional development desires.
The research topic is supposed to contribute to the finalization of the process of self-knowledge of the graduates of medical studies, general medicine profile, by improving their professional and career skills, by raising awareness of the professional perspectives existing after finishing the residency, as well as by identifying the opportunities for developing a personal careers on the Romanian medical services market, both in the state environment and in the private environment, without omitting the chances of professional development both as a researcher and as a university teacher.

The main objective of this research is to observe, identify and present new perspectives on how the educational-formative process influences the development of a successful career, both internal and organizational, in the current medical system, starting from the individual needs, values and needs of practitioners.

The specific objectives of the entire research involve: the coherent definition of the professional path of the Romanian medical practitioner on the internal labor market; identifying the strengths and weaknesses of the internal medical education and training system as compared to the European medical education and training; finding anchoring career of the main actors in the health system since becoming the first professional action - admission to college and when operating in the labor market; highlighting how the trainers in the medical system integrate and adapt to the organizational culture and the way they manage to manage their individual careers.

The content of the research paper is made so that we can illustrate each time by calling on the specialized literature, as well as through the examples of good practices in relation to the main issues related to the proposed topic. Also, we consider that this content respects the rigor of scientficity from a theoretical and practical point of view. Therefore, the appeal to national and international literature, the examples of specialty practice in relation to phenomena, scientific explanations, all contribute, in our opinion, to achieve qualitative content of this doctoral research.

The structure of this work is dimensioned on five research axes with distinct characteristics. Also, the components that refer to Introduction, Summary, Final conclusions, proposals and subsequent directions of research, Bibliography, are not missing from the illustrative table of the content. We also mention that in its structure there is also a list of abbreviations, figures, tables and graphs used, as well as a list of annexes.

In CHAPTER I (General considerations regarding vocational education and training in the medical sector) it was structured in three parts, which aimed at briefly presenting the defining elements in the process of medical education and training - the characteristics and particularities of these notions, as well as the presentation of the key stages in completing the professional training. In the first part of the research axis were identified the notions of formal education, non-formal and informal education, the differences between these concepts and the way they are interconnected in the process of professional training of an individual. Also, the principles of education were presented both from the point of view of some brand educators and from a sociological point of view. Also in the first subchapter were described in general the characteristics of vocational training and training, the differences between education, training
and training and their role in the creation of the professional, regardless of the sector in which they operate.

In the second part of the first chapter were presented the essential characteristics of education and vocational training in the analyzed sector, starting from the university training, passing through the choice of the field of specialization and presenting the role of the resident in medical training in Romania as well as the particularities identified in the preparation of the internal medical career.

The last part of this research axis was dedicated to presenting the specifics of education and training in some European countries. They were chosen based on the attraction of the professional migration of Romanian doctors. Thus, Great Britain, France and Germany were taken into consideration.

After presenting the conceptual models of education and training as well as the ways in which they are carried out both in Romania and in some representative countries in Europe, CHAPTER II \textbf{(Professional development, counseling and career guidance - essential components in medical career management)} was dedicated to medical career management, the role that professional development as well as career counseling and guidance play in this process. It was also structured in three parts.

Through the first part of the second axis of research I analyzed the concept of professional career, starting from the notion of individual career and reaching the role that the individual career plays in the organizational career. The second part was dedicated to the study of the concepts of medical career management and human resources in the medical system by presenting the modalities of professional development in the Romanian medical sector as well as the role that continuous medical education plays in the professional practice. It contains an analysis carried out in the period 2012 -2107 on the development of an academic career parallel to the medical career, by following the activity of development of doctoral schools - of the qualifications obtained by the teaching staff and of the doctoral degrees in medicine at the University of Medicine and Pharmacy „Gr. T. Popa“ from Iași (UMFI), University of Medicine and Pharmacy „Victor Babeș“ from Timișoara (UMFT), University of Medicine, Pharmacy, Science and Technology from Târgu Mureș (UMFȘTTM), University of Medicine and Pharmacy „Carol Davila“ from Bucharest (UMFB), University of Medicine and Pharmacy from Craiova (UMFCv), University of Medicine and Pharmacy „Iuliu Hațieganu“ from Cluj Napoca (UMFCN).

The last part of the second chapter of the thesis presented the role that counseling and career guidance plays in the management of human resources but also the particularities of this type of service encountered in the medical sector. Both the internal and external environment were analyzed, by presenting counseling activities offered to students from prestigious medical schools in Europe, such as Universite Monpellier and Universite Aix Marseille in France and Universite Aix Marseille in France and Universite Aix Marseille in France. University of Cambridge and University of Oxford in the United Kingdom.

Through the CHAPTER III \textbf{(Diagnosis of the Romanian medical system and of the educational-formative process of profile through the prism of the strategic analyzes PESTEL}
the specific part of the work began. Thus, an analysis of the Romanian medical system and the process of medical education and training was performed. In order to diagnose the two systemic components in which the medical career takes place, we used as working methods the PESTEL analysis and the qualitative component of the SWOT model.

The third research focus included two distinct parts, each with its own work objectives. In the first part, "Evaluation of the Romanian medical system through the PESTEL analysis", the analysis of the political, economic, social, technological, ecological and legislative factors was performed with the following objectives: identification of the mechanism of functioning of the medical system in Romania and of the levers that support it; the recognition of the influencing factors in the evolution of the Romanian medical system with direct implication on the development and career management of the practitioners in the system; observing the relationship between the internal systemic development and the strategies in the field, established at European level; identifying opportunities for real integration of the Romanian health system in international policies. Following the research, all the specific objectives of this subchapter were achieved.

Through the second part of the third chapter, "Strategic evaluation of the educational-formative process in the Romanian medical higher education sector using the SWOT model", I conducted a study on the general medicine profile of the universities with medical profile in Romania. The educational institutions analyzed were: University of Medicine and Pharmacy „Gr. T. Popa“ from Iași (UMFI), University of Medicine and Pharmacy „Victor Babeș“ from Timișoara (UMFT), University of Medicine, Pharmacy, Science and Technology from Târgu Mureș (UMFȘTTM), University of Medicine and Pharmacy „Carol Davila“ from Bucharest (UMFB), University of Medicine and Pharmacy from Craiova (UMFCv), University of Medicine and Pharmacy „Iuliu Hațieganu“ from Cluj Napoca (UMFCN). Their SWOT analysis was performed based on ARACIS reports, internal documents and institutional reports and external factors of systemic influence identified by the PESTEL model, from the previous subchapter.

The objectives of the study on the education-training system in Romania through the SWOT analysis are: to identify the common and specific institutional features that define the medical education-training process in Romania; the recognition of the way of integrating the Romanian medical education into the European context; identifying the methods by which institutional competition is stimulated; stimulating future practitioners to retain them in the university education system; identifying strategies through which the education process can help young doctors to develop professionally and to evolve in their careers. Following the research, all the specific objectives of this subchapter were achieved.

CHAPTER IV of the thesis (Empirical research on the application of anchor theory in medical career management) was dedicated to the identification of the dominant and recessive career anchoring models encountered in practitioners in the medical sector, but also in those who intend to pursue this career. Career anchor theory is a concept developed by Schein E.H. which states that each individual, in choosing a career, is anchored in a set of „motivations, attitudes and values that determine and constrain a person's career“. The career anchor in the
The author's concept is thus viewed as a „descriptive and predictive tool“ that is found „inside the person and which functions as a set of determining forces and constraints on decisions and choices in the career“. To identify the dominant career anchors existing in the medical sector we used the Career Guidance Inventory (IOC), developed by Igbaria M. and Baroudi J.J. in 1993 (A short-form measure of career orientations: A psychometric evaluation), which contains 40 statements, five statements specific to each anchor identified by Schein E.H.

In order to carry out the study, two samples of subjects with specific characteristics were taken into consideration. The first lot contains 316 subjects, medical practitioners who carry out their professional activity in the Oltenia Zone. The second study group consists of 301 subjects, high school graduates who intend to pursue a medical career. All the subjects of the second group took the examination at the Faculty of Medicine of the University of Medicine and Pharmacy of Craiova in 2018 - 2019. In order to facilitate the recognition of the two study samples, the first was defined as Lot 1 and the second as Lot 2.

The carrying out of the analysis of this research axis had the following specific objectives: identification of specific anchoring models for high school graduates who intend to pursue a medical career; the recognition of specific anchoring models for career development in the Romanian medical sector, in the current context, encountered by practitioners in the sector; analysis of the professional anchoring models identified in the future practitioners in the medical sector; identifying socio-professional „typologies“ specific to physicians, based on the dominance of career anchors; empirical analysis of the existence of correlations between the professional aspirations identified on the basis of the anchors and the systemic reality existing in the management of human resources in the medical field. Following the research, all the specific objectives of this chapter have been achieved.

The working hypotheses from which he departed in carrying out this research axis of the paper were the following: the choice of the medical profession is vocational; In medicine, practitioners are more motivated by the development of a successful career than by job security or professional gain; there is not a single dominant career anchor throughout the medical professional; there are significant differences between men and women on each of the career anchors measured by the IOC; there are significant differences in anchoring across different age categories in the study samples; the dominance of certain anchors is also correlated with the "call" of the teacher. Thus, there will be anchoring differences between physicians only as practitioners in the education system and those who have chosen the role of trainers in the education of new generations.

For easier interpretation of the results, these have been graphically or tabularly transposed. In the case of the working hypotheses issued, following their confirmation or rejection, a number of conclusions were generated. The results of the study showed that most of those who practice medicine in Romania prefer to combine public and private professional practice but are also interested in the parallel development of a university career.

In CHAPTER V (Empirical research on career management and staff integration in the organizational culture. Case study - UMF from Craiova) we conducted an institutional
analysis regarding the identification of the organizational culture, the working climate offered by the organization and the way in which it relates to the career. medical trainers. The study was carried out by processing the data obtained from the application of a questionnaire - survey on a number of 124 persons involved in the medical education process that carries out its activity within the Medical Faculty of the university institution with medical profile. In the study were involved both the teachers of the institution and the auxiliary teaching staff.

The general theme of the last axis of research aimed to identify attitudes, opinions and behaviors of UMF employees in Craiova, Faculty of Medicine, regarding the career and professional development within the institution.

The objectives we have pursued concern: determining the affiliation of the employees of the Faculty of Medicine of the UMF from Craiova to the organizational culture; identifying the degree to which the staff at the Craiova medical university center are satisfied with the organizational climate; recognizing employee views on organizational management and how it relates to employees; identifying the stress level of the employees at the institution level; the recognition of the attitudes and opinions of the teaching staff and the auxiliary teaching staff on the individual career and its development.

The general assumptions from which the research was started are the following: the personnel involved in the medical training process are satisfied by the UMF as an organization; employees are integrated into the organizational culture; for trainers in the medical system between career and personal life there must be a balance; the employees are satisfied with the evolution of their career; younger employees with lower professional positions have less confidence in professional expertise than employees with seniority and higher hierarchical positions.

The part dedicated to the conclusions followed the way in which the research objectives were achieved and if the working hypotheses, based on the obtained results, were confirmed or rejected by the empirical studies performed. In addition, this part includes proposals for further developments that may be completed to complete this study. Thus the results obtained in the thesis „Strategic managerial approaches on professional development and career evolution in the medical sector in Romania“ can be practically transposed and used by other researchers.

**Personal contributions regarding the results obtained from the doctoral study**

If we refer to this study and if we analyze the main results obtained from the analysis related to this doctoral study, then their synthesis implies taking into account coordinates of a pragmatic and theoretical nature.

In other words, we consider that our doctoral study shows very clearly how the main actors operating in the Romanian medical system relate to their own career. To summarize, we can say that the main contributions of our doctoral study consisted of the following aspects: (1) The approach we assumed was an original one in the sense that until now there has been no similar research addressing the problems of professional development and management of medical careers in Romania. In other words, through the methodology we have taken into account, we have only opened new research horizons regarding the problematic and implicitly
the teamwork addressed. (2) Another aspect that I brought to the attention in a specific way was the one related to the identification of the Romanian doctors' career anchoring, the recognition of their professional motivations. The results of the study of the dominance and recessivity of the career anchors determine us to consider that it is necessary to develop a specific policy of the sectoral human resource, which will focus primarily on the retention of medical personnel within the country's borders. The major challenges in human resources management in the Romanian medical sector become as follows: the correct identification of the qualified human resource, the selection of the personnel based on the individual performance criteria, the mobilization of the active workforce, its motivation and the continuous professional development focused on the health needs of the population and in consistent with the technical-scientific sectoral progress. (3) The attempt of the Romanian medical universities to compete with the European institutions of renown and not only will in the future lead to an increase in the importance given to career guidance and counseling services because it is not sufficient to attract individuals interested in pursuing a medical career in the system, but also keeping them within the borders after the training stages. Otherwise, we will only become a source of cheap and well-trained workforce that we are willing to export after we have trained for free.

The recognition of the Romanian medical education internationally and the increase of its quality is not beneficial internally without the introduction of economic and social policies that ensure the retention of human resources in the system and of professional stimulation focused on the needs of the individual and not applied randomly. But without knowing exactly the current situation of the human resource existing in the system at the moment, available on the internal labor market, without knowing what its real needs are, the measures taken can only be populist without generating concrete results.

Romania needs well-trained doctors, and the country's leading educational institutions prove that they are capable of providing quality human resources. Unfortunately, without the involvement of all the actors that establish the functionality of the system, the migration of healthcare professionals will continue, and the quality of the human resource training will benefit the developed countries that will continue to invest in attracting quality workforce.

**Limits at the research level**

The carrying out of this doctoral work also involved a series of limits given its complex character: (1) The frequent legislative changes in the medical education system did not allow the coherent analysis of some defining processes for medical education and training such as the residency and the Ph.D. (2) The SWOT and PESTEL analyzes carried out were based on the available documentary data, the access to certain relevant information being limited in certain respects. (3) The sampling of Study Lot 1 in the analysis of the dominance and recessivity of career anchors was quite difficult, the practitioners in the system being quite reluctant regarding the participation in studies regarding their professional development. The fact that the study participants were selected from a single geographical area, although the conclusions of the research are representative, we consider that their extension at national level should be carefully considered and analyzed. (4) In the empirical study conducted at the UMF in Craiova, an initial
reluctance of the respondents was observed in order to participate in the study. Thus, there is a suspicion that in some questions, the answers provided would have been more accurate (as subjects think the answer should be) than real. The final results correlated with those obtained in the study of the anchors, however, lead to the idea that they did not have a significant influence on the research results.

**Further developments**

The cultural and social values of a people have an extremely important influence on the way of anchoring the career in the medical sector. These influences can be found both in the way of valuing the individual and the projection of the personal career in the organizational career and the culture defined within it and assumed by the employees. In Romania, general managerial competence is not specific to the medical sector. Thus, the professional role of the doctor must remain in the area of the executing actor of the medical act and not be involved in managerial policy strategies.

Our doctoral initiative led to the creation of a portrait of the Romanian doctor, a portrait that can be extremely important in establishing the policies of systemic human resources management. However, it should not eliminate from the analyzes of human resource policies the identification of the individual needs of each healthcare provider with which it interacts.

Starting from the results of our doctoral study it is observed that the Romanian high school graduate who intends to become a doctor is motivated in choosing the vocation profession, by the competitive spirit. At the beginning of a career, nothing can be impossible. He has the feeling that his actions are a major contributor to people's support and attach great importance to the things they have done. For this, professional success is measured by the feeling that actions have helped society in a way, that they can influence the policies of the organizations and can calibrate the personal needs with the organizational ones.

During professional practice the motivation migrates to the need to find an efficient means of integrating the needs of the individual, the family with the career. Thus, the ability to balance work and lifestyle, flexibility, identifying employers who understand and respond to personal needs become important. Thus the vocational character loses in intensity due to the need to balance the work with the needs of the lifestyle. Human resources management policies must take into account these needs, identified in the present research by dominating the career anchorage.

The portrait of the Romanian doctor who can be drawn after this study is of a professional who chose his vocation from the vocation, measures his success through professionalism and not by function, which is motivated in life by finding a balance between professional practice and personal life. The Romanian doctor is not a leader and does not have general managerial skills. Thus, his involvement in the management processes must be made in certain parameters, only after identifying the personal motivation to occupy such a position and following specific training programs that develop managerial competences based on individual skills.

Identifying dominant or recessive career anchors in the medical field can help operators in human resources management to create specific organizational strategies for managing human
capital, taking into account the motivations and values of the individual but also how they are related to his own career success.

The results obtained in this paper can also be used in the counseling and career guidance of medical students or students who intend to pursue a medical career. Anchoring in the medical career, in Romania should be analyzed by medical specialties, to see exactly the correlation between the dominance of the anchors and the chosen profession as well as the measurement of the degree of satisfaction depending on the choice made. In addition, in subsequent research it could be identified the moment and the triggering factor or factors that determine the change of the dominance of the anchors at different stages of the medical career.

Starting from the fact that the anchor theory was launched by Shein E.H. Following a study conducted on managers, and managerial skills have come out of recession in the present study, a valuable analysis in the management of human resources in the medical field may represent the identification of the anchoring in the career of the doctors holding management positions. Thus, for managers in the medical system, medical professionals should carry out training and training programs in the management field in order to be able to develop specific skills for the hierarchical position. In addition, these training programs should contain theoretical support specific to the management field, currently excluded from the education and vocational training curriculum. The master programs existing in the study programs of the universities with medical profile and intended for the management of the hospital units are necessary but not sufficient because the trainers in the field are mostly doctors, not economists specialized in management and organizational strategies.