

Mentoring in Medicine

April 15, 2015

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Key objectives

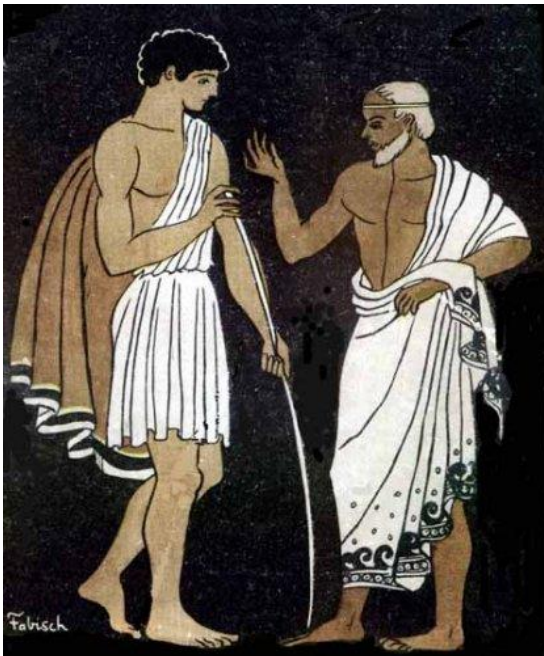
1. Discuss forms of mentorship
2. Discuss characteristics of an ideal mentor
3. Review benefits of a mentoring relationship

Mentoring in Medicine: Outline

- Who and what?
- Roles of the mentor
- Personal experiences
- How we can be involved

Who and what?

- Mentor: ‘a wise and trusted counselor or teacher’
- ‘Mentor’ derives from the character Mentor in Homers’ *Odyssey* who educated and shaped the ethical character of Ulysses’ s son



Oxford English Dictionary, 2000

Who and what?

- Apprenticeships, trade guilds
- Modern concept of mentoring expanded in the US
 - Feminist movement
 - Business schools

Who and what?

- Mentoring: ‘the process by which an experienced person provides guidance, support and encouragement to a less experience person’
- A long-term relationship with a responsibility to provide support, knowledge and impetus that can facilitate professional success

Purpose of mentoring

- Help guide career paths and professional advancement, research productivity
- Impart knowledge and techniques (teaching, supervision)
- Model professional conduct: communication, humanism, ethics

Purpose of mentoring

- Mechanism to improve the success of those perceived as disadvantaged minorities in the medical system
 - Gender, cultural minorities

Types of mentorships

- Apprenticeship model
- Cloning model
- Nurturing model
- Friendship model

Mentorship models

- **Apprenticeship model:** hierarchy of professional positions and the trainee is mentored and taught by a more experienced professional
 - Less personal
 - Professional relationship
 - Residency training, work shadowing/observation

Mentorship models

- **Cloning model:** based on role modeling; the mentor is planning succession and the mentee is groomed into the role
 - Junior staff

Mentorship models

- **Nurturing model:** a safe and open environment in which mentees can discuss personal issues, learn, try things for themselves, with their mentors acting as resources and facilitators
 - Residency training
 - Residents mentoring juniors, UG students

Mentorship models

- **Friendship model:** when mentors and mentees are close and at the same professional level, rather than being involved in a hierarchical relationship
 - Peers

Mentorship arrangements

- Mutual respect and open communication
- Confidentiality
- Clear expectations in some areas of mentorship, i.e. research: intellectual property, authorship

Benefits for the mentor

- Satisfaction of helping others
- Collaboration
- Professional development
- Commitment to your profession, field of practice

Benefits for the mentee

- Increased confidence in personal and professional successes
- Excitement in career choice
- Networking opportunities
- Career coaching, support
- Advice with work-life balance
- Research guidance



Initiation and management

- Formal process in some institutions, residency programs
 - Need to consider interpersonal fit
 - Provision of a list of potential mentors preferable to assigned mentorship
 - Time is required
 - Separate role from assessments
- Should be recognized a professional activity
- Should be a ‘no-fault’ relationship that either party can terminate without risk

Initiation and management

- Informal arrangement, mentee gravitates towards a respected mentor
 - Staff physicians, peers, relatives, family friends
 - Specific characteristics: profession, gender, research interests.....
 - Mentee must be proactive and willing to reflect on feedback, face weaknesses
- Finding suitable mentor may require effort and persistence



D. H. H. E. C. C. H.

“I could use a mentor. But what I really need is a nap.”

Initiation and management

- Study participant;
 - *‘Advice that I give to new faculty members is to go set up an half hour appointment with everyone in your department. Just go sit and talk with them and that way you start to find out who would be the natural mentors.’*

Jackson VA, Palepu A, Szalacha L, Caswell C, Carr PL, Inui T.
‘Having the right chemistry’ : a qualitative study of mentoring in
academic medicine. *Acad Med* 2003;78:328-334.

Initiation and management

- Study participant;
 - *‘I would persevere and if you don’t find someone who’s suitable in your department or in your institution, then think of people beyond.... People aren’t just going to fall into your lap and say, “I want to be your mentor”.’*

Jackson VA, Palepu A, Szalacha L, Caswell C, Carr PL, Inui T.
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Examples of mentorship

1. Career counseling

- Academic vs. community setting
- Academic pursuits in residency years
- Applying for grants, awards
- Applying for fellowships, staff positions

Examples of mentorship

2. Support, 'nurturing'

- Resident/student/staff physician stress
- Exam preparation
- Mental health problems

Examples of mentorship

3. Supporting junior residents, students
 - Support for increasing responsibility, decision making
 - Positive feedback

Assessment of mentors and role models

- Survey of qualities of good role models:
 - Time/effort spent teaching
 - Emphasis on physician-patient relationship
 - Teaching of psychosocial aspects of medicine
 - Teaching clinical reasoning
 - Enthusiasm

Assessment of mentors and role models

- Trainees at different stages value different abilities:
 - Medical students value outstanding didactic teachers
 - Residents value direct feedback, help with professional opportunities, training in professional behaviours

Ideal characteristics of a mentor

- Personal:
 - Altruistic
 - Understanding
 - Patient
 - Honest
 - Responsive
 - Trustworthy
 - Nonjudgmental
 - Active listener
 - Motivator

Assessment of mentors and role models

- Relational:
 - Accessible
 - Dedicated to supporting the mentee
 - Able to identify strengths in the mentee
 - Able to assist the mentee in defining and reaching goals
 - Hold high standards
 - Compatible with regards to practice style, vision, personality

Assessment of mentors and role models

- Professional:
 - Knowledgeable, experienced

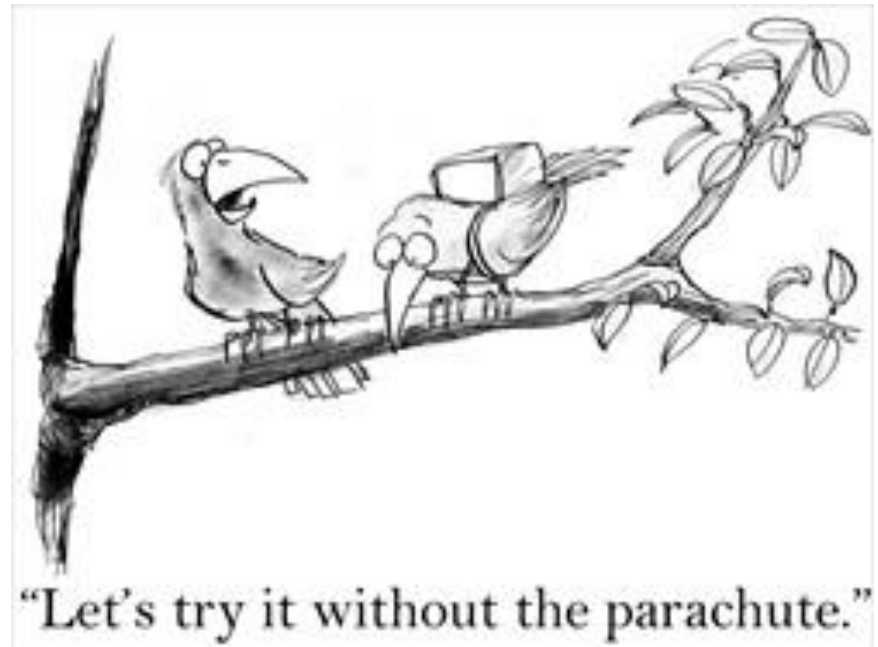
Assessment of mentors and role models

- Mentors should reflect on their performance and interactions



Assessment of mentors and role models

- ‘Adaptive mentorship’: adapt level of supervision to mentees levels of competence and confidence



Personal experiences

- ‘Hamid’ , Med 4, Internal Medicine service
 - Shy, struggling, lacks confidence
 - You are the senior resident on the service, what do you do?

Personal experiences

- Emily, PGY2 resident
 - Seems overwhelmed, depressed mood, tearful outbursts
 - You are junior staff in her program, what can you do?

Personal experiences

- Jane, PGY3 resident
 - Excelling in her program, strong resident group in her PG year, she feels less capable than her peers
 - You are her assigned mentor, what do you do?

Personal experiences

- Daniel, junior staff, first year in a specialty practice
 - Overwhelmed, has difficulty making clinical decisions, spends too much time at work, unable to complete tasks
 - What should he do?
 - What can you do?

Personal experiences

- Anna, junior staff, first year in a specialty practice
 - Unsure of her professional obligations
 - You are her assigned mentor, what do you do?

Take home messages

- Don't 'go it alone', seek and accept help
- Find a 'mentor(s)' who can assist you through difficult stages of your career
- Transitions are difficult for all of us
- Keep an eye on your peers, trainees
 - Be supportive and kind
 - High incidence of anxiety/stress/other mental health issues amongst us



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