

Mentoring in Medical Education

Ali-Akbar NejatiSafa, MD

Professor of Psychiatry

Tehran University of Medical Sciences

January 17, 2024

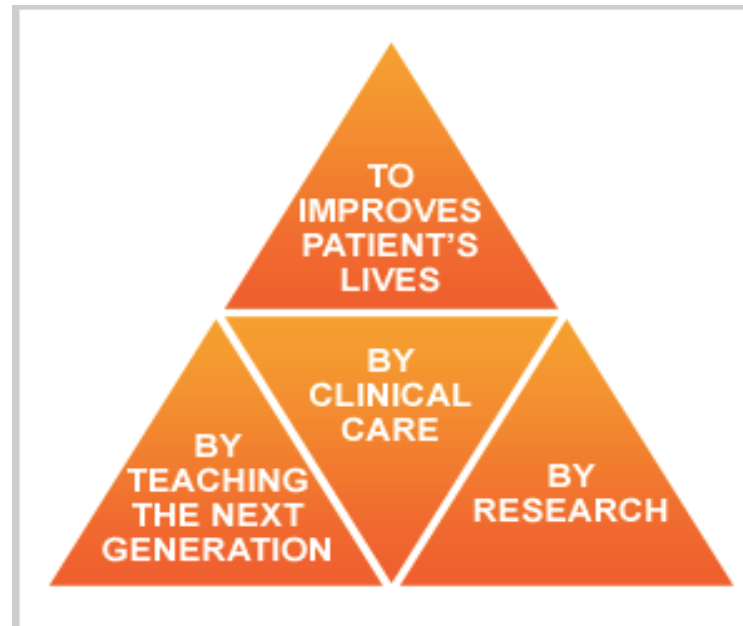
Objectives

By the end of this sessions, you will be able to:

- Describe the role of mentors in developing the next generation of academic physicians
- Describe the various stages in implementation of a mentoring program
- Apply skills on effective communication needed in the development of successful mentorship relationships

Academic Medicine

What is Academic Medicine?



Kanter, Steven L. "What Is Academic Medicine?" *Academic Medicine*, vol. 83, no. 3, 2008, pp. 205–206. doi:10.1097/ACM.0b013e318168e828. Image Source: Created by Gezzer Ortega, M.D.

Academic Medicine

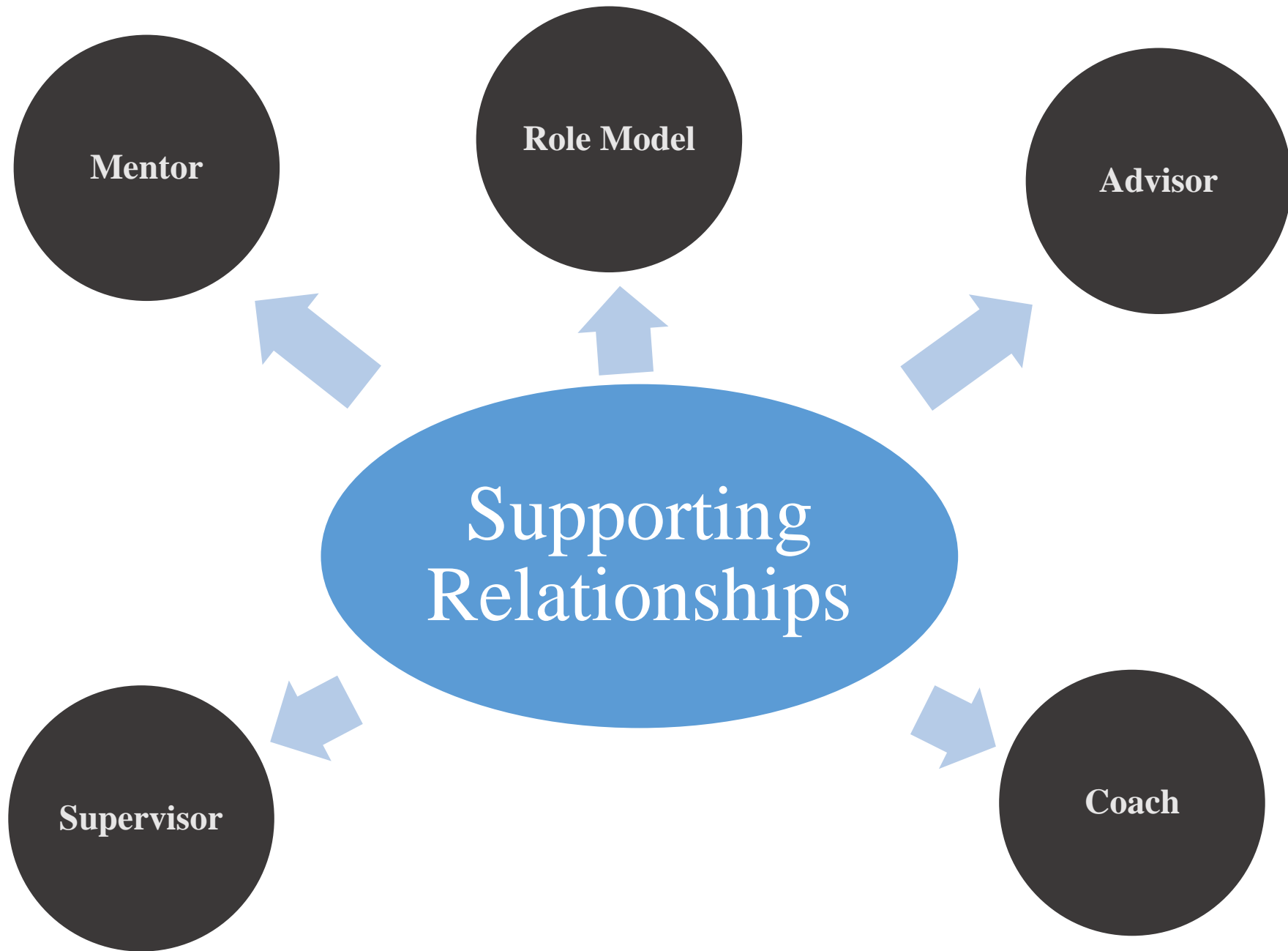
What is Academic Medicine?

Translate Your Passion into a Scholarly
Activity

Definitions

- Mentor
 - an experienced and trusted adviser
 - to advise or train
 - mid 18th century: via French and Latin from Greek Mentor,
 - the name of the adviser of the young Telemachus in Homer's *Odyssey*





MENTOR as a concept

- M- Manages the relationship
- E - Encourages
- N - Nurtures
- T - Teaches
- R - Responds to the Mentee's need

Are you a Mentor?


*If your actions inspire others to dream more, learn more,
do more and become more,*



you are a Mentor.”

John Quincy Adams

Are you a Mentor?

"Before you are a mentor, success is all about growing yourself.  When you become a mentor success is all about growing others."

Jack Welch

“Behind every successful person, there is one elementary truth:
Somewhere, somehow, someone cared about their growth and development.....

This person was their Mentor”

Dr. Beverley Kaye, Up is Not the Only way, 1997

Perception of Role as Mentor

The aim: To explore how teachers in medical and dental education understand their (new, formalized and additional) role as mentors.

Subjects: 66 mentors (dentists) and responsible for a group of three to five mentees
83 mentors (medical doctors) responsible for medical undergraduate students

Methods: Mentors (that were also teachers) in two different mentor programs were interviewed.

Analysis: was carried out within a phenomenological research perspective

A mentor is
someone who shares
what it means to
be a doctor/dentist

A mentor is someone
who listens and
stimulates
reflection

A mentor is
someone who can
answer questions
and give advice

Setting expectations for Mentor and Mentee's Roles

Mentee Roles:

- Active participant
- Retain critical faculties
- Seek new capacities, not just knowledge
- Remain open to multiple influences
- Own responsibility for success

Mentor Roles:

- Listen
- Share experiences
- Foster skill building
- Refer and network
- Be one of many influences

SKILLS

(needed for an effective mentorship)

Mentor

Mentee

- Listening actively
- Building trust
- Ability to encourage
- Identifying goals
- Providing effective feedback
- Inspiring mentees
- Ability to develop capabilities in mentees
- Managing risks
- Good motivator

- Listening actively
- Reflections
- Willingness to take responsibility
- Asking right questions
- Deep commitment
- Confidentiality
- Keeping trust
- Ability to take initiatives
- Willingness to learning

Apprenticeship Model for Mentoring

- Foundations of medicine
- Evidence based medicine
- Transforming medicine
 - a) the information explosion
 - b) increased accountability to society regarding effective, efficient, compassionate, and culturally sensitive care
- Role of technology

Liaison Committee on Medical Education

Standard 11: Medical Student Academic Support, Career Advising, and Educational Records

- A medical school provides effective academic support and career advising to all medical students to assist them in achieving their career goals and the school's medical education program objectives. All medical students have the same rights and receive comparable services.

Liaison Committee on Medical Education. Functions and Structure of a Medical School: Standards for Accreditation for Programs Leading to the M.D. Degree. March 2014. P. 14 (Standard 8.1).

www.lcme.org/publications.htm.

Accreditation Council for Graduate Medical Education

- The program must provide an individualized learning plan at least annually
- The program must provide a system to assist residents in this process including:
 - Faculty mentorship to help residents create learning goals
 - Systems for tracking and monitoring progress toward completing the individualized learning plan

“ACGME Common Program Requirements.” Accreditation Council for Graduate Medical Education, www.acgmecommon.org. Accessed August 18, 2017.

The needs of a Mentor (Ottawa conference and AAMC annual meeting)

- Clear expectations of their roles and enhanced listening and feedback skills

(Mentors are not born but developed)

- A forum to express their uncertainties and problems (Mentors have problems too)
- Mentoring (Mentors for mentors)
- Recognition (Raise the value of mentoring)

The needs of a Mentor (Ottawa conference and AAMC annual meeting)

- Rewards (Mentors can be rewarded in different ways)
- Protected time (Mentoring cannot be done ‘on the fly’)
- Support (Mentors should not be expected to tackle personal or psychological problems)
- Continuously evaluate the effectiveness of the mentoring programs (Mentoring is a work in progress)

Mentors: Don't

- Promote your own agenda
- Use “free labor”
- Take credit
- Make a “clone”

Mentoring Diverse Medical Students for an Academic Career

601 diverse medical students surveyed...

–64% had an interest in academic medicine

–51% didn't have sufficient guidance to develop a publishable project

Sánchez JP, Peters L, Lee-Rey E, Strelnick H, Garrison G, Zhang K, Spencer D, Ortega G, Yehia B, Berlin A, Castillo-Page L. Racial and ethnic minority medical students' perceptions of and interest in careers in academic medicine. *Acad Med.* 2013 Sep;88(9):1299-307.

Five Myths about Mentoring

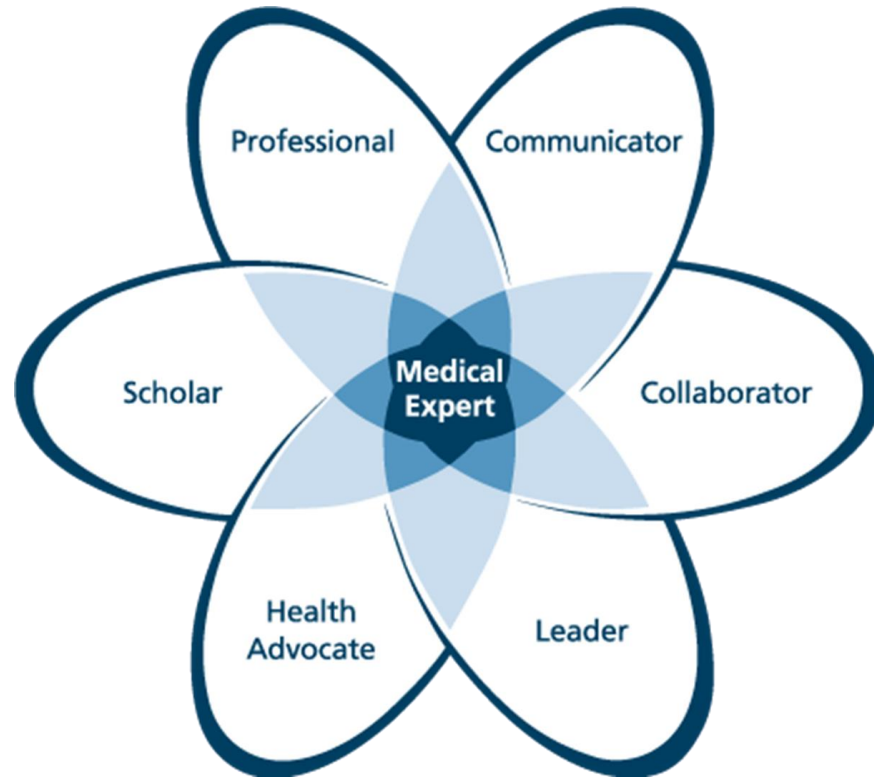
- It only happens on a long term, face to face basis.
- Mentors need to be older and more experienced.
- Only the person being mentored benefits.
- Taking the time to mentor decreases productivity.
- The public service is too busy reorganizing to have time for mentorship.

Why mentoring?

Self-reported benefits for mentors include:

- Pride in developing the next generation
- Building a professional network
- Ability to disseminate knowledge and skills to mentees
- Increased self awareness
- Improve your leadership skills

‘Mentoring’ as a concept and practice that is related to facilitating professional learning in **healthcare** has evolved consistently since the 1970s and was formally implemented in pre-registration nursing and midwifery education in the 1980s.



Tomorrow's Doctors

Doctor as Scholar and Scientist

Doctor as Practitioner

Doctor as Professional

Competences related to communication, collaboration, emotions, reflection, ethical obligations and humanistic judgement are emphasized and several methods are used for teaching in the medical professions. Mentoring can be one method to promote students' development in these areas.

Epstein RM, Hundert EM. Defining and assessing professional competence. *Journal of the American Medical Association*. 2002;287(2):226-35.

The CanMEDS 2005 Framework. The royal college of physicians and surgeons of Canada; [cited 25 September 2012]

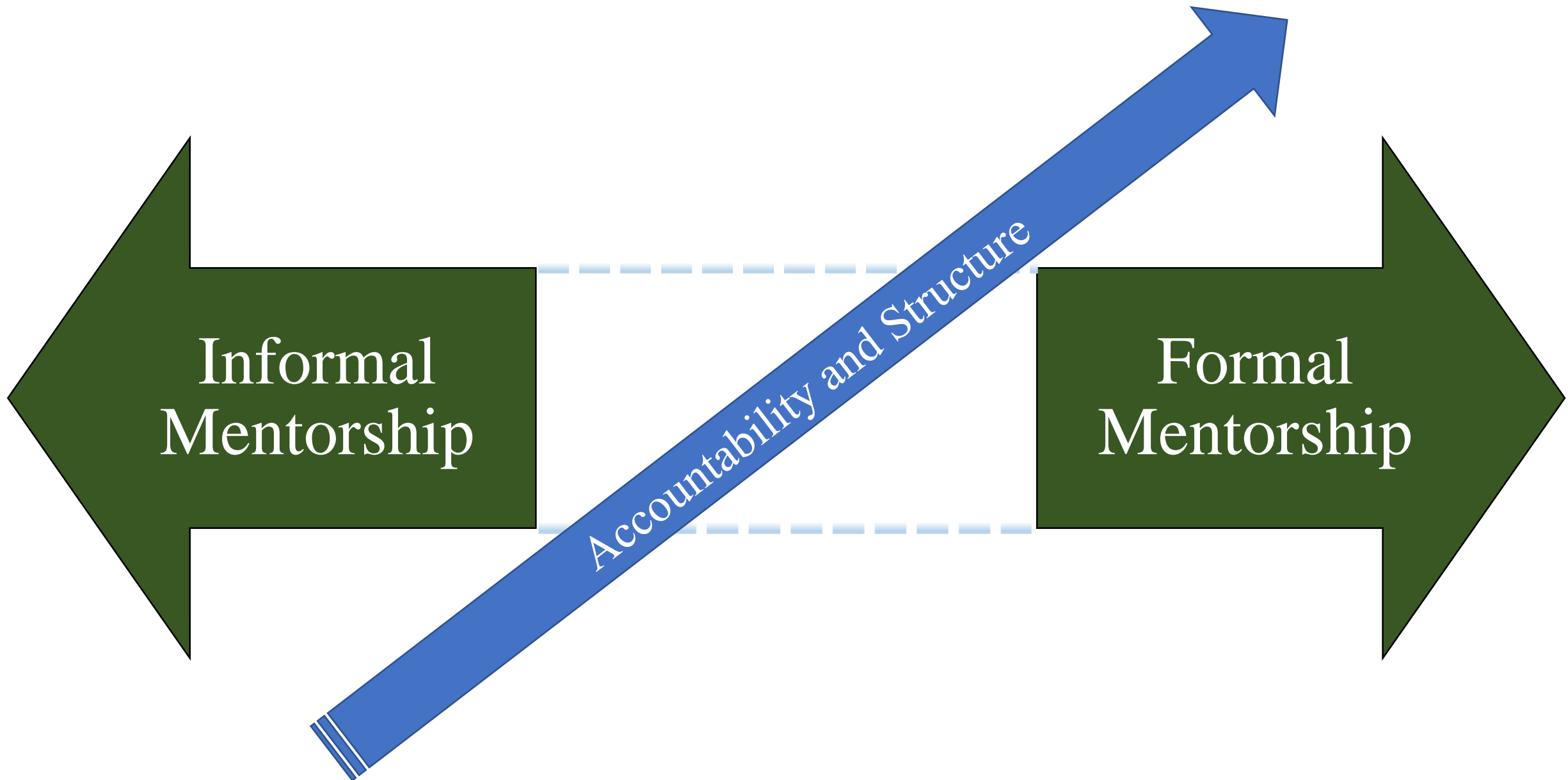
Tomorrow's Doctors. Outcomes and standards for undergraduate medical education. General Medical Council, UK; 2009.

Supervisor/Coaching / Training

Mentoring (Principles)

Relationship	Manager, line-manager	Non-reporting relationship
Expertise	Required expertise	Knowledge, experience and wisdom
Focus	Explicit focus for short-term need	Implicit focus for long-term development
Directions	Directions set by the coach	Mentees set the directions
Feedback	Provided by the coach	Mutual sharing and reflections

Mentorship Spectrum



Informal
Mentorship

Formal
Mentorship

Accountability and Structure

TYPES OF MENTORING

Formal mentoring:

- Establish goals
- Measured outcomes
- Mentoring lasts 9 to 12 months or longer
- Strategic pairing of individuals or groups
- Expert training & support

Informal mentoring:

- Where one person listens, helps, discuss problems & shares special knowledge & wisdom
- Self selection of mentors & mentees
- No expert training or support

Group mentoring:

- Group mentoring is when one mentor is paired with five or more mentees or one mentee requires mentoring from multiple experts.
- The mentor is usually senior to the mentees and, therefore, he or she facilitates the group.

TYPES OF MENTORING

Tele-mentoring mentoring (E mentoring):

Global mentoring

Mentors & Mentees may electronically participate in a mentoring relationship.

Flexible timing.

Multiple mentors & mentees.

Peer mentoring:

A form of mentorship that usually takes place between a person who has lived through a specific experience (peer mentor) and a person who is new to that experience (the peer mentee).

Reverse mentoring:

An initiative in which older executives are paired with and mentored by younger employees on topics such as technology, social media and current trends.

Mentoring Relationship

The best Mentorship Relationships are characterized by:

- Non-competitive
- Honest, two-way exchange
- Respectful debate on differing views
- Critical assessment of ideas
- A leveling of the power gradient
- Mutual and unconditional acceptance
- Respect for **limits** and **boundaries**

A word on boundaries (**The Parable of the Butterfly**)

5 phases of Mentoring Relationship

**Focus on
Growth**

**Building
Rapport**

**Setting
Directions**

Progression

**Winding
Up &
Moving
On**

Mentee
examining their
long-term
developmental
objectives

With the
objectives in
mind, Mentee
selects a
Mentor

Setting goals,
assessing
scope,
realization of
mutual trust
and logistic
feasibility

Evaluation ,
Posing
challenges,
and mutual
Support

Both recognize the decreased
value in the relationship and
so decide to initiate closure
and Move On (meeting less
frequently or achieving
independence but
maintaining a continual
professional friendship.

Goals of Mentoring programs

TO:

- Provide career counseling
- Develop professionalism
- Support students in their personal growth
- Increase interest in research
- Support an academic career
- Foster students' interest in a specialty for which a future shortage is projected

Examples of Goals set by mentors & Mentees in a Mentoring program

- To instill administrative, leadership & managerial skills in mentees
- To develop communication & presentations skills in mentees
- To develop career trajectories, professional development plans, portfolios etc.
- To become referees for mentees in job applications & recommendations for promotions

Rules for Effective Mentoring

- Establish rapport and trust.
- Make expectations explicit.
- Set modest goals.
- Plan strategies for achieving goals.
- Write down what has been mutually agreed.
- Keep relationship strictly professional.
- Mutual Trust.
- Regular contact & conversation.

Potential Pitfalls of Mentoring

- Mismatch
- Mistrust
- Unrealistic expectations
- Lack of skills, time, or commitment on one of the parties.
- Mentee's supervisor sabotages the relationship
- Poor communication.
- Crossing the boundaries

MentorAid

MentorAid

- Activity to practice an initial mentor-mentee encounter
- Mentee is seeking advice on career options
- Break up into groups of 3 participants
 - Mentee
 - Mentor
 - Observer
- 6 minutes to complete initial encounter

Discussion of Role-Play

- Mentor-Mentees: How did you feel about the encounter?
- Observer: How many of the attributes were achieved?

Effective Meeting Checklist

- Location
 - Clear aim or agenda set
 - History and physical
 - Define roles
 - Personalization
 - Goals and expectations
 - Setting dates
 - Documentation
 - Time and tracking
 - Summarize meeting
- (1 point each)

CONCLUSION

Mentoring is a vital component in the machinery of medical education.

Faculty who serve as mentors frequently are not trained in effective mentoring skills or designing mentoring programs.

They are most often **very busy** with their core clinical, research, administrative or educational responsibilities. It is evident that **faculty need training to be mentors** and to benefit from peer mentoring themselves

CONCLUSION

Institutions should change their culture to value and reward mentoring so that mentoring does not remain an invisible and only implicitly valuable aspect of their educational programs.



Thank you