

“Conquering the Challenges Facing the Young Surgical Scientist Through Mentorship”

October 21, 2017



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Disclosures

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Challenges Facing the Young Surgical Scientist

- Time
 - Competing Priorities
 - wRVU expectations
 - Call
 - “Protected time”
- Money
 - Start up funds
 - Compensation
- Career milestones
 - K award
 - Societies
 - Developing a P&T portfolio
- Family

Conquering the Challenges

- Mentorship can play a major role in helping you successfully navigate the challenges of being a young surgical scientist



The Mentee-Mentor Relationship

- It is critical to find the right person
- This is not an easy process and takes time
- The mentor can be more than one person or a team
- Your commitment and engagement in the process is essential



Objectives

- Define Mentorship in academic medicine
- Does Mentoring make a difference?
- Institutional Case Study in Mentoring (OSU COM)
- The Mentorship Tool Box
- Mentor Categories
- What should you look for in a Mentor
- Is Mentoring alone enough?
- Measuring Outcomes



Defining Mentorship

- We all know what we think mentorship is .. or not
- There is a consistent definition .. or not
- We all know when we see or experience good and bad mentorship .. or not



A Mentor is an Advisor or Wise Counselor



- Athena, as Mentor, told Telemachus, “*You must not keep on acting like a child—you’re too old for that now...You are fine and strong, I see. You should be brave, so people born in future years will say good things of you.*”



Definition of Mentoring

- “Mentor” is a term widely used in academic medicine but for which there is **no consensus** on an operational definition.
- Further, **criteria are rarely reported for evaluating** the effectiveness of mentoring.

Measuring the Effectiveness of Faculty Mentoring Relationships Ronald A. Berk, PhD, Janet Berg, MS, RN, Rosemary Mortimer, MS, MSED, RN, Benita Walton-Moss, DNS, RN, and Theresa P. Yeo, MSN, MPH, RN *Academic Medicine* 80;66- 71 : 2005



Definition of Mentoring

“A *mentoring relationship* is one that may vary along a continuum from informal/short-term to formal/long-term in which faculty with useful experience, knowledge, skills, and/or wisdom offers advice, information, guidance, support, or opportunity to another faculty member or student for that individual’s professional development. (Note: This is a voluntary relationship initiated by the mentee.)”

Measuring the Effectiveness of Faculty Mentoring

Relationships Ronald A. Berk, PhD, Janet Berg, MS, RN, Rosemary Mortimer, MS, MEd, RN, Benita Walton-Moss, DNS, RN, and Theresa P. Yeo, MSN, MPH, RN Academic Medicine 80;66- 71 : 2005



OSU College of Medicine

Mentoring as described by Chairs

“relationship, interaction, guidance, combines personal and professional, emotional attachment, “click” factor, formal agreement ,contract, provide a platform, setting expectations, silent expectations, professional conduct, professional development reinforce core competencies, senior to junior, counseling , advising , trust, not coaching , confidentiality, not peer, modeling , having value, experience, knowledge, drawing on own history and background, values, career progression, “stirring up people”, career transitions, chemistry, match maker, encouraging, tough-love, realistic, “generative”, listen, challenge, focused direct communication, feedback, guidance, engagement”



Definition of Mentoring

“There is a **false sense** of consensus, because at a superficial level everyone ‘knows’ what mentoring is. But closer examination **indicates wide variation in operational definitions**, leading to conclusions that are limited to the use of particular procedures”

Wrightsmann LS. Research methodologies for assessing mentoring. Paper presented at the Conference of the American Psychological Association, Los Angeles, CA, 1981. ERIC Document Reproduction Service No. ED 209-339.





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Impact of Mentoring

Does Mentoring Make a Difference?



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Impact of Mentoring

- Faculty members who are engaged in effective mentoring relationships are more likely to remain at academic medical centers
- Advance in rank more rapidly
- Have greater career satisfaction
- Better career performance including improved teaching of residents and medical students and increased quality of patient care
- More successful at obtaining extramural funding

Binkley and Brod, Am J Med 2013

Impact of Mentoring Productivity and Retention

- **Mentee** (% vs. no mentoring)
 - ↑ Compensation 25% vs. 5.3%
 - ↑ Retention 72% vs. 49%
- **Mentor** (% vs. no mentoring)
 - ↑ Compensation 28% vs. 5%
 - ↑ Retention 69% vs. 49%



"All work and no play makes you a valued employee."

Mentor Benefits



- **Academic Credit**
 - Promotion
 - Toward service and teaching per COM APT Document
- **Furthering own career**
 - Reflection of success, reputation
- Higher rates of **career satisfaction**





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Mentoring at the Ohio State University College of Medicine

A Case Study



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Assessment

Mentoring Interviews with Chairs (Spring 2013)

- Mentoring in departments is variable
- Formal and informal programs
- Team mentoring in basic science
- Chair or division chief mentoring in clinical departments
- Benchmark was the Department of Medicine
 - Distributed mentoring

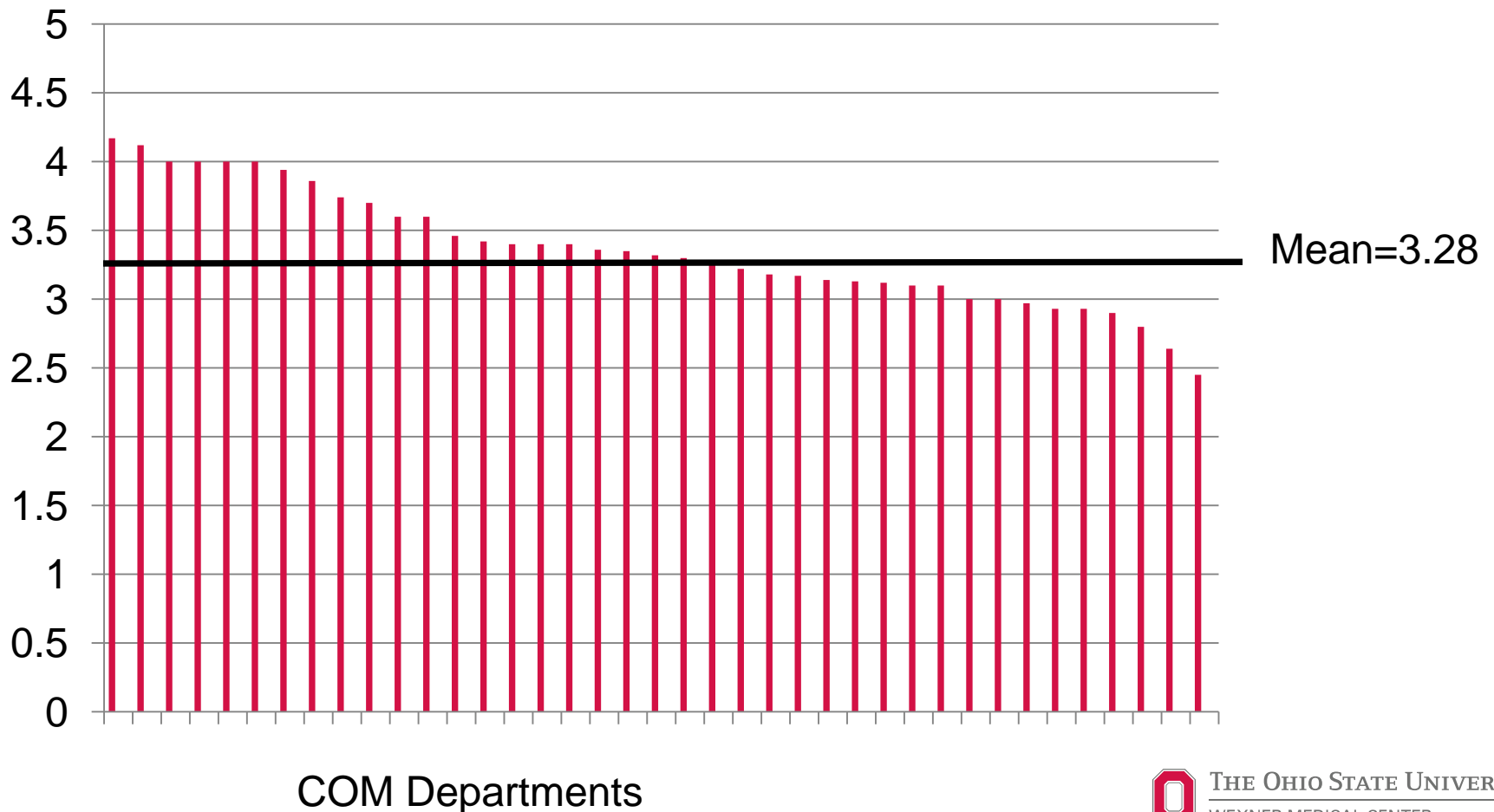


“ I receive effective mentorship”

Department Results

- Agree 15%
- Neutral 67%
- Disagree 18%

Engagement Survey 2013 (n=600)



OSU COM Mentoring Opportunities

- No standard definition or goals
- No one accountable
- No program
- No training
- Insufficient numbers of faculty



OSU COM Mentoring Solutions

- Create a Center for faculty development "FAME"
- Uniform definition of mentoring
- Mentorship Training
- Developed a Model
 - Mentoring Leads (Department/Division)
- Modify APT Document
- Monitor and Assess





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OSU College of Medicine Mentoring

Solutions



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FAME

- F FACULTY
- A ADVANCEMENT
- M MENTORING
- E ENGAGEMENT

FAME

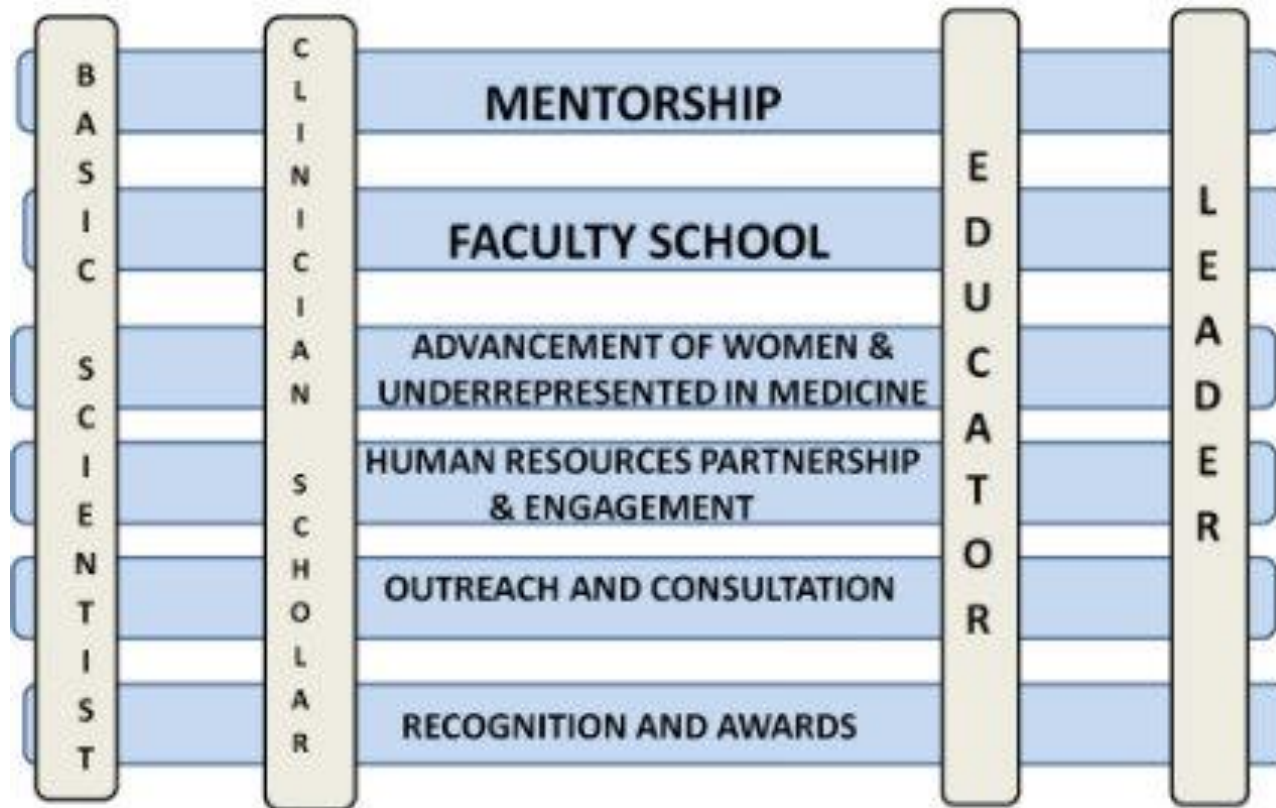
- The Center for **Faculty Advancement, Mentoring and Engagement (FAME)** is a comprehensive multi-faceted faculty development office. It is designed to synergize existing resources and provide new programming to support each faculty member's career development.
- **FAME** has identified **four primary pillars** wherein a faculty member will realize opportunity for career growth and development. Across these four pillars are the programs that support the faculty member's development



FAME

The Four Pillars

FAME: ORGANIZATIONAL MATRIX



FAME

Chief Keeper
Related Searches



College Online

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OSU.EDU



Faculty



SCHOOL OF HEALTH AND REHABILITATION SCIENCES

Faculty Tracks Promotion & Tenure Policies Evaluation and Curriculum R&D College Governance & Committees Resources Faculty Spouse Partner Connection FAME

The Ohio State University College of Medicine Faculty FAME

What is FAME

FAME Programs

Career Development Resources

Faculty Development Literature

Contact Us

Faculty Spotlight: Sheryl Pfeil, MD

Calendar

FAME



Welcome to the Center for Faculty Advancement, Mentoring and Engagement (FAME).

This resource is provided to all faculty members in the OSU College of Medicine to promote career development, enhance skills, and foster success. It is our sincere desire that all faculty have the tools needed to cultivate successful careers at The Ohio State University Medical Center. With this objective in mind, we have aligned the resources that exist within the College and the University and are in the process of creating programming to meet the needs and expectations for each faculty member's career development.

We are on call to assist our faculty with every facet of a career in academic medicine. Each individual's success enhances our reputation, allowing us to attract and retain the best talent, which allows us to provide the best service to the populations we serve.

We look forward to working with you in the coming months and years!

FAME Calendar

Sep 16	Clinical Research Investigator Orientation
Sep 16	New Faculty Orientation

Recent Programs

For optimal download and viewing of the recordings, please access through Google Chrome.

Faculty Profile: Clark Anderson, MD

In this series, faculty members tell the stories of their personal and professional journey. [This session](#) featured Dr. Clark Anderson, Professor of Internal Medicine, who has supported his research efforts with 40 years of continuous NIH R01 Grants.

Insider's Guide to Research in View

If you are preparing a dossier, [watch](#) this session to learn how to classify and categorize your information to best present your accomplishments. Professor Judy Westman, MD, walks through a step-by-step guide to inputting information, and shares her unique perspective as a dossier coach in Internal Medicine and member of the promotion and tenure committee.

Advancing to Professor for Clinicians and Educators

Promotion to professor requires a different strategy than promotion to associate professor.

<http://med.ohio-state.edu/faculty/fame/pages/index.aspx> (8/7/2014 7:39:04 AM)



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Goal of FAME Mentoring Program

The goal of this program is to provide accessible and meaningful engagement between a faculty member with an experienced and seasoned associate for the purposes of career development and advancement, fostered by the spirit of collegiality and underscored by personal achievement and professional balance.

Ellison, EC. "FAME Mentoring Program Goal Statement," 2014



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OSU COM Definition of Mentorship

Each Resident, Fellow and Faculty Member (Tenure, Clinical and Research Tracks) will find a **Primary Mentor**

Characteristics of primary mentoring:

- Takes place **outside of supervisor-employee relationship**, at the mutual consent of a mentor and the person being mentored
- Is career-focused or focuses on professional development
- Relationship is **personal and confidential** - a mentor provides both professional and personal support
- Relationship is **initiated by mentee**, introductions facilitated by mentoring lead as needed
- Relationship may cross department or division boundaries



Mentor & Mentee Training



Mentorship Training

- The Mentor is essential to long term career success
- The process requires a period of years
- Therefore empiricism is not a good approach
- **Training is essential**



Mentee Training

Role and Responsibilities of the Mentee

- Identify a primary career mentor (via SciVal, networking, mentoring lead, etc.)
- Schedule monthly/quarterly meetings
- Co-create a mentoring agreement
- Understand requirements of faculty track
- Write a 3-5 year plan with guidance from mentor
- Set annual goals (~3-5/year)
- Attend FAME networking & training sessions
- Provide feedback and evaluation

FAME Mentoring Tool Box

- First Year Mentorship Timeline
- FAME Mentorship Modules
- Mentoring Milestone Tracking Form
- Mentorship Best Practices Document
- Tools (Buckeye Box: <https://osu.box.com/s/31sa9fj16we13glnku7e>)
 - ✓ List of Faculty to be Mentored in each department
 - ✓ List of Senior Faculty to be Mentors
 - ✓ Mentoring Agreement Template
 - ✓ Expectations for each Role
 - ✓ Mentoring Articles
 - ✓ Contact Info
 - ✓ 3-5 Year Plan Template and Training



Mentoring 101

“One Minute Mentor”

- **Assess the mentee**
 - Check in
 - Assess for any urgent issues
 - Use active listening skills
- **Set Agenda**
 - Review pending items
 - Assess time available
 - Prioritize
- **Assist with ongoing projects**
 - Ask Clarifying Questions
 - Set clear/measurable goals
 - Give advice and suggest resources
 - Agree on timeline for deliverables
- **Provide Career Guidance**
 - Review Individual Development Plan and CV
 - Inquire about professional and personal balance
- **Wrap up**
 - Clarify expectations of mentor and mentee
 - Schedule a future meeting
- ***Developed by Mitchell D Feldman MD , MPhil, UCSF***



Mentoring 101

Tip

Individual Development Plans (IDP) are used widely by organizations – from the NIH to the US Coast guard- to help individuals achieve goals. It is a great tool to guide successful mentoring relationships . An **IDP** helps the mentor understand the mentee's needs and the mentee identify professional goals. Ideally the mentee should send the completed **IDP** to their mentor prior to their meeting to make the most of the meeting time .

Mentoring Resources

- MedEd Portal AAMC
- UCSF <http://acpers.ucsf.edu/mentoring>
- University of Wisconsin and Indiana University
- Key references
 - Fleming M. Burnham EL, Huskins WC .Mentoring Translational Science Investigators . JAMA 2012;208: 1981-82
 - Binkley PF , Brod HC. Mentorship in an Academic Medical Center.Am J Med 2013;126:1022-5
 - Straus SE, Johnson MO, Marquez C, Feldman MD. Characteristics of successful and failed mentoring relationships: a qualitative study across 2 academic health centers. Acad Med 2013;88:82-9
 - Cho, CS, Ramman RA, Feldman MD. Defining the ideal qualities of mentorship: a quantitative analysis of the characteristics of outstanding mentors. Am J Med 2011;124:453-8
 - Bickel J. How men can excel as mentors of women. Acad Med 2014;89:1-3



The OSU COM Mentoring Model



Mentoring

Need for a Distributed Model

- The Challenge
 - 1700 Faculty
 - 900 Residents and Fellows
 - Needs vary
 - Scientist (Team Mentoring)
 - Clinician (Individual Mentoring)
 - Mentoring capacity
 - At maximum 2-3



Distributed Mentoring

- Increases the number of faculty with mentors
- The impact is seen in men and women
- The impact is seen in assistant and associate professors
- Increases meeting frequency (monthly)

OSU COM EXPERIENCE

Mentoring Survey(289/576)

BEFORE FORMAL PROGRAM

Prevalence and Characteristics of Mentorship Relationships

Faculty with Mentors	Gender and Mentors	Woman as Mentor	Selection of Mentor	Frequency of Meeting	Faculty Rank (all tracks)
Total 51%	Women with mentor 52%	Women 53%	Assigned 11%	Annually 23% Quarterly 26%	Assistant Professors 53%
Clinical 37% Tenure 69% p = 0.0001	Men with mentor 53%	Men 29%	Self-identified 89%	Monthly 21% Weekly 23% Daily 2%	Associate Professors 37%
		p = 0.009			p = 0.003

Binkley PF , Brod HC. Mentorship in an Academic Medical Center . Am J Med 2013;126:1022-5



OSU COM EXPERIENCE

Mentoring Survey(289/576)

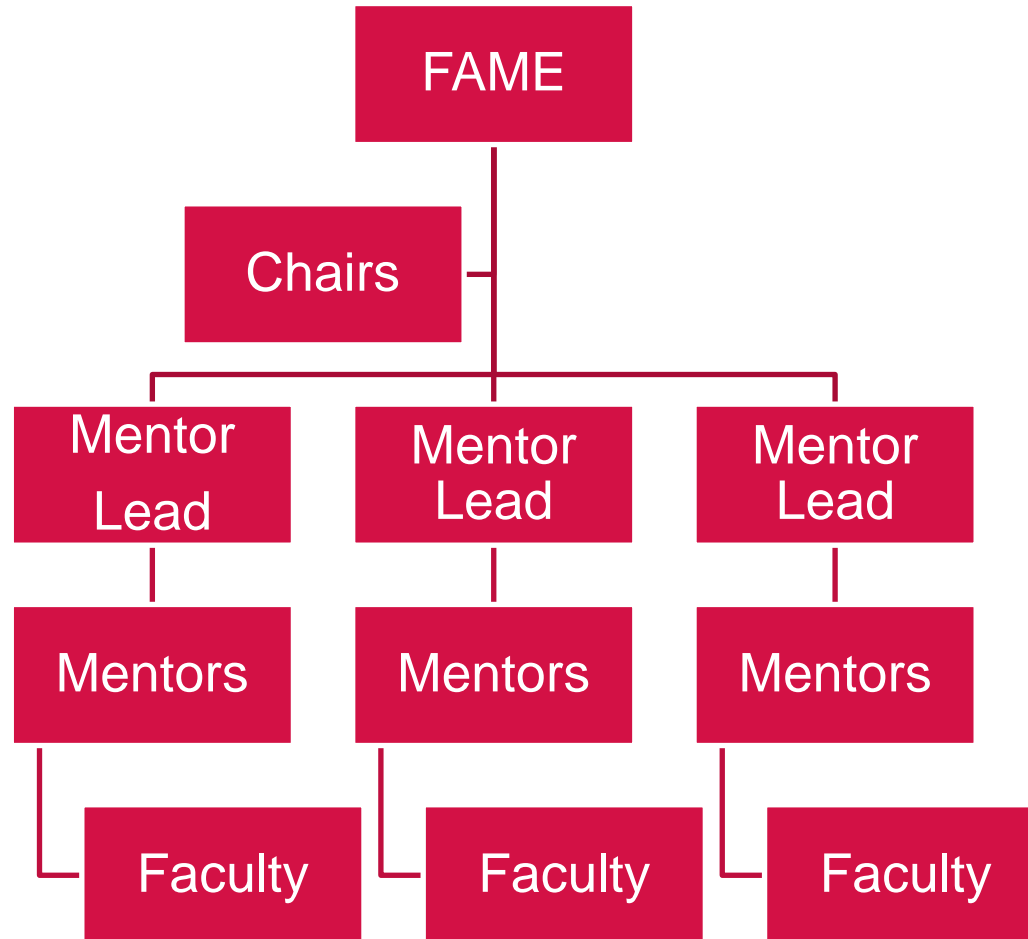
AFTER FORMAL PROGRAM

Preliminary Mentorship Characteristics with New Program

Faculty with Mentors	Gender and Mentors	Frequency of Meeting	Faculty Rank (all tracks)
Total 71% (51%)	Women with mentor 74% (53%)	Annually 15% (23%) Quarterly 29% (26%)	Assistant Professors 79% (53%)
Clinical 68% (37%) Tenure 98% (69%)	Men with mentor 69% (53%)	Monthly 56% (21%)	Associate Professors 73% (37%)
p = 0.001	p = 0.05	p= 0.05	p = 0.05



Mentoring Distributed Model



P and T Document Mentoring Responsibility

Mentoring of students, post-doctoral fellows, residents and faculty is a core responsibility of a faculty member in the Ohio State University College of Medicine. As such to achieve promotion there must be evidence of the faculty member's involvement as a primary mentor in the academic setting .



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The Mentorship Tool Box

What's in your tool box?



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The Mentorship Tool Box

- Expectations
 - Mentee
 - Mentor
- Individual Mentorship Agreement
- Team Mentorship Agreement
- Personal Mission Statement
- Professional Plan (3-5 years)
- Mentoring Meeting Journal
- Professional Network Questionnaire



Expectations

Mentor I

- Commit the necessary time to developing their mentees.
- Make a formal commitment by signing a mentoring agreement.
- Meet with mentees at least quarterly.
- Understand faculty tracks for advancement and assist with the development of the mentee's 5 year plan and annual goals.
- Meet with departmental/divisional mentoring lead twice a year to discuss mentorship issues, best practices, and troubleshoot any problems.



Expectations

Mentor II

- Identify and attempt to resolve any problems early on in the relationship.
- Provide honest feedback and evaluation.
- Utilize Mentoring Best Practices and obtain effective mentorship training.
- Help mentee network and find opportunities.
- Maintain Confidentiality

Expectations

Mentee I

- Commit the necessary time to your development.
- Interview prospective candidates and select an appropriate primary mentor.
- Make a formal commitment by signing a mentoring agreement.
- Set up meetings with mentor, at least quarterly.
- Understand your faculty track for advancement and create a 5 year plan and annual goals.



Expectations

Mentee II

- Follow through on mentor's advice.
- Identify and attempt to resolve any problems early on in the relationship.
- Provide honest feedback and evaluation.
- Utilize Mentoring Best Practices and attend training sessions to attain skills and fill gaps in knowledge.
- Maintain Confidentiality

Individual Mentorship Agreement

We, acting in a mentor mentee relationship; agree to enter this relationship based on the criteria described above, which sets forth the expectations, parameters, and process for the mentoring relationship.

_____(Mentor's signature) date____/____/____

_____(Mentee's signature) date____/____/____

_____(Mentorship Lead signature)date____/____/____

_____(Chair or Division Chief signature)date____/____/____

Adapted from The Institute for Clinical Research Education, serving as the Research Education and Career Development Core of the Clinical and Translational Science Institute (CTSI) University of Pittsburgh



Team Mentorship Agreement

We, acting as team mentors and mentee, agree to enter into a team mentoring relationship based on the criteria described above, which sets forth the expectations, parameters, and process for the mentoring relationship.

_____ (mentor's signature) date ____/____/____
_____ (mentor's signature) date ____/____/____
_____ (mentee's signature) date ____/____/____
_____ (Mentorship Lead signature) date ____/____/____

Additional mentors as applicable

_____ (mentor's signature) date ____/____/____
_____ (mentor's signature) date ____/____/____
_____ (mentor's signature) date ____/____/____

—
Department Approval

_____ (Chair/Division signature) date ____/____/____

Adapted from The Institute for Clinical Research Education, serving as the Research Education and Career Development Core of the Clinical and Translational Science Institute (CTSI) University of Pittsburgh



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Expectations

Mentorship Lead I

- Devote the requisite time to assuring the success of the mentoring program in his or her department.
- Assist assistant professors between 1-3 years of service in identifying an appropriate primary career Mentor.
 - Mentors
 - senior faculty members, associate and full professors
 - may be outside the faculty member's division, department
 - outside the institution provided they are willing and able to participate in the FAME mentoring program.



Mentorship Lead Expectations II

- **Assign advisors** to faculty members with less than 1 year of service to help orient the faculty member.
- Assure that mentorship **best practices** are being met as outlined in the College of Medicine Mentorship Best Practices Document and Mentoring Gantt Chart Timeline.
 - Assurance that **mentorship meetings occur** at least once every three months
 - Assurance that the mentor and mentee have developed a 3-5 year career development plan.
- Track accomplishment and report to FAME.

Expectations

Mentorship Leads III

- Prepare Mentors and Mentees for mentoring by directing to **training**, helping with goal setting, troubleshooting problems.
- **Meet with Mentors** twice yearly to
 - discuss mentorship issues, best practices, and troubleshoot any problems.
 - Assist in resolving barriers to effective mentorship relationships
 - mediate problems that may develop in the mentor/mentee relationships
 - Work with FAME Mentoring Leadership when necessary to resolve barriers and conflicts.



Personal Mission Statement

REACH

- Research
- Education
- Aministration
- Clinical Care
- Humanism in Medicine



Mentoring Meeting Journal

- Use each page(s) to record the discussion points in each of your mentoring meetings.
 - Date
 - Check In (e.g. urgent issues, work-life balance, personal issues)
 - Goal Discussion
 - Action Items





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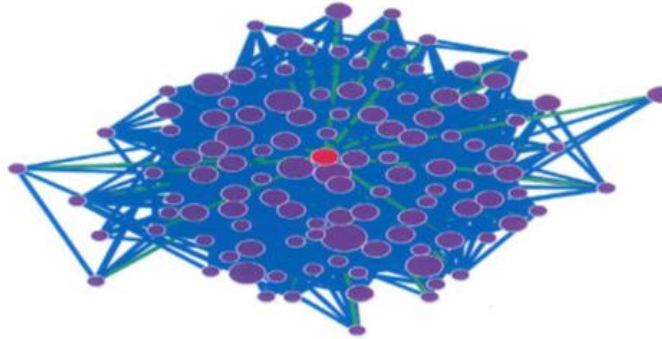
Networking

Who do you know?



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Professional Network



<http://medicine.osu.edu/research/scival/pages/index.aspx> accessed 1-7-2014



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Professional Network Questionnaire

Professional Network Questionnaire - this resource helps faculty identify current influential colleagues in their professional network. Ideally, one should have a balanced network of colleagues, distributed over length of time, types of relationships and affiliations. If you find your network to be unbalanced, use this information to help you prune less fruitful relationships and begin to cultivate new relationships.

Please read the instructions below to fill out this table.

	A	B	C	D	E	F	G	H
	Name of colleague	Gender	How (1-9)	Length (# years)	Relationship (1-5)	Affiliation (1-4)	Contact (1-6)	Focus (1-3)
1								
2								
3								
4								
5								

Adapted from University of Southern California Division of Medical Education

Professional Network Questionnaire

A - Name - List the names of up to **five of your most important colleagues** in column A

B - Gender - Note the gender of colleague in column B (M, F, Other)

C - How - Indicate how you met each of the individual (**select one only**):

(1) Is/Was my teacher, program director or supervisor.

(2) Is/Was my student.

(3) Met at a professional meeting/national conferences.

(4) Met on the job (happened circumstantially).

(5) Met on the job (sought this person out intentionally).

(6) Met on committee/peer review panel.

(7) Met during training/my classmate.

(8) Met through consulting

(9) Met at a social event.



Professional Network Questionnaire

D - Length - Indicate how long you have known this individual. State your answer in years.

E - Relationship - State how you would characterize the primary relationship you have presently with each colleague (select one only):

- (1) Career/primary mentor – more senior faculty member with interest in my career development
- (2) Research or project mentor- more senior faculty advising directly on task or research project
- (3) Mentee – more junior faculty member whom I mentor
- (4) Peer Colleague – person at similar level of career
- (5) Personal Friend – no connection to your current professional work

F - Affiliation - Indicate whether each individual listed in column A is (select one only):

- (1) **Friend** - No connection to your current professional work.
- (2) **Department Colleague** - In your department.
- (3) **University Colleague** - Outside your department but within your university/medical center
- (4) **National Colleague** - Outside your university/medical center



Professional Network Questionnaire

G - Contact - Indicate over the past year how frequently you have been in contact with colleague:

- (1) Few times per year (1-2 times).
- (2) Approximately once every other month (3-6 times per year)
- (3) Approximately once per month (7-12 times).
- (4) Approximately once every other week (13-26 times)
- (5) Approximately once per week (27 - 52 times).
- (6) More than once a week or daily (> 52 times per year).

H - Focus - Indicate the primary focus of your contact with each colleague (select one only):

- (1) **Mentor/mentee** (give/receive advice on promotion; office politics; professional goals)
- (2) **Socially oriented** (exchanging confidences; exchanging solicited, constructive criticism)
- (3) **Task oriented** (co-authoring a paper, co-teaching, making joint presentations, exchanging research ideas, consulting on patient care)





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Mentor, Coach , Advisor,
Sponsor



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The Many Faces of a Mentor/Advisor/Coach



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Mentor Categories

- Primary Mentor
- Career Mentor
- Life Mentor
- Peer Mentor
- Other
 - Coach
 - Sponsor
- Mentoring Network

*Binkley, P CCTS Mentorship Working Group The Ohio State University
7/22/2011*

Mentor Categories

- **THE PRIMARY MENTOR**
 - Engages with the protégé in synthesizing the advice and guidance provided by all other mentors to arrive at the most effective pathway for professional and personal development



Primary Mentors



Primary Mentors



Primary Mentors



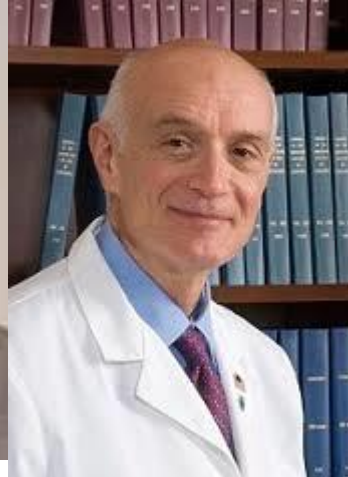
Mentor Categories

- **Content Mentors**
 - Provide key and **leading edge** information in the field
- **Career Mentor**
 - Provide Guidance on **career development** decisions
- **Life mentor**
 - Provide guidance that **extends beyond** professional development
- **Peer Mentorship**
 - Advice and information shared by those at a **similar career stage**

Content Mentors



Career Mentors



Life Mentor



Peer Mentors



Peer Mentors



Coaching



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Coaching



Coaching



What are Coaches and What Do They Do?

- *“I’ve been surgeon for eight years . For the past couple of them my performance in the operating room has reached a plateau. I’d like to think it’s a good thing- I’ve arrived at my professional peak . But mainly it seems as if I’ve just stopped getting better.”*

Atul Gawande, Personal Best, New Yorker Oct 3, 2011



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What are Coaches and What Do They Do?

- Not “teachers”, but they teach
- May or may not be your boss
- Do not need to be expert in the “skill set”
- Observe, judge, and guide...
“basically in the business of teaching her pupils how to think, and to trust their ability to do so effectively” Delay Biographer as quoted by Gawande, A.
- Your “eyes and ears”
- Know how to break down performance into its critical individual components



Atul Gawande, Personal Best,
New Yorker Oct 3, 2011



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Mentoring vs. Coaching

Mentoring

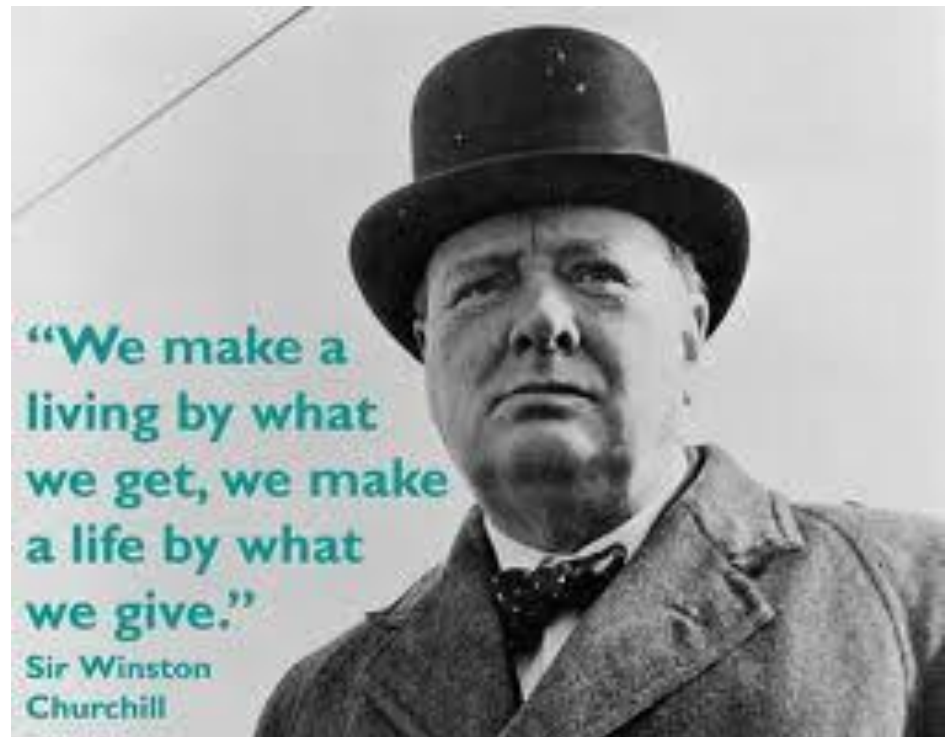
- A long term relationship
- Allows significant transitions in knowledge, work, or thinking.
- A mentor is someone who another person looks up to
- Mentor has achieved the goals the mentee wishes to achieve

Coaching

- May be short term and periodic
- A process that enables learning and development to occur
- The goal is performance improvement
- Requires knowledge & understanding of
 - Process
 - variety of styles, skills, and techniques



The Effective Mentor



Effective Mentors

Characteristics

- Honest
- Open
- Maintains confidentiality
- Willing to commit time
- Provide formative feedback
- Inspiring and Motivating
- Foster independence
- Provide structure and timeliness
- Help network and sponsor

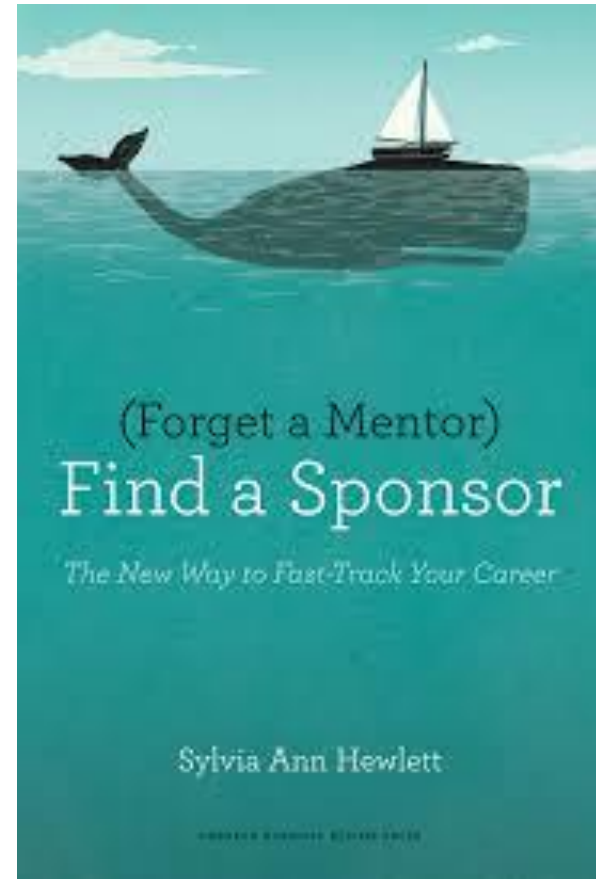


Is mentoring alone sufficient
for your success?

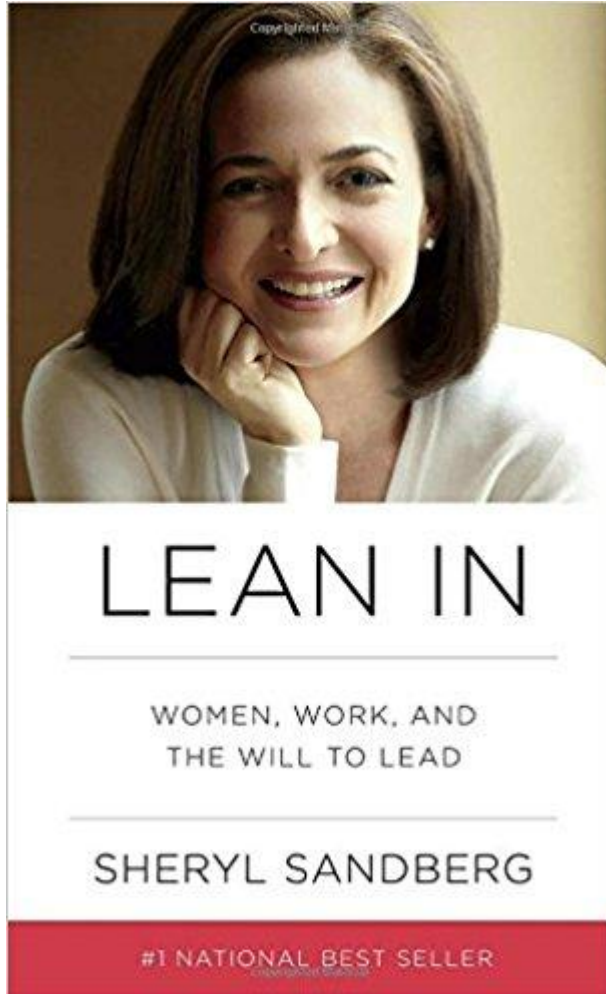


Sponsorship

- “You need more than a mentor. Traditional pathways to career progression have all but diminished. Mentors used to be the answer but in today's world, research shows that they are not enough to help you.. You need a sponsor”



Career Advancement Other Strategies



“This book CHANGED MY LIFE.

I had been working in the same position at the same company for the last 12 years wondering why I wasn't being promoted or approached by competitors. Along with gaining experience over the years and building my own self confidence, I needed this book to push me to take the next steps. I know this sounds silly and self absorbed, but when I was reading it, it was like Sandberg was talking directly to me. She gave me insight into some of the things that were happening around me, and some tips on what I could do to change the course of my career”

Amazon.com accessed 10-19-17



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Measuring Outcomes



Measuring Success

- Achievement of established goals, implementation of 3-5 Year Plan
- Academic Productivity and Impact
 - Election to societies/leadership
 - Reputation
- Satisfaction with Mentoring Relationship
- Time to promotion
- % Success in Promotion
- Faculty Retention
- Improved Engagement scores



Summary

- Defined mentorship in academic medicine : You need your own
- Does Mentoring make a difference? YES!!!
- Institutional Case Study in Mentoring : Lessons Learned
- Mentorship Tool Box is critical
- Many categories of mentor : all important
- What should you look for in a Mentor? Effective Attributes
- Is Mentoring alone enough? NO.. sponsorship ,leaning In
- Measuring Outcomes



Conquering the Challenges Facing the Young Surgical Scientist Through Mentorship



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I wish you the best on
your journey !
Thank You !!