

Mentoring Rules of Engagement

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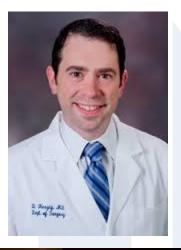
Disclosure













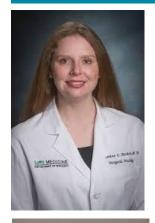






Disclosures



























Definitions



· Coach:

- Provides guidance for your development often focused on "people skills" (active listening)
- You and your coach drive the relationship
- Provide feedback outside a formal performance evaluation process



Definitions



Mentor:

- Informally or formally helps you navigate your career providing guidance
- Mentee drives the relationship
- Helps you determine career paths and meet specific career goals





i Mentor

- A mentor is an individual with expertise who can help develop the career of a mentee. The mentor guides, trains, advises, and promotes the career development of the mentee.
- A mentor is an experienced guide, trustworthy advisor, a personal champion, a constructive critic, a motivator, a listener. A mentor wants the protégé to succeed!

Definitions



Sponsor

- Senior leader who uses strong influence to help you obtain high-visibility assignments, promotions, or jobs
- Sponsor drives the relationship
- Advocate for your advancement and champion your work and potential with other senior leaders



Types of Mentorship



Relationship Types

- Established career and early career
- Professor to student
- · Professional to professional
- Peer mentoring (same developmental level with specific
- experiential differences)
- Friendship
- Parent-like features can be present
- Task-focused versus relationship-based
- · Daily contact versus less frequent contact
- Short- versus long-term mentorships
- Collegial collaborations



Mentorship in surgical training: a systematic review

Pouya Entezami • Lauren E. Franzblau • Kevin C. Chung



- 38 articles reviewed
 - 68% commentary
 - "As surgical education evolves in response to these changes and continues to move away from the Halstedian apprenticeship model of training, it is important that surgical mentor-mentee relationships adapt as well."

Themes in Mentoring

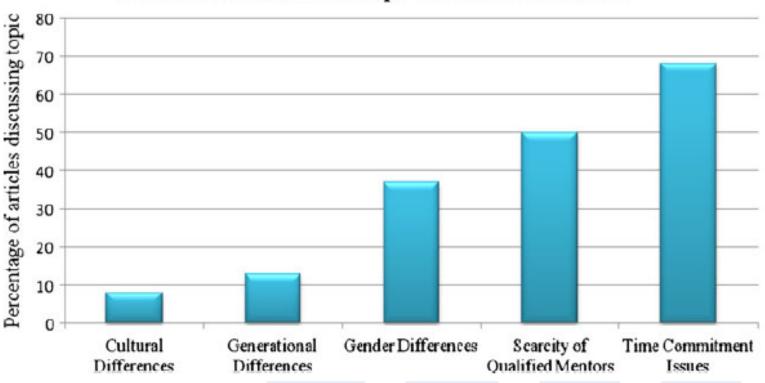


- Essential Mentor Qualities
 - Professional role model 58%
 - Staying involved (time and effort) 48%
 - Compassionate/kind/supportive 39%
 - Critic/evaluator/assessor 32%
 - Leader in the field 29%

Barriers to Mentoring



Barriers to Mentorship: Themes Discussed



Only 8% of surgical residents had a stated gender preference

Characteristics of Effective Mentorship for Academic Surgeons

A Grounded Theory Model

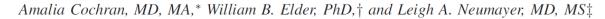




TABLE 1.	Summary of	f Interviewee	Demographics	(N = 15)	5)

Age grouping (n)	
40-44 yr	4 (4 Mid)
45–49 yr	7 (3 Mid)
50-54 yr	1 (0 Mid)
≥55 yr	3 (0 Mid)
Years post-training (median	All interviewees 11 (9–14)
years, IQR)	Mid-career 9 (8–11)
•	Senior 13.5 (12.5–17.75)
Academic rank	3 Assistant Professor (3 mid)
	6 Associate professor (4 mid)
	6 Professor
Surgical specialty	3 GI/MIS
	2 Breast
	2 Colorectal
	2 Endocrine
	2 Hepatobiliary/transplant
	2 Trauma/acute care
	1 Pediatric surgery
	1 Vascular
Race/ethnicity	10 Caucasian
•	2 Asian-American
	3 African-American
Marital status	10 Married/partnered
	3 Never married
	2 Divorced, not remarried

Cochran, Neumayer, Annals of Surgery epub 2017

Model of Effective Mentoring





FIGURE 1. Conceptual model of effective mentoring in academic surgery.

Cochran, Neumayer, Annals of Surgery epub 2017

Take Away Points



- Multiple Mentors over time
 - Gender, age and race not necessarily important
- Vision building and goal setting
 - Navigating institutional politics
- Radical candor
 - Points out mentee blind spots
- Effective mentoring includes:
 - coaching
 - sponsoring
 - role modeling



- Step 1
 - Define your needs
 - Global life or career advice
 - What are you trying to achieve in your career in academic medicine?
 - Specific project expertise
 - List skills: writing a grant, setting up a lab, designing a curriculum

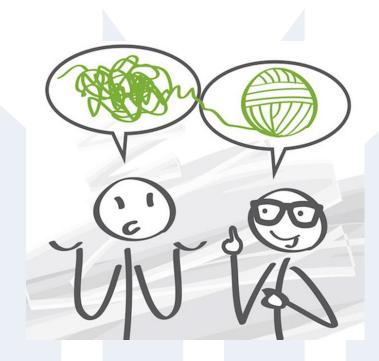
Mentoring Checklist

Name: Department:

This checklist will help you assess the areas where you are currently receiving mentoring and the areas where you may need mentoring.

Review the areas listed below and mark the appropriate column. Then review the areas where you have checked "Need Mentoring" and mark the most important area.

Learning new skills, knowledge or behaviors	Not Relevant	Have Mentoring	Need Mentoring
Research skills			
Clinical skills			
Educational skills			
Writing a grant			
Writing a paper			
Giving a presentation			
Other:			
Advancing an academic or professional careers	Not Relevant	Have Mentoring	Need Mentoring
General career guidance: focusing your efforts			
Seeking a promotion			
Getting tenure			
Developing scholarship			
Developing/enhancing your professional identity			
Identifying resources			
Networking			
Other:			
Personal and professional situations	Not Relevant	Have Mentoring	Need Mentoring
Interpersonal communication			
Leadership responsibilities			
Managing people			
Negotiation			
Resolving conflicts			
Work-life integration			
Other: http://www.	umassm	red.edu/	ofa/ment



http://www.umassmed.edu/ofa/mentoring/findmentor/identifymentor/



- Step 2
 - Identify a Mentor
 - Talk with division chiefs, department chairs, colleagues
 - Don't be afraid to ask a senior, experienced faculty member
 - Look for the best fit for you



- Step 3
 - Start a relationship
 - Brief introductory email
 - Be specific about request
 - Name mutual colleagues or interests



- Step 3 continued
 - Preparing for your First Meeting
 - Goals:
 - Convince your potential mentor to help you
 - Assess whether he/she will provide guidance needed and if you are comfortable
 - Agree to establish a mentoring relationship



- Step 3 continued
 - How do you achieve these goals?
 - Introduce yourself and describe your goals
 - Define your need for guidance
 - Describe why you are asking this person for help



- If your mentor agrees:
 - Schedule a next meeting
 - Define an agenda for the meeting
 - Discuss action steps prior to next meeting



Consider a Mentoring Contract





Mentee Name:

School of Medicine at UAB Scholarly Activity Mentoring Contract

1.	what type of assistance does the mentee want	from the mentor/co-ment	or?		
2.	What expectations does the mentor/co-mentor h	have of the mentee?			
3.	What expectations does the mentee have of the	e mentor/co-mentor?			
4.	How often will you meet?				
5.	When and where will you meet?				
6.	For how long?				
7.	Who will be responsible for scheduling the meet	tings?			
8.	What will meeting topics include?				
9.	What will be the ground rules for discussions? (truthfulness, etc.)	e.g. confidentiality, openr	ness, cando		
10.	We have agreed that our initial meetings will for	cus on these three topics:			
11.	Any additional areas/issues you want to discuss	s and agree on?			
12.	If problems arise, how will they be resolved?				
13.	How will you determine if you have achieved the	e desired objectives?			
14. I (the mentor) have reviewed and approved the mentee's Project Proposal.					
Mento	or/Co-Mentor Signature	Date	_		
Mente	ee Signature	Date			

Managing Meetings with Your Mentor



- You initiate and plan meetings and come prepared
- Regular scheduled meetings on your and your mentor's calendar
 - Send calendar invite
 - Email reminder close to meeting with proposed agenda
 - Shorter more frequent meetings keep work on track

Tips for Mentees

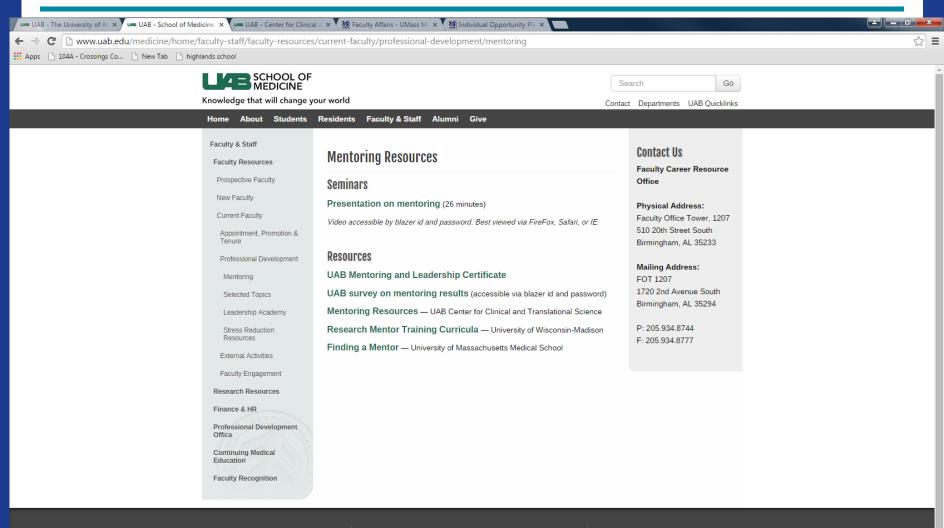


- Focused mentoring is more successful than broad requests
- Respect your mentor's time and efforts
 - If a meeting is cancelled you work to reschedule it



Use Institutional Resources





About

UAB

Contact







Other Resources



- American College of Surgeons Junior Faculty Empowerment Program
- Association of Women Surgeons mentoring program for Early Career Women Faculty
- AAS Fall Courses and Networking Event
- Specialty Specific

Dysfunctional Mentorship



POTENTIAL PROBLEM AREAS

Mismatch of mentor/mentee

- Mismatch of expectations
- Reluctant mentor/mentee
- Over zealous mentee
- Relationship not valued in the organisation
- Gender mismatch
- Cultural mismatch
- Race mismatch
- · Emotional involvement



Broken confidentiality

Conflicting roles manager/
assessor/mentor
Impact on others
Obstructions from/conflicts of others,
eg mentees line manager, colleagues,
partners
Parameters/boundaries not agreed in
advance



Dr. Carlos Pellegrini Presidential Address 2013 Clinical Congress



- Professionalism: honesty and accountability
- Excellence: good role model, high quality patient care or research
- Innovation and Creative Thinking
- Introspection: self-assessment and selfimprovement
- Inclusion: collaborative process harnessing collective intelligence and creativity

Final Thoughts













Questions?





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