

# Mentorship Program

#### Mentee Workshop October 2021

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Brief overview of Department of Psychiatry Mentorship Program:

- Model and key components
- Implementation plan

#### **Mentorship-Defined**

A professional, working alliance in which individuals work together over time to **support the personal and professional growth**, **development**, **and success** of the relational partners through the provision of career and psychosocial support.



### Background

- Established literature on importance of mentoring in health academic careers
- Mentorship supports professional development, academic outcomes and wellness.
- Inequities -Underrepresentation of women and racial/ethnic groups
- Effective mentoring relationships can engage/ develop careers of broader group of faculty with greater access and applying principles of Equity, Inclusion and Diversity (EDI)
- Departmental survey-2020
  - >60% faculty without mentors would like one
  - Orientation feedback indicated interest by mentees in finding mentor
  - >75 % Faculty mentor have received no training or resources

### Benefits of Mentorship for Mentees

- Provides impartial advice/support from experienced colleague tailored to needs
- Supports career development and confidence
- Feeling more prepared for practice and career opportunities
- Enables trusting supportive relationships with peers
- Facilitates reflective practice
- Builds potentially life-changing relationships
- Expands networks and feelings of being connected
- Provides access to trainings and resources

NB- Benefits too for mentors!

### Mentorship Working Group

- Lucy Barker, MD FRCPC
- Sumeeta Chatterjee, MD, FRCPC
- Laura Chertkow, MD FRCPC
- Shaheen Darani , MD FRCPC
- Mary Jane Esplen, PhD (Chair)
- Certina Ho, RPh BScPhm MISt MEd, PhD
- Nicole Kozloff, MD FRCPC
- Krista Lanctot, PhD
- Betty Lin, PhD
- Diane Meschino, BSc(H) MD FRCPC

- Alpna Munshi, MD FRCPC
- Raj (Rajeevan) Rasasingham, MD FRCPC
- Ivan Silver, MD FRCPC
- Sophie Soklaridis, PhD
- Peter Szatmari, MD FRCPC
- Adrienne Tan, MD FRCPC
- John Teshima, BSc, MEd, MD, FRCPC
- Simone Vigod, MD, MSc, FRCPC
- Jiahui Wong, PhD
- Administrative support -Anastasia Paramonova
- New Project- co-ordinator-Danica Kwong

### Accomplishments

- Identification of key components -literature
- Review of local successful programs
- Departmental Survey Spring 2020 and 1:1 interviews n=8
- Invited guests and meetings

(e.g. Sharon Straus; Gillian Hawker; Anita Balakrishna; Lisa Robinson)

- EDI Promotions workshop and Needs assessment May 2021
  - (Alpna Munshi (lead), Raj Rasasingham, MJE)
  - 4 groups based on how Faculty identify- community sites; women; marginalized; LGBTQ2S+

### Mentorship Programs- Best Practices

- Institutional Support (training, resources, admin)
- Appropriate dyad matching- seeking dyad input
- Establish clear mentorship purpose and goals
  - Expressing reciprocity; specifying time commitment; planning activities over time
- Solidify dyad relationship
  - Support development of relationship, regular communication; supportive environment; exchanging frequent feedback by mentor/ mentee
- Integrate mentee into academic culture
  - Teaching networking skills; facilitating socialization
- Mentors who advocates for, and guide mentee
  - Psychosocial support, promoting life balance, advising career progression

### Mentorship Programs-Best Practices (Cont'd)

- Program with guidelines and a structure (with built in flexibility)
- Clear expectations (for mentors/ mentees)
- Consistency in relation to:
  - frequency of meetings between mentor/ mentee,
  - tracking of progress,
  - navigating potential challenges
  - Supporting mentors

• Mentorship team/ resources/ coaches to support support the dyad

### Key Considerations Identified in our approach

- Shift away from culture of ad hoc mentorship towards intentional, inclusive, based on best practices.
- Mentorship for all academic roles, considered equal value.
- Access for all new faculty, as well those particular within first 5 years
- Flexibility to align with existing structures/ programs
- Recognition that mentoring contributes to career satisfaction, career development and wellness.
- Mentorship important throughout career
- Principles of EDI to be incorporated
  - mentee/mentor pairing
  - education/training
  - monitoring and evaluation plan

### **Our Proposed Mentorship Model**

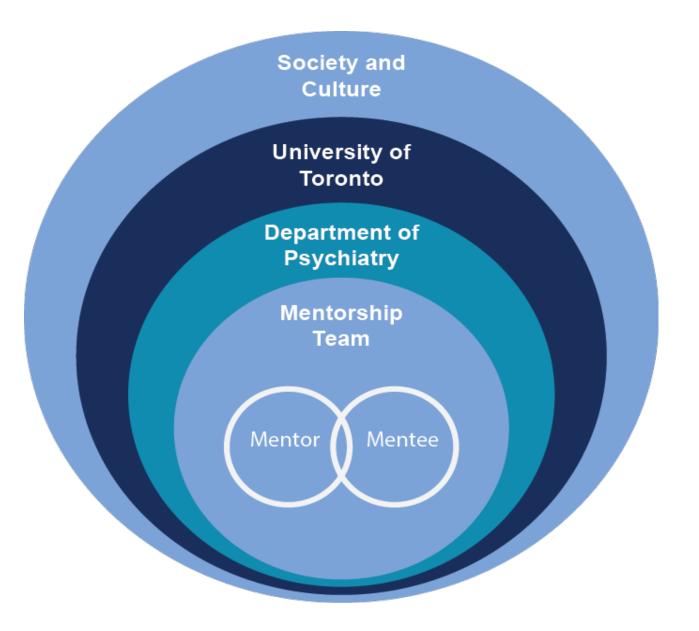
**Primary mentor -** mentoring relationship where an individual has specific responsibilities related to the progress and success of mentee.

# Networking and peer mentorship within specialized mentorship teams/groups

 Mentorship teams who contribute to specific skills and career development to mentees (e.g., for teachers, educators, CPAers, researchers)

#### **Role of coaches and facilitators**





### **Mentorship Program**

**Vision:** Faculty excellence, fulfillment of academic and career goals, and well-being.

**Mission:** To create a sustainable, evidence- based, mentorship program that promotes academic excellence, EDI, and wellness.

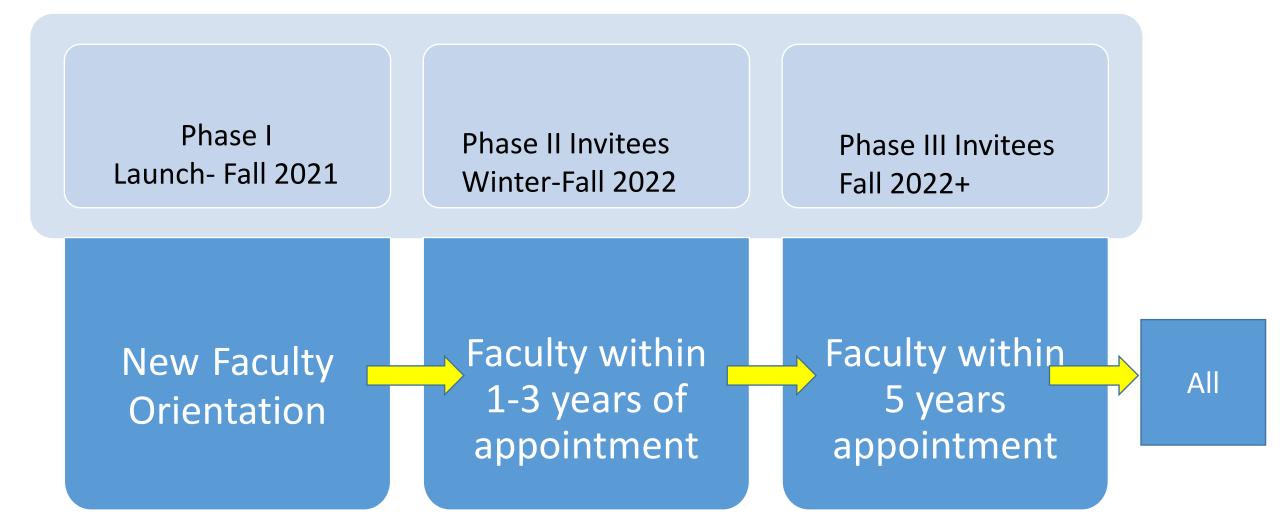
#### **Values and Principles:**

- Excellence and Impact
- Inclusivity:
- Equity
- Wellness and Safety
- Career Fulfillment
- Person-Centeredness
- Community
- Accountability
- Transparency

Mentorship Program Relevant for all Roles (Equal Value)

- •Clinician-Teacher
- •Clinician-Educator
- •Clinician-Quality improvement
- Clinician-Investigator
- Clinician-Scientist
- •Scientist (PhDs)

#### **Implementation-Target Groups**



#### Nuts and Bolts for First Cohort (Fall 2021)

"Expectation " for incoming full-time or status-only faculty members (unless they already have a mentor; will also be able to access resources)

#### **Organized pairing of mentor-mentee**

- Faculty paired with junior faculty according to interests, area of scholarship/ career track and identified preferences
- Some attempts to match with mentors based on social identity
- Combination of technology/ in person selection
  - Mentee is offered 3 potential mentors (meet within 2 months)
  - Notion of "no-fault divorce"
- Training for mentees and mentors; access to tools

### Use of Mentorship Tools

- contracts
- expectations for each party
- frequency of meetings
- clarification of confidentiality and limits
- mutual definition of the relationship
- goal establishment

-development of meaningful and realistic challenges for mentees

### Supporting Mentorship-Training and Education



#### Faculty Development - Mentorship

- Mentorship standing agenda item-Faculty Development Committee
- CBD Faculty Development Update Part 2 on "Coaching 101"
- Don Wasylenki Education Day- February 10, 2022 workshop
- Orientation for New Faculty October/November 2021
  - Introduction to mentorship program/mentee training, incorporating EDI principles <u>added</u> <u>as requirement</u>
- Centre for Faculty Development Workshops-Psychiatry Teachers/Educators

#### **Mentors-Expectations**

**Meetings**: mentor & mentee to meet once monthly or every 2 months

(some pairs encouraged to meet more frequently, e.g., weekly for research tracks)

#### Timeline for primary mentor/mentee dyad- at least one year

Mentee may receive assistance to find new mentor (no fault divorce) if need be, but supported and encouraged to stay with original mentor.

#### Encouraged to use tools, attend workshops, use resources

#### Recognition

• Mentors and their mentorship work to be recognized locally at sites, for academic promotion, etc.

### Topics-Mentor/ mentee meetings

Be clear on specific discussion topics related to career track or CanMEDS roles and their relevance in career setting/goals.

- Professional role- including faculty wellness as well as ethics, professionalism
- For clinical- CanMeds, ,e.g. Communicator role aspects of sharing clinical teaching approaches and communicating with patients, their families, and allied healthcare team members;
- Time management career planning, practice transition
- Scholar role sharing research topics and teaching techniques when mentoring junior / mid career faculty
- Other topics opportunities, conferences, awards, team work, expectations, and responsibilities(e.g. clinical role, career & promotion pathways e.g. QI or Research,
- Life balance and wellness

### **Effective Mentoring Checklist- Meetings**

- Location/ virtual; setting dates
- Clear aim or agenda set; define roles
- Personalization
- Goals and expectations
- Documentation
- Time and tracking
- Summarize meeting

### Initial Meeting –Guidelines

Prior to initial meeting Share CVs, background

Potential questions to ask and logistics to discuss:

- Where do you see yourself in the future?
- What does a mentorship relationship look like to you?
- How do you like to be mentored?
- How do you like to receive feedback?
- Would you like to visit my clinic/lab, etc.,
- Share expectations of mentorship relationship
- Ask each other: What are your expectations for this mentor/mentee relationship?

#### **Mentorship Tools**

#### **Mentorship contracts**

- written agreement to outline expectations from, and commitments to, mentees, and vice versa
- meet at least q monthly/ q 2months

#### Mentee Development Plan

- web-based career-planning tool tailored to needs of mentee.
- exercises to help examine skills, interests, career paths; tool for setting strategic goals for the coming year, tracking, articles and resources

#### **Mentoring Map**

• tool to help identify academic and career goals, sources of support to reach goals, and areas where unmet needs could benefit from new mentoring relationships in network.

Brief viewing of online component



## Thank you

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