

MyPractice Mentor Matching Service Mentoring Guide for Mentors and Mentees



1.0 Overview

Mentorship is a process through which an experienced person (mentor) guides another individual (mentee) in enhancing skills and knowledge for their personal and professional development.¹ The importance of mentorship within the medical profession has been well recognized. Mentorship is an essential component of strategies for supporting medical professionals in the development of professional identity and professional integration.²

Mentorship can be beneficial for both the mentee and the mentor. Benefits for the mentee may include increased career satisfaction, increased self-efficacy, stress reduction, networking opportunities, career coaching and support, and research guidance.^{1,3,4} Benefits for the mentor may include personal fulfillment, development of leadership and coaching skills, opportunities for self-reflection and self-renewal, and career advancement.^{1,4}

MyPractice is a training and support program that helps family physicians navigate the process of setting up a new family medicine practice in Newfoundland and Labrador (NL), move from one practice to another within the province, or transition from active practice to retirement. The Mentor Matching Service, as part of the program, connects family physicians at any stage of practice with experienced family physicians who are interested in providing guidance and support to peers establishing a family medicine practice in NL or transitioning practice within NL.

The Mentor Matching Service is open to family physicians at any stage of practice, such as newly graduated physicians, physicians new to a region, physicians transitioning from solo to group practice and vice versa, etc.

The objectives of the Mentor Matching Service are to:

- Enhance physicians' knowledge about and confidence in setting up a new family medicine practice or transitioning from one practice to another in NL.
- Increase physicians' awareness of existing/relevant local resources.
- Increase physicians' access to experienced physicians.

2.0 Time Commitment and Expectations

Duration of a mentoring relationship within the structure of this program is a maximum of 9 months.

Each mentor is expected to spend a maximum of 25 hours of mentorship per mentee over the nine-month period. The number of hours per month will be at the discretion of the mentor/mentee relationship.

The mentor and mentee will communicate with each other based on their availabilities/needs via their preferred channels, such as email, video conferencing, phone call, etc.

The mentor and mentee will maintain confidentiality of the topics discussed in the mentoring relationship.

3.0 Mentorship Roles and Responsibilities

Mentee:

- Take the initiative to seek guidance and advice from the mentor relating to setting up a family medicine practice in NL or transitioning practice within NL.
- Identify the needs, expectations, and/or goals and communicate them to the mentor.
- Inform the mentor about the preferred learning format.
- Be open to suggestions, advice, and feedback.
- Recognize the importance of the mentor's time by attending scheduled meetings.
- Maintain confidentiality about shared information.
- Understand that the mentor will not have all the answers and be prepared to seek out other resources as needed.
- Participate in the evaluations of the Mentor Matching Service.

Mentor:

- Provide guidance and support relating to setting up a family medicine practice in NL or transitioning practice within NL based on the mentee's needs.
- Be available to the mentee in a supportive capacity, willing to listen and offer support and advice.
- Discuss relationship objectives, form of communication, and frequency of communication with the mentee at the beginning of the mentorship relationship.
- When appropriate, identity local resources and networking opportunities that benefit the mentee.
- Set and model appropriate boundaries.
- Maintain confidentiality about shared information.
- Serve as a role model of professional competence and behaviour.
- Recognize the importance of the mentee's time by attending scheduled meetings.
- Participate in the evaluations of the Mentor Matching Service.

Note: The focus of the Mentor Matching Service is not discussing the care of individual patients. If you discuss the care of a patient with your mentee and offer your clinical advice, you and your mentee will both share the responsibility for patient outcomes. You must always protect the confidentiality of the mentee and the mentee's patient. Any specific questions about medicallegal risks should be addressed directly to the CMPA (http://www.cmpa-acpm.ca).

4.0 Mentorship Agreement

To start a mentorship relationship, the mentor and mentee will sign a mentorship agreement indicating their roles and responsibilities.

Either the mentor or mentee may terminate this agreement (and their mentorship relationship) by submitting a written request, which outlines the reasons why they wish to withdraw from the Mentor Matching Service, to fprp@nlma.nl.ca.

5.0 Program Evaluation

Both the mentor and mentee are required to participate in the evaluations of the Mentor Matching Service. Semi-structured interviews with mentees and mentors are conducted at the end of the program to examine their mentorship experiences. A Post-program Survey is distributed to each MyPractice program registrant 3-6 months Post-Program.

6.0 Tips for Mentors and Mentees

6.1 Identifying needs

Strong mentoring relationships are built when there is clarity about the needs of both mentee and mentor. Initial conversations should explore the needs and expectations of all involved in the mentoring relationship. These open and honest discussions will become particularly important when the members of a mentoring relationship do not know one another before entering their relationship.⁵

6.2 Listening actively

Listening actively is an important skill that the mentor and mentee will use throughout their relationship. Active listening not only establishes rapport but creates a positive, accepting environment that permits open communication. ⁶

6.3 Building trust

Trust is built over time. The mentor and mentee will increase trust by keeping their conversations and other communications confidential, honoring the scheduled meetings and calls, spending quality time together, and being honest with each other.⁶

6.4 Being proactive

The mentee is encouraged to take initiative and help determine the pace, route and destination of the mentorship relationship. This will allow the mentor to offer insights and counsel that are customized to the mentee's objectives and needs.⁷

7.0 References

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- 3. MacLeod, S. (2007). The challenge of providing mentorship in primary care. *Postgraduate medical journal*, *83*(979), 317-319.
- 4. Ratnapalan, S. (2010). Mentoring in medicine. *Canadian Family Physician*, *56*(2), 198-198.
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- 6. Center for Health Leadership & Practice. (2003). *Mentoring Guide: A Guide for Mentors.*Oakland, CA: Public Health Institute.
- 7. Muller, M. (n.d.). How to Be Proactive in Your Mentoring Relationships. National Postdoctoral Association. https://www.grad-college.iastate.edu/documents/postdoc/How%20to%20Be%20Proactive%20in%20Your%20Mentoring%20Relationships.pdf