

# Mentor Guidelines

## Mentor Role and Responsibilities

The mentor accepts critical responsibilities as follows:

- Helps the mentee establish a vision plan
- Help the mentee establish short- and long-term goals based on the vision plan and other discussions.
- Actively listens to the needs and goals of the mentee, and asks challenging questions.
- Ensures that the Mentee understands and commits to the practice mission, vision and values.
- Strives to learn and practice the ability to give constructive feedback.
- Appreciates that mentees will often need time and practice to translate their advice and guidance into improved skills (surgical, business, and staff/client relations).
- Helps guide the mentee in medical decision making-process. Give validity to mentees' observations, using case examples.
- Strives to help the mentee become fully independent as a professional, recognizing that the mentee has ultimate responsibility for the personal and professional decisions. Encourages self-directed learning by the mentee.
- Helps the mentee to identify fears or discomforts and mutually develop a plan to deal with them.
- Provides resources and solutions (e.g., internet sites, texts, or networking via professional associations).
- Helps the mentee learn and improve communication skills with clients and team members, and thus to create positive professional relationships.
- Avoids intended or unintended use of implied power. For example, mentors may also have the role of supervisor of the mentee. In creating a positive environment for both sides, the dual role of this relationship needs to be acknowledged and respected.
- Adjusts mentoring to the mentee's changing needs, such as providing verbal encouragement, demonstrating skills, or just being available if needed.

## Mutual Responsibilities of Mentee and Mentor

- Bring enthusiasm, optimism, sensitivity, unselfishness, and respect to the relationship.
- Make a commitment of time and energy.
- Strive to be open to new ideas and feedback.
- Recognize that in the discussion of "goals," those goals may include those of the mentor, the mentee, and the hospital.
- Commit to and reaffirm the highest standards of professional conduct, including full confidentiality of discussions.
- Reschedule any meeting time that can't be met.
- Periodically assess and celebrate progress.
- Periodically evaluate the mentoring relationship to see if it should continue, be modified or terminated.

### Types of Mentoring Relationships

Formal	Includes a written agreement, formal meeting times, and involvement in daily or weekly activities.
Informal	A relationship without a written agreement or formal meeting schedule.
Virtual (distance, via e-mail)	Includes emails, chats, phone calls, and other interactions without being physically in the same place.
Face-to-face	Includes meeting in a physical location with both parties together.
Peer-to-peer	Colleagues at the same level sharing experiences and knowledge. Friends or co-workers can be informal mentors for personal growth.

# Mentee Guidelines

## Mentee Role and Responsibilities

The mentee should seek to accept full ownership of the relationship as follows:

- Establishes “vision plan” with help of the mentor.
- Takes responsibility to “own” the relationship. Discusses and prioritizes professional needs and goals.
- May request help in clarifying goals, finding resources and identifying new directions.
- Respects the mentor’s time commitment by identifying, planning, and preparing issues for discussion.
- Recognizes that learning client communication skills and medical/surgical skills take time and practice, trusting that confidence will build.
- Is open to a non-academic perspective in private practice.
- Clarifies with the mentor the preferred method for conveying the mentee’s new ideas about patient care, client communication, and hospital management.
- Is willing to share fears and concerns with the mentor, learning that it is acceptable and natural to sometimes feel helpless, lost, or frightened.
- Understands the importance of the all team members and their key role in delivering top quality medical care to patients.
- With mentor’s assistance, strives to develop a professional rapport with the hospital team.
- Brings ideas to improve communication with mentor, clients, and fellow team members.
- Actively pursues opportunities to network.
- Strives to be a receptive and active listener, knowing that constructive feedback is an essential element to continuous professional growth.

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## Action Steps for the Mentoring Relationship

- 1. Initiate a mentoring relationship by mutual agreement.
  - a. Discuss roles and responsibilities.
  - b. Collaborate to choose the type of mentoring relationship that best fits your situation.
- 2. Get acquainted, optimally by meeting outside of the work environment. Build trust by openly sharing and discussing issues.
- 3. Develop mutual expectations and boundaries. Discuss accountability of both parties at the beginning of the relationship. Discuss confidentiality.
- 4. Discuss ethics, including conflict of interest issues, and agree upon ethical boundaries. When applicable, ensure congruency with AAHA policies and protocols.
- 5. Discuss a vision plan (i.e., overall purpose / long term goal of the relationship)
- 6. Establish, clarify, and write down goals to achieve the vision.
  - a. Define and prioritize areas of greatest needs, with the mentee taking the lead rather than relying upon the mentor to define needs for them.
  - b. Use SMART goals \* (Specific, Measurable, Attainable, Realistic, and Timely) for mentor and mentee, as well as shared and/or consistent hospital goals.
  - c. Personalize goals to fit the needs of the mentee. Examine the mentee's concerns and fears when establishing goals.
- 7. Discuss and negotiate a schedule for meeting together.
  - a. Establish formal meeting times to discuss "how things are going."
  - b. Determine meeting location.
  - c. Plan for your discussions, with the mentee taking the lead in planning.
  - d. Create a process whereby a mentee can ask for immediate help as needed.
  - e. If most meetings are virtual, also schedule occasional face to face meetings.
- 8. Establish a protocol to help the mentee develop new skill sets in areas such as surgery, medial records, client communication, and other areas of interest.
- 9. Discuss expected outcomes and how those will be monitored or measured. Set up an evaluation process (including the time, place, and procedure) to evaluate the mentee's progression towards goals.
- 10. Discuss how to resolve conflict.
- 11. Create a time frame for the relationship that is beneficial to both parties. Clarify a mutually agreeable endpoint or time for renewal of the relationship.
- 12. Celebrate progress and accomplishments.

\* Doran George, There's a S. M. A. R. T. Way to Write Management Goals and Objectives., Management Review (AMA Forum), November 1981, pps. 35-36

## Items that may be included in a mentoring agreement

- Confidentiality agreement
- Conflict of interest disclosure
- Formal agreement on roles and responsibilities
- Any financial terms specifically related to the mentoring agreement
- Protected time for meetings (This should include amount of time and frequency)
- Agreement on other forms of communication in addition to face-to-face meetings
- Agreement on establishing a vision plan for the mentee (Consider attaching a time frame)
- Agreement on establishing a goal plan for the mentee (Consider attaching a time frame)
- The goal plan that will be broken down into action plans
- Based on these action plans, an associated plan for allocation of resources (training, techniques to help manage time, CE, and other helpful aids) will be created
- Establish formal review dates for the mentoring relationship
- A mutual agreement to end the formal relationship based on agreed upon criteria