PILOT PEDIATRIC MENTORING PROGRAM

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STANFORD UNIVERSITY SCHOOL OF MEDICINE
LUCILE SALTER PACKARD CHILDREN’S HOSPITAL
HISTORY

- Establishment of Child Health Research Program at Lucile Packard Children’s Hospital at Stanford 2005
  - Clinical Core, pilot funding, Career Development
- Career Development Committee
  - Formal needs analysis
  - Input from junior and senior faculty

Need for a different type of mentoring program to complement primary mentor model
IDENTIFIED NEEDS

- Objective and accurate information regarding career development
- Conflict of interest
- Multiple role models for the multiple problems
- Accountability and commitment to mentoring
- Networking and building community
- Establishment of a mentoring culture
PILOT PEDIATRIC MENTORING PROGRAM (PPMP): ARCHITECTS

☐ Linda A. McLaughlin
  ■ Director of Academic Affairs and Faculty Development, Pediatrics

☐ Mary M. Chen
  ■ Program Manager, Child Health Research Program

☐ Hannah A. Valantine, MD
  ■ Senior Associate Dean for Diversity and Leadership, School of Medicine

☐ Christy Sandborg MD
MISSION OF PPMP

- To promote the career development of junior investigators in the Department of Pediatrics
  - through a formal mentorship program with multiple mentors “Stable of Mentors”
  - Complementary to the primary mentors

Part of the Mosaic of Mentoring
OBJECTIVES OF PPMP

- To improve the academic trajectory of junior investigators
- To provide training and orientation for mentors and mentees.
- To customize mentoring needs through specialized areas: academic, research, clinical/teaching, and work-life balance.
- To serve as a pilot mentoring program which can be modeled by other School of Medicine departments.
- To become the academic “employer of choice”
ELEMENTS OF PPMP: ACCESS TO MULTIPLE MENTORS

- Diversity of expertise
  - Academic
  - Research
  - Teaching/clinical
  - Work-life balance

- Diversity of demography, life experience and style

- Mentees can access any or all of mentors in the Stable of Mentors
ELEMENTS OF PPMP: MENTOR/MENTEE TRAINING

- Stable of Mentors collaborate in designing, implementing and evaluating program
- Consultant in mentoring and coaching
  - Susan Murphy PhD  [www.consult4business.com](http://www.consult4business.com)
- Each mentor responsible for developing and researching their content area
- Quarterly workshops for mentors and mentees
  - Communication skills, including conflict and giving feedback and gender & generational differences
  - Specific information from experts
  - Evaluate program and change approach
ELEMENTS OF PPMP: FLEXIBLE MENTORING VENUES

- One-on-one
- Team mentoring—one mentor and 3-4 mentees
- Peer mentoring facilitation (both mentees and mentors)
- Large group—lectures from experts
ELEMENTS OF PPMP: ACCOUNTABILITY

- Program must meet specific outcomes to continue
- Mentors
  - Protected time
  - Clear expectations
  - Chair review
- Mentees
  - Minimum 2 individual and 2 team sessions/year
  - Yearly divisional review
- Specific focus areas with special emphasis—women and minorities
  - Members of Stable of Mentors assigned to facilitate and monitor effectiveness
ELEMENTS OF PPMP: ENDORSEMENT AT HIGHEST LEVELS

- Chair of Pediatrics
  - Provides protected time
  - Funding
  - Evaluation of PPMP
  - Including mentoring in Division chiefs evaluations
- Lucile Packard Foundation for Children’s Health
  - Funding
- School of Medicine—Decanel Office
  - Endorsement of Dean of the School of Medicine
    - E.g., including mentoring in Chair evaluations
  - Leadership from Senior Associate Dean—H. Valantine
  - Funding
ELEMENTS OF PPMP: MEASUREMENT OF OUTCOMES

☐ Short-term (Year 1)
  - Pre-and post-survey of mentees’ satisfaction, self-efficacy and academic progress
  - Data on attendance, mentor/mentee meetings
  - Focus groups—Division chiefs, faculty, mentors (primary and Stable), mentees

☐ Long-term (Years 2-4)
  - Retention and promotion
  - Successful competition for funding
  - Stable funding for program
  - Adoption by other Departments in School of Medicine
Range of Novel Mentoring Models—Discussion

Stanford models used:
- Traditional “primary” mentors
- Informal mentoring
- Leadership courses
- Team mentoring—Faculty Fellows Program
- Multiple mentors—Pilot Pediatric Mentoring Program
OTHER MODELS

- Peer mentoring—“Internal Medicine Research Group at Emory (IMERGE)”
- 80hr (10x8h) sessions-East Carolina University, “Collaborative Mentoring Program”
  - Pololi et al, Acad Med 2002
  - Pololi, J Gen Intern Med 2005
- Workplace empowerment—combined classroom based curriculum and individual mentoring “Junior Faculty Development Program”
  - Thorndyke et al, Acad Med 2006
OTHER CONSIDERATIONS

- Positive role of individual and multiple mentors—University of Pennsylvania
- Nature awards for creative mentoring in science
- Gender considerations
  - Carr, J Women’s Health, 2003
- Generational considerations
  - Bickel and Brown, Acad Med, 2005
OPEN DISCUSSION OF MENTORING MODELS

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STRUCTURED SMALL GROUP DISCUSSIONS IN KEY AREAS
STRUCTURE OF SMALL GROUPS

- 5 groups
- Specific questions
- Identify leader and scribe
- Suggestions for process:
  - Brainstorm 45 minutes today
  - Pull together ideas 45 minutes tomorrow
  - Round robin to involve all participants
- Present to entire group tomorrow
TOPICS FOR GROUP 1

- Identify and discuss
  - Methods for assessing mentoring gaps
  - Methods for assessing faculty needs

And other topics of interest to group
TOPICS FOR GROUP 2

- Identify and discuss
  - Strategies for establishing an institutional culture of mentoring
  - Accountability for mentoring, including strategies to leverage institutional commitment at the highest level

*And other topics of interest to group*
TOPICS FOR GROUP 3

- Identify and discuss
  - Practicalities of designing a new mentoring program: goals/objectives/ real-time evaluation & course correction
  - Program evaluation including success metrics & calculation of ROI

And other topics of interest to group
TOPICS FOR GROUP 4

- Identify and discuss
  - How to identify, train, compensate and evaluate a cadre of mentors
  - Mosaic of Mentors – Essential expertise areas:
    - Academic; Research; clinical/teaching; life-work balance; women and underrepresented minorities.

And other topics of interest to group
TOPICS FOR GROUP 5

- Identify and discuss
  - Role of peer and small group mentoring
  - How to incorporate informal mentoring and leverage networking

And other topics of interest to group
THANK YOU AND HAVE FUN