ABSTRACT: 2014 ELAM Institutional Action Project Poster Symposium

Project Title: Enhancing Faculty Development through Design and Implementation of a Formal Mentoring Program

Name and Institution: Barbara Hempstead, Weill Cornell Medical College

Collaborators: John Leonard, MD, Lia Logio, MD, Gary Koretzky, MD, PhD

Background, Challenge or Opportunity: The importance of effective, individually focused mentoring by experienced senior faculty is widely accepted as a key factor to enhance academic productivity, scholarship and career satisfaction of junior and mid career faculty. However, the diversity of faculty roles at medical colleges is a significant challenge in designing an effective system to meet the needs of junior faculty members. Furthermore, faculty surveys document a continued need for more effective mentorship, despite the implementation of mentoring programs for specific subgroups of junior faculty **Purpose/Objectives**: This project aims to identify best practices for mentorship programs for junior and mid career faculty, and to adapt these to a formal Mentorship Program at Weill Cornell Medical College. This initiative will provide guidelines to ensure that all junior faculty have identified mentors, that mentors establish a formal contract to meet regularly with mentees, that this process is centrally monitored, and provides appropriate training and recognition of mentors

Methods/Approach: A systematic review was undertaken of Mentorship Programs at six medical schools that have garnered national recognition, a comprehensive report from the AAMC of 16 existing Mentoring Programs, as well as current mentoring opportunities at WCMC. Most medical school mentoring programs focus on subsets of faculty, such as junior faculty, women faculty, teaching faculty, research faculty, physician scientists, and mentorship leaders. Few institutions provide comprehensive programs with central monitoring. We propose a system in which mentoring facilitators are identified and appointed in each Department/Center to work with a Coordinator/Director of Faculty Mentoring who oversees all aspects of the mentoring program. We propose that mentors are identified at initial hire for new faculty, and current full time junior and mid career faculty are paired with senior faculty responsible for providing career guidance and support. Mentees will develop a mentoring contract and meet twice a year with mentors. Junior faculty will be encouraged to participate in more selective and rigorous programs for clinical researchers, educational scholars, or research-based faculty. The Office of Faculty Development will develop and disseminate mentoring resources, both web-based and through instructional seminars and workshops, and highlight best mentorship practices.

Outcomes and Evaluation Strategy: Quantitative metrics to assess improvements in faculty promotion, scholarship and satisfaction have not been established by the field in part because of the recent emergence of formal mentoring programs. However, three mechanisms will be utilized to assess efficacy. First, WCMC has established an Annual Faculty Review Program, from which information will be extracted to assess incremental scholarship gains (publications and grants), and to assure that faculty have identified mentors. Second, our biennial faculty survey probes access to, and utility of mentors, and this will be used to assess incremental gains. Lastly, reviews provided by mentors in the mentorship contracts will identify the specific mentorship programs that are most highly used by faculty.



Weill Cornell Medical College



Executive Leadership in Academic Medicine College of Medicine

Enhancing Faculty Development through Design and Implementation of a Formal Mentoring Program

Barbara Hempstead, MD, PhD

Collaborators: John Leonard, MD, Lia Loggio, MD, Gary Koretsky MD PhD, Laurie Glimcher, MD





Background and Opportunity:

The importance of effective, individually focused mentoring by experienced senior faculty is widely accepted as a key factor to enhance academic productivity, scholarship and career satisfaction of junior and mid career faculty. However, the diversity of faculty roles at medical colleges is a significant challenge in designing an effective system to meet the needs of junior faculty members. Furthermore, faculty surveys document a continued need for more effective mentorship, despite the implementation of mentoring programs for specific subgroups of junior faculty

Objectives:

This project aims to identify best practices for mentorship programs for junior and mid career faculty, and to adapt these to a formal Mentorship Program at Weill Cornell Medical College. This initiative will provide guidelines to ensure that all junior faculty have identified mentors, that mentors establish a formal contract to meet regularly with mentees, that this process is centrally monitored, and provides appropriate training and recognition of mentors

Programs Reviewed/Citations

Indiana Univ School of Med, Mentoring Task Force Report, 2009 Review of National Mentoring Resources, Indiana Univ, 2011 Univ California, San Francisco, Faculty Mentoring Program, 2013 Brigham and Women's Hospital, Mentoring Tool Kit, 2013 Vanderbilt University School of Medicine, Translational Scientist Mentoring Univ Kansas School of Medicine, Faculty Mentoring Program Website Univ Michigan, School of Medicine, ADVANCE program for women faculty, 2013 AAMC. Medical School Based Mentoring Programs, Oct 2010.

Presented at the 2014 ELAM Leaders Forum

Methods: A systematic review was undertaken of

a)Mentorship Programs at six medical schools that have garnered national recognition.

b) a comprehensive report from the AAMC of 16 existing Mentoring Programs c) survey of faculty and of current mentoring opportunities at WCMC.

Results: Most mentoring programs focus on subsets of faculty, (junior faculty, women faculty, teaching faculty, research faculty, physician scientists, mentorship leaders).

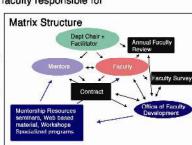
Few institutions provide comprehensive programs with central monitoring.

Survey of Existing Mentorship at WCMC:



Discussion:

- We are developing a system in which:
- a) mentoring facilitators are identified and appointed in each Department or Center
- b) facilitators work with a Coordinator of Faculty Mentoring within the OFD who oversees all aspects of the mentoring program.
- c) mentors are identified at initial hire for new faculty, and current full time junior and mid career faculty are paired with senior faculty responsible for
- providing career guidance and support. d) Mentees will develop a mentoring contract and meet twice a year with mentors.
- e) Junior faculty will be encouraged to participate in more selective and rigorous programs for clinical researchers, educational scholars or researchbased faculty.
- f)The Office of Faculty Development will develop and disseminate mentoring resources, both web-based and through instructional seminars and workshops. and highlight best mentorship practices.



I AMP

Medicine

WOLK

Fellows

Intensive, yearlong program in neethcare menagem

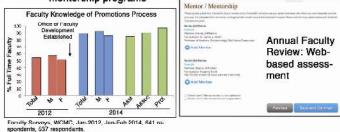
Healthcare Leadership

Intensive. 9 M program for 2,3 yr Assist Professors

Leadership in Academic

Outcomes and Evaluation Strategy: Because of the long timeframe for faculty promotion, and the relatively recent emergence of formal mentorship programs, established quantitative metrics to assess improvements in faculty promotion, scholarship and satisfaction have not been established by the field. However, four mechanisms to assess efficacy will be undertaken.

- a) Utilization of a Annual Review Program, from which information will be extracted to assess incremental scholarship gains (publications and grants), and to assess that faculty have iden tified mentors.
- b) biennial faculty survey, in which more than 10 questions probe access, activity, and utility of mentors, and this will be used to assess incremental gains.
- c) reviews provided by mentors in the mentorship contracts will identify the specific mentorship programs that are most highly used by faculty.
- d) annual review and selective expansion of the most successful mentorship programs



Summary and Conclusions:

Developing a centralized process to oversee and support a Mentorship Program that is Departmentally based will unfold over several years. Next steps include:

- Communicate institutional committment to mentoring
- Develop materials for mentors
- Define the instritutional infrastructure and support for oversight of this program

Approve a mentorship contract **Identify Departmental Facilitators** Gain consensus for evaluation