

## **ABSTRACT: 2019 ELAM Institutional Action Project**

**Project Title:** A Qualitative Analysis of Faculty Mentorship Practices in a Department of Internal Medicine

**Name and Institution:** Alison R. Walker, MD MPH  
The Ohio State University

**Collaborators and Mentors:** Philip Binkley MD, MPH, Heather Brod, K Craig Kent MD

**Topic Category:** Faculty Development

**Background, Significance of project:** In academic medicine, successful mentorship across clinical, education and research missions is believed to contribute to job satisfaction and perceived career success. While the importance of mentorship is evident, how best to implement programs, maintain accountability and incent mentors to take on additional mentees is less clear. At The Ohio State University, division directors in the Department of Internal Medicine are allowed to develop individual faculty mentorship practices, creating a variation in approach. We sought to perform a current state analysis of mentorship that will inform a plan to standardize mentorship expectations in the College of Medicine.

**Purpose/Objectives:** The primary objective of this project was to obtain a current state assessment of mentorship practices in each of the divisions within the Department of Internal Medicine at The Ohio State University.

**Methods/Approach/Evaluation Strategy:** Each division was assessed with respect to the total no. of faculty, no. of females, degree type, rank (female v male), years in rank (female v male), and whether promotion occurred with or without tenure. The division director (DD) was interviewed and asked to comment on his/her general approach to mentorship, the presence of a formal mentoring committee or mentorship focused faculty member in the division, whether mentors are assigned or designated in the offer letter, whether a summary of mentoring meetings is submitted to the DD, if faculty receive formal mentorship training, if mentorship is discussed during the annual review, what mentorship success is considered to be and any requests to the Dean for help with advancing mentorship in the division.

**Outcomes/Results:** 539 MD, PhD, MD/PhD and Master level faculty in the fourteen divisions of the Department of Internal Medicine were reviewed. The median division size was 28 (10-94) and the median no. of female faculty per division was 11 (3-37). General Internal Medicine, Hematology and Hospital Medicine were the only divisions with > 30 female faculty. DD have held this position for a median of 6 years (6 weeks-9 years). Two divisions have a formal mentoring committee, three designate a mentor in the offer letter, six have a mentorship focused faculty member, and four assign a mentor. None of the DD receive a summary of mentorship meetings. All discuss mentorship progress at the annual faculty review. No formal training to become a mentor is required in any division. General approaches to mentoring were varied – organic v assigned, structured v unstructured, with or without DD involvement. Some DD expressed a desire to identify mentors outside of their division but did not have a mechanism to do so consistently. Attrition of mid-level and senior mentors from some divisions has made mentorship more challenging. Requests from the Dean included the development of a metric to value and/or recognize mentorship (ie. release time), structured mentorship guides for the DD to utilize, identification of a way to get to know senior faculty outside of the home division, and mentorship plans for faculty on the educational track.

**Discussion/Conclusion with Statement of Impact/Potential Impact:** Although mentorship approaches within the Department of Internal Medicine vary, there are features in common. All DD recognize the importance of mentoring to faculty and consistently perform an assessment of mentorship success during the annual review. Any intervention to provide structure to the mentorship relationship should allow for flexibility. Based on this analysis, access to standardized mentoring guidelines for all promotion tracks, valuation/recognition of mentoring activities and opportunities to interact with faculty from other divisions for mentoring purposes are desired.





# A Qualitative Analysis of Faculty Mentorship Practices in a Department of Internal Medicine

Alison R. Walker MD, MPH

The James



## Background

- Mentorship can serve as a means to facilitate knowledge and skill development as well as promote professional and personal growth.
- Successful mentorship across clinical, education and research missions is believed to contribute to job satisfaction and self-perceived career success.
- How best to implement mentorship programs, maintain accountability and incent mentors is less clear.
- At the Ohio State University (OSU), division directors (DD) in the Department of Internal Medicine (DOIM) are not required to follow a standardized approach to the mentorship of faculty.
- Mentorship experiences for faculty across the DOIM divisions vary and there is a desire to standardize expectations for faculty.

## Primary Objective

- To obtain a current state assessment of mentorship practices in each division within the Department of Internal Medicine

## Methods/Approach

- Each division director was interviewed and asked to answer the following questions:
- What is your philosophy and general approach to mentorship for your faculty?
  - Is there a formal mentoring committee in the division that serves all of the faculty?
  - Is there a faculty member in the division who is mentorship-focused and responsible for addressing faculty mentorship issues?
  - Are mentors assigned to new faculty hires?
  - Do offer letters designate the mentor assigned to a new faculty hire?
  - Do you receive a summary of mentorship meeting discussions?
  - Do you require mentors to undergo specific training in mentorship?
  - Do you discuss mentorship during the annual review?
  - What would you consider to be a successful mentor-mentee relationship?
  - Do you have any requests of the Dean that would help you to further develop mentorship in you divisions?

Collaborators: Heather Brom, Phil Binkley MD, MPH, K Craig Kent, MD

## Division Characteristics

| Division                                     | Assistant Professor | Assistant Professor Female | Years in Rank (range) | Associate Professor | Associate Professor Female* | Years in Rank (range) | Professor | Professor Female* |
|--|---------------------|----------------------------|-----------------------|---------------------|-----------------------------|-----------------------|-----------|-------------------|
| Human Genetics                               | 6                   | 5                          | F:{0-2} M:{5}         | 6                   | 6                           | F:{0-5} M:NA          | 4         | 1                 |
| Gastroenterology<br>Hepatology,<br>Nutrition | 20                  | 7                          | F:{0-5} M:{1-10}      | 8                   | 1                           | F:{1} M:{0-14}        | 2         | 1                 |
| Endocrinology,<br>Diabetes and<br>Metabolism | 10                  | 6                          | F:{0-6} M:{1-5}       | 7                   | 4*                          | F:{2-5} M:{0-10}      | 6         | 3**               |
| Cardiovascular<br>Medicine                   | 27                  | 5                          | F:{1-7} M:{0-10}      | 14                  | 1                           | F:{11} M:{0-33}       | 21        | 3*                |
| Dermatology                                  | 11                  | 8                          | F:{0-11} M:{1-7}      | 2                   | 1                           | F:{0} M:{0}           | 1         | 0                 |
| General<br>Internal<br>Medicine              | 47                  | 27                         | F:{0-10} M:{0-10}     | 10                  | 5 -                         | F:{0-1} M:{0-19}      | 2         | 0                 |
| Hematology                                   | 38                  | 21                         | F:{0-7} M:{0-10}      | 11                  | 11**                        | F:{0-6} M:NA          | 11        | 2**               |
| Hospital<br>Medicine                         | 89                  | 34                         | F:{0-6} M:{0-9}       | 5                   | 3                           | F:{0-4} M:{0-3}       | 0         | NA                |
| Infectious<br>Disease                        | 6                   | 3                          | F:{1-6} M:{1-7}       | 4                   | 1*                          | F:{3} M:{3-18}        | 3         | 2                 |
| Medical<br>Oncology                          | 41                  | 13                         | F:{0-5} M:{0-8}       | 9                   | 4**                         | F:{0-3} M:{0-4}       | 6         | 3                 |
| Nephrology                                   | 12                  | 3                          | F:{1-3} M:{0-12}      | 4                   | 0                           | F:NA M:{3-8}          | 3         | 0                 |
| Palliative<br>Care                           | 11                  | 7                          | F:{0-8} M:{3-4}       | 2                   | 2                           | F:{0-3} M:NA          | 1         | 0                 |
| Pulmonary &<br>Critical Care                 | 30                  | 14                         | F:{0-9} M:{0-10}      | 11                  | 5                           | F:{0-5} M:{2-28}      | 8         | 0                 |
| Rheumatology/<br>Immunology                  | 7                   | 5                          | F:{1-8} M:{4-5}       | 0                   | 0                           | F:NA M:NA             | 1         | 0                 |

F=Female M=Male \*Number with tenure

## Results

| Division                                      | Number of Faculty | Formal Mentoring Committee | Assigned Mentors | Assigned Mentor in Offer Letter | Mentorship Focused Faculty Member |
|---|-------------------|----------------------------|------------------|---------------------------------|-----------------------------------|
| Human Genetics                                | 17                | Yes                        | No               | No                              | Yes                               |
| Gastroenterology,<br>Hepatology and Nutrition | 31                | No                         | No               | No                              | No                                |
| Endocrinology, Diabetes &<br>Metabolism       | 25                | No                         | Yes              | No                              | No                                |
| Cardiovascular Medicine                       | 65                | No                         | No               | No                              | Yes                               |
| Dermatology                                   | 14                | No                         | Yes              | Yes                             | No                                |
| General Internal Medicine                     | 60                | No                         | No               | No                              | No                                |
| Hematology                                    | 62                | No                         | No               | No                              | Yes                               |
| Hospital Medicine                             | 94                | Yes                        | Yes              | Yes                             | Yes                               |
| Infectious Disease                            | 16                | No                         | No               | No                              | No                                |
| Medical Oncology                              | 56                | Yes                        | Yes              | Yes                             | Yes                               |
| Nephrology                                    | 20                | Yes                        | No               | No                              | Yes                               |
| Palliative Care                               | 14                | No                         | No               | No                              | Yes                               |
| Pulmonary & Critical Care                     | 50                | No                         | No               | No                              | No                                |
| Rheumatology//Immunology                      | 10                | No                         | Yes              | Yes                             | Yes                               |

## Results

- No DD receives a copy of minutes from mentorship meetings.
- All DDs discuss mentorship during the annual review.
- None of the DDs require mentors to complete formal training.
- General approaches to mentorship are variable and include structured processes as well as more organic, informal relationships.
- Mentorship success includes faculty engagement and career satisfaction in addition to manuscript submissions, grant funding and promotion.
- Requests from the Dean included the development of a metric that promotes the value of mentorship and formally recognizes mentors; structured mentorship guides for the DD to utilize specific to the promotion track (tenure, clinical scholar, educator) if needed, creation of a mechanism that allows junior faculty to get to interact with senior faculty in other divisions or departments.

## Discussion

- Universally DDs are aware of and committed to mentorship of their faculty. The success of this relationship is consistently assessed at the annual review.
- Approaches to mentorship are shaped by personal experiences and self-perceived benefits of structured vs unstructured mentoring relationships.
- Given the planned implementation of a new compensation plan there is concern about the lack of a metric that captures mentorship per se and whether this will impact mentorship practices.
- Attrition of associate and full professors has negatively affected mentoring.
- DDs are equally concerned about mentorship of senior members of their division.

## Conclusions

- An inflexible standardized approach to mentorship in every division is unlikely to be successful. However, setting expectations for the identification of a mentor, accountable milestone achievement and mechanisms for mentor transitions are appropriate goals.
- Mid to late career faculty have unique mentoring needs that DDs are looking for help to advise.
- Developing a metric to recognize mentorship in the new compensation plan should be considered.
- Inter-department and inter-division activities that allow junior and senior faculty to meet may create new mentorship opportunities for all faculty.

Presented at the 2019 ELAM® Leaders Forum