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HOW TO BE A SUCCESSFUL MENTEE: HABITS OF HIGHLY-EFFECTIVE MENTEES

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- Introductory Remarks (15 minutes)
- Large Group Case Discussion (30 minutes)
- Mentor/Mentee Panel (30 minutes)
- Large Group Reflection and Summary (10-15 minutes)



Who am I?



• Pediatric hospitalist (2010-current)

• Mentee: Mentored Career Development Grant (KL2; 2014-2016)

• Primary mentor for several fellows and junior faculty



Who am I?



• Pediatric emergency medicine physician (2010-current)

• Mentee: American Heart Association, Stemmler Fund,

 Primary mentor for fellows, junior faculty, HRSA PECARN HEDA Principal Investigator



Be Prepared

- Clarify what you need (pre-work)
 - Coach vs sponsor vs connector
 - Professional vs personal
 - Research vs clinical vs leadership
- Have a written agenda for every meeting



Sample agenda

- Dashboard review (10 mins, see attached)
- K23 regrouping (40 mins):
 - Follow-up from PHM discussion (5 mins)
 - Review new specific aims page (20 mins)
 - Discussion re: postponing to get additional preliminary data, allow for better external review (15 mins)
- Other stuff (5 mins)



Be proactive

• Choose your mentors wisely

• Don't expect your mentor to reach out to you

• Advocate for yourself and your needs



Deliver on promises & set reasonable expectations

- Do what you say you are going to do
- Don't make your mentor do all the work
- Give your mentors time to provide feedback on products





- Take recommendations seriously
- If not following advice, explain why
- If feedback extensive or unexpected, meet in person to discuss
- If getting conflicting advice from mentors, bring everyone together



Give credit when due

• Offer authorship, if criteria met

• Share successes: your success is your mentor's success — Tip: Include mentor's supervisor on emails sharing successes

• Nominate stellar mentors for awards



Reassess the relationship frequently

• Current needs \neq future needs

• Use goals defined at outset as basis for re-evaluation

• Accept mentors' limitations

• Move on from ineffective mentors







Mentee Missteps Tales From the Academic Trenches

Table. Diagnosis and Treatment of Mentee Missteps

Phenotype	Description	Diagnostic Signs	Potential Solutions	
			Mentee	Mentor
Conflict Averse				
The Overcommitter	Lacks the ability to say no. Ends up overcommitted and underproducing.	Résumé is filled with a host of committees, volunteer roles, etc, yet few have resulted in academic products such as publications.	Learn to use your mentor or allocated effort as a reason for saying no. Before saying yes to a project, determine which project is now getting a no.	Add new items to this mentee's list only after old ones are completed. Have mentee identify his or her career goals, then stick to projects that align.
The Ghost	Appears extremely enthusiastic and energetic, but then disappears without a trace and without notice—especially when problems arise.	Mentee may agree to assignments but fail to follow up. When questions regarding project deadlines arise, the mentee avoids discussion.	When uninterested, suggest an alternative person who may be interested. Address issues early. To reduce anxiety, be prepared with a planned solution.	Mentees should gauge their true interest in new projects and be allowed to decline. Set goals to address problems forthrightly, and praise mentees for their candor when issues raised.
The Doormat	Mentee is on the receiving end of a manipulative mentor. The mentee's energy is used for things that do not further their career, or for which they do not receive credit.	Mentee spends time on work unrelated to their own career. Review of mentee's progress shows few first-authored papers in mentee's field of interest.	Ask directly how new projects align with goals. Trial of setting goals and boundaries. Seek new mentors. Establish a mentoring committee.	Before assigning a project to a mentee, evaluate if it is in their best interest. Allow mentees to use you as an excuse not to participate in another's projects.
Confidence Lacking				
The Vampire	Mentee requires constant attention and supervision, leaving mentors drained and empty.	Mentee requests approval or clarification for every step of a project, regardless of prior or similar discussions. Lacks conviction; pivots to mirror mentor.	Recognize and embrace feelings of insecurity; talk with other junior faculty likely struggling with similar decisions. Before taking questions to a mentor, vet a solution with a colleague.	Set clear goals and boundaries, including what questions require approval and what do not. Have mentees "put their nickel down" when asking for help.
The Lone Wolf	Assertive, self-motivated, and determined; prefers working alone; believes mentorship is a luxury, not a necessity.	Does not trust others or is afraid to ask for help. Does not work well as part of a team.	Realize that asking for help is critical for learning, not a sign of weakness. Appreciate that working with a team is a key skill for success.	Be specific in things that can be done with and without mentor consultation. Define the mentee's role, as well as the role of other team members.
The Backstabber	This mentee rarely fails, but when this does occur, makes excuses or assigns blame to others rather than to personal missteps.	People who work with this mentee once often don't want to do so again. Has difficulty accepting responsibility for any mistake; avoids negative feedback.	Reframe mistakes as a learning opportunity. Make giving credit and accepting responsibility a dally goal.	Emphasize that honesty, not perfection, is critical in a mentee. If mentee cannot accept this responsibility, seek a new mentee.





Mentorship Malpractice

Table. Diagnosing and Treating Mentorship Malpractice

	Phenotype	Underlying Pathology	Diagnostic Symptoms and Signs	Complicit Mentee Acts	Potential Countermeasures
Active Mentorship Malpractice	The Hijacker	Self-preserving behavior related to string of failures.	Academic and intellectual insecurity, financial challenges, limited creativity, fear of being overtaken by others.	Sacrifice first-author positions; name mentor as principal investigator on projects.	Quick and complete exit. There is no way to protect yourself in this relationship.
	The Exploiter	Self-serving philosophy with tendency to self-worship; promotes personal interests over mentees.	Assignment of tasks such as supervising staff, managing projects unrelated to mentee. Believes mentee should be privileged to work with them.	Willing to accept nonacademic chores that support mentor rather than self.	Trial of firm boundary setting and use of additional mentors to evaluate requests. If or when mistrust ensues, exit the relationship.
	The Possessor	Anxious personality with powerful feelings of inadequacy, fears loss of mentee to others.	Specific instructions to not engage with other mentors or collaborators; constant supervision of mentee activities.	Foster isolation by following mentor demands; misinterpret undivided attention.	Insist on a mentorship committee; confront mentor with concerns regarding siloed approach.
Passive Mentorship Malpractice	The Bottleneck	Internal preoccupation coupled with limited bandwidth or interest to support mentee growth.	Often busy with own tasks or projects; limited time to meet face-to-face; inadequate response to requests for help; delays in feedback.	Allow the mentor to set timelines; facilitate behavior by silence or lack of insistence on clarity/detail.	Set firm deadlines and be clear about what happens on those deadlines; follow through with action and articulate frustration with mentor inability to prioritize.
	The Country Clubber	Conflict-avoidant personality, needs to be liked by colleagues; values social order more than mentee growth.	Avoids advocating for mentee resources such as staff, protected time; discourages mentee from similar debates.	Fail to ask mentor to advocate for mentee.	Develop a mentorship team so other mentors may engage in conflict on your behalf. Approach conflict/debate with focus on impact if not addressed.
	The World Traveler	Academic success fueling personal ambitions, travel requirements, desire for fame/appreciation.	Internationally renowned, highly sought-after for speaking engagements. Limited face-to-face time due to physical unavailability.	Accept lack of mentor availability; fail to connect with mentor via alternative methods of communication.	Establish a regular cadence of communication. Reserve time well in advance for in-person meetings. Use alternative methods for communication.





• Your primary mentor (who is your division head) suggests you participate in a new medical staff committee because he is too busy to represent the division. You are concerned that it will take away from your primary goal of getting a career development award in the next year



Questions

- What are some red flags?
- Mentor phenotype?
- How might you proceed?
- What are some strategies to use with your mentor to decide whether to accept?





• You recently finished a draft manuscript that is a crucial part of your upcoming K23 grant submission. You emailed the draft to your mentorship team two weeks about but your primary mentor hasn't responded. He also canceled all meetings for the next month, as he will be at sequential international conferences.





• Red flags?

• Mentor phenotype?

• Likely outcome without any intervention?

• Strategies to use to get a response?





• After emailing a completed draft of your upcoming conference talk to your mentoring team/co-authors, you receive very disparate feedback from them. In your weekly meeting with your primary mentor, she gets upset and asks why you dismiss her feedback and askes you to only work directly with her on future drafts.





• Red flags?

• Mentor phenotype?

• Likely outcome without any intervention?

• Strategies to overcome this?



Look beyond traditional mentorship

- Mentors at other institutions
 - Local vs distance
- E-mentorship
- Near-Peer mentorship
- Mentorship outside of academic healthcare



Build a mentorship team

• One mentor cannot serve all needs (see prework)

• Provides a check to primary mentor