



Mentoring: Guidance and advice

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Summary

SCoR are issuing this guidance and advice in order to make a clear statement in support of mentoring as a valuable tool which has many advantages, not least of which is as a way by which members can enhance their careers.

SCoR expect their members to act as mentors and mentees as part of their general professional role and in order to realise the enormous benefits that successful mentoring can offer service delivery, the patient and the health care professional.

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Introduction

SCoR are issuing this guidance and advice in order to make a clear statement in support of mentoring as a valuable tool which has many advantages, not least of which is as a way by which members can enhance their careers⁽¹⁾. SCoR expect their members to act as mentors and mentees as part of their general professional role and in order to realise the enormous benefits that successful mentoring can offer service delivery, the patient and the health care professional.

Throughout a career in imaging or radiotherapy an individual goes through different levels of advancement and may be a mentor and mentee several times over.

Members of the radiography workforces will recognise the value of mentorship. At the end of a career in imaging or radiotherapy most of the staff are able to look back and identify several mentors who have made a significant contribution and impact upon their career. This guidance and advice document has been written to raise awareness of the huge potential benefits and acknowledge mentorship in the workplace.

A scoping exercise on mentoring in imaging departments carried out in 2008 by Georgina Lucas, a mentor and preceptor, concluded that both mentors and mentees were overwhelmingly positive about the benefits of mentorship within imaging departments, however, lack of time, appropriate training for mentors, lack of clarity about roles for both mentor and mentee and failure to induct mentees into the mentorship process were all highlighted as barriers to successful mentoring within the clinical department.

What do we mean by mentoring?

Mentoring is a dynamic process which needs to be able to change, and enable change, throughout the different career stages; mentorship and mentoring mean something slightly different to each individual dependent upon their particular circumstances. There are many different definitions but there are however common themes that run consistently throughout; the idea of someone who is there to help, support and guide another into a place of greater knowledge, understanding and usefulness and that of a working relationship which extends mutual trust and respect.

Some useful definitions to demonstrate the key features of successful mentorship and provide a broader understanding are given as follows:

- A process to help people to help themselves, to find their own solutions to indeterminate problems leading to a change in perspective and understanding which enables them to move on(1)
- The process whereby an experienced, highly regarded, empathic person (the mentor) guides another individual (the mentee) in the development and re-examination of their own ideas, learning, personal and professional development. The mentor who often, but not necessarily, works in the same organisation or field as the mentee, achieves this by listening and talking in confidence to the mentee(1)
- Off-line help by one person to another in making significant transitions in knowledge, work or thinking(2).
- A mentor is that person who achieves a one to one developmental relationship with a learner; and one whom the learner identifies as having enabled personal growth to take place(3).
- Mentorship; support offered by an experienced professional nurturing and guiding the novice(4).
- A continuously available and essentially private process of guidance and support, often with relevance to the broader aspects of the individual's role(5).
- Mentoring involves a relationship in which the mentor, usually a more experienced individual works closely with the protégé for purposes of teaching, guiding, supporting and facilitating the professional growth and development of a colleague(6).

From the above definitions, a mentor is an individual with experience who can help develop the career of a mentee. It is possible to identify both career related and psychological/psychosocial functions. Both functions provide explicit lessons related to professional development as well as general work-life balance:

1. **The career related function** establishes the mentor as a coach who provides advice to enhance the mentee's professional performance and development.
2. **The psychological and psychosocial function** establishes the mentor as a role model and support system for the mentee.

What mentoring is not

Mentoring is not the same as teaching. From earlier definitions it can be seen that mentoring should be a positive, facilitative and developmental activity which is not related to, nor forms part of, organisational systems of assessment or monitoring of performance(1).

Mentorship is different from other tools of human resource management such as supervision, appraisal and assessment and the role of a mentor is different from that of a supervisor, appraiser and assessor.

- **Supervision** is about overseeing activities or people and is defined as watching over an activity or task being carried out by somebody and ensuring that it is performed correctly. In the clinical context it is an exchange between practising professionals to enable the development of professional knowledge and skills and it describes a structured process of professional support and learning(4). There will clearly often be some overlap between supervision and mentorship.
- **Appraisal** involves making a judgement on the quality of a practitioner's work. Often, it is part of a structured performance review which is a regular assessment of an individual's work performance usually undertaken by their line manager.
- **Assessment** of an individual may be part of the process of professional development and is a method of evaluating performance and attainment of the learner. An assessment may be carried out by a supervisor. It is considered good practice to keep the processes of assessment and mentoring separate.

Where conflict develops between the functions of mentoring, supervision, appraisal and assessment, this conflict needs to be managed.

Types of mentoring

Broadly there are two types of mentoring relationship described in the UK literature:

1. Where there is a hierarchy of experience between mentor and mentee and the benefit is seen largely as flowing in one direction: *'a process in which a more skilled or experienced person (mentor) serves as a role model and supports, guides, advises, teaches, encourages, counsels and befriends a less skilled or experienced person, or a person who is in need of help for the purpose of promoting their professional and/or personal development'*(7).
2. Where there is not necessarily a hierarchy of experience between mentor and mentee and in which roles may be reversed during the same meeting (called co-mentoring): *'a dialogue between two autonomous practitioners on a voluntary basis'*(8).

In addition, hierarchical mentoring can be divided into informal and formal approaches.

Informal mentoring

Informal mentoring happens spontaneously without being initiated, managed or recognised by an organisation. This relationship is most likely to be sought by a mentee who is seeking help in relation

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to a specific task or for professional development advice. This latter example frequently involves the mentee seeking out a role model. Within codes of conducts for health care professionals there is an expectation that the workforce has responsibility to mentor others.

Within imaging and radiotherapy departments there are numerous examples of mentoring for professional development and such relationships frequently cross the professional barriers.

Formal mentoring

Formal mentoring occurs within organisational parameters and six primary characteristics of formal mentoring have been identified⁽⁷⁾:

1. programme objectives.
2. selection of participants.
3. matching of mentors and mentees.
4. training for mentors and mentees
5. guidelines for frequency of meetings.
6. a goal setting process.

Evaluation and agreeing boundaries may be added as further characteristics of formal mentoring.

Formal mentoring generally works better when the mentors are volunteers who genuinely want to assist mentees⁽¹¹⁾ and where there is no conflict of interest.

Formal mentoring schemes should complement informal support and not seek to replace it; however, they have a greater ability to ensure that those who are required to participate as mentors in a mentoring relationship will have the opportunity to do so⁽¹⁾.

Remote or distance mentoring

Mentoring of this type refers to the actual method of mentoring that is agreed between the mentor and mentee in some specific settings. Provided the mentoring relationship fulfils the requirements of mentoring as outlined then it is possible to provide and receive effective mentorship even when both individuals are physically distant from each other. An initial or face to face meeting is very helpful in establishing the mentoring relationship however the use of videoconference technology can greatly compensate when geographical distance makes face to face contact non or less viable.

A regular and agreed structure of telephone, internet and /or video conference contact may provide an opportunity for some individuals to participate in and benefit from mentorship who may have been previously unable to do so .This is most obvious in the case of those practising within remote or rural areas where there will tend to be a smaller team of individuals available locally to provide mentorship and costs and time involved in travelling to physically meet with a mentor or mentee elsewhere may be very high. Practitioners within remote and rural areas are often required to practise across a broad range of professional disciplines and may particularly benefit from more than one mentor or different mentors at different times to meet a range of needs.

Effective mentorship can be a very valuable component of remote and rural practice and particularly helpful in decreasing potential feelings of professional isolation relating to geographical distance. There are already examples of informal mentoring occurring between individual in remote and rural practice and those in more urban or central locations working well. However the establishment of a system of formal mentoring between those practising in remote and rural areas and those in more central locations would help to embed this within the professional culture as an expectation rather than exception within both types of service.

Mentoring roles

Successful mentoring is more likely to be achieved when time is taken to find out just what the mentee and mentor are looking for in the mentoring roles and process, and when important matching criteria, such as professional interests, personality and values, are taken into consideration. Local analysis of the support that mentees require should always precede attempts to implement formal arrangements for mentoring(1). With this in mind, targeting specific groups, such as newly appointed Consultants, can assist schemes to get off the ground(1).

If all newly appointed Consultants are offered a mentor, there can be no inference or stigma that seeking a mentor means professional weakness1. Instead, it is seen as an organisational approach for managing transition points in professional careers and as a means of helping already very successful people achieve even more1. Management could incorporate a 'taster event' into new Consultant programmes to alleviate some of the mentees' concerns around trust and the choice of mentor(1).

At higher levels of practice and management it may be appropriate to seek a mentor who is remote from the mentee because advice needs to be honestly given in an environment of trust and therefore cannot be a colleague who may be viewed as a competitor. At some point it may be more important that the mentor is someone in the same role not necessarily the same profession.

A mentee may benefit from more than one mentor throughout their career, as each successive mentor has their own expertise, experiences and strengths that the mentee can draw upon.

Within imaging and radiotherapy departments formal mentoring is used frequently as part of both undergraduate and post-graduate programmes and there are numerous examples of mentoring new members of staff.

The role of the mentor is a complex one with many functions(11), such as:

- Adviser
- Bridge
- Champion
- Coach
- Communicator
- Confidant
- Co-ordinator
- Counsellor; personal and career
- Facilitator; professional and social
- Guide
- Protector
- Role model.

If the mentoring relationship is to be successful the mentor needs to develop a working relationship with the mentee as well as providing ongoing and constructive support and feedback. Managing the expectations of the mentee is a crucial part of the relationship. A mentor needs to be clear and upfront about what the mentee can expect from the mentoring relationship, they need to set appropriate boundaries, guide the process and create an environment in which the relationship can thrive and mature.

Respect is a foundation stone of the mentoring process. This is a two way process involving both respect for and from mentor and mentee. Importantly, a mentor should provide perspective and encourage reflection on critical incidents and inspire the mentee to find balance.

Paradoxically, although it is the informality of these relationships that organisations value, mentoring schemes nonetheless require some ground rules to function effectively(2); Annex A therefore provides a checklist for both mentors and mentees.

Pitfalls and problems

At this point it is therefore important to acknowledge that not everyone has the necessary skills to be a mentor, and the best mentor may not be the best teacher.

A mentor should avoid oppressive control and a mentee over dependence on the mentor.

Areas where there is fear of failure need to be addressed by the mentor and mentee and if a point of conflict or confusion arises between mentor and mentee, both parties should be willing to resolve the issue.

The mentoring relationship needs to be kept professional. Should it develop into a personal one, this should be declared and the professional mentoring relationship should cease. Some mentoring relationships survive for a long time and the boundaries between mentoring and friendship may need to be revisited.

The mentor and mentee need to recognise that, whilst the mentoring process may be ongoing and long term, it may be appropriate to change mentors over time. Also, there are circumstances where an individual may have more than one mentor at a time if different aspects of the role are being developed simultaneously.

Benefits of mentoring

A primary benefit for mentees is to have dedicated time for reflection during which someone listens 'actively', challenges their thinking and does not problem solve on their behalf. It is acknowledged that finding time may be difficult but mentees, mentors and their managers are encouraged to facilitate finding time for this valuable activity, This builds confidence to make decisions, whilst feeling comfortable in doing so⁽¹⁾, and leads to improved problem-solving as the mentee develops an understanding of the underlying issues and new ways to approach and manage problems⁽¹⁾.

The long-term benefit is that successful mentoring may lead to enhanced, career-long confidence in responding to difficulties in a helpful way, earlier problem solving and improved working relationships between colleagues⁽¹⁾.

There are obvious advantages for the mentee such as having a colleague who is there to provide help, support and guidance either formally or informally in a career related or psychological function.

Given the extensive list of responsibilities involved in being a mentor it seems reasonable to ask whether there are any advantages to being a mentor. Undoubtedly there is the satisfaction of knowing that individuals have been helped but also there are advantages in terms of enhanced knowledge, skills and experience. Mentorship is a two way process and mentors find that they too learn through being required to answer questions. Many mentors go on to take more formal management and/or teaching roles in their own careers. Being a mentor is also a continuing professional development (CPD) activity and should be recorded as such whilst taking care over the issues of confidentiality.

Conclusion and Recommendations

The Society and College of Radiographers (SCoR) considers mentoring to be one of the most valuable activities within the clinical, research and educational environments.

By raising awareness of the potential benefits of mentoring, it is hoped that the perception of mentoring being only for those with problems will be negated. Mentoring should be promoted as a positive tool to enhance quality and an active method to enhance ones' career(2).

In order to promote and progress mentoring the SCoR makes the following recommendations:

1. Management should take opportunities to promote mentoring within imaging and radiotherapy departments;
2. Appropriate training should be made available for both mentor and mentee.
3. There should be a well publicised contact point for information about mentor availability(1);
4. Mentoring should be made available for all, especially at pivotal progress points in the career of the mentee
5. Opportunities for mentors and mentees to develop mentorship skills should be included in arrangements for CPD and resources allocated accordingly(1);
6. Entering into a mentoring relationship should be entirely voluntary where practical.
7. Formal mentoring guidelines should include how participants select and deselect each other(1);
8. Boundaries of confidentiality must be agreed so that the mentoring process can take place in a 'risk free' environment(1);
9. There should be no barriers to cross-professional mentoring and systems to coordinate cross-professional mentoring should be developed;
10. Managers and leaders should foster an atmosphere of mutual respect between different professional groups within the workforce

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Annex A: Checklist for Mentors and Mentees

MENTORS SHOULD:

- Actively listen and challenge without intervening with “good advice”
- Meet regularly to reflect on their role and provide mutual support
- Share experience in confidence with mentor peers
- Refresh their skills
- Provide mentorship only in their area of expertise
- Suggest other mentors as resources outside their expertise or when the mentoring relationship is not working
- Show openness to being a mentor
- Be accessible to the mentee.
- Maintain clear, distinct boundaries with the mentee.
- Set clear expectations.
- Treat the mentee professionally and ethically
- Be thoughtful and sensitive about the mentee’s feelings
- Model professional behaviour.
- Not micromanage the mentee.
- Provide advice and counsel

MENTEES SHOULD:

- Ensure that meetings are sufficiently frequent to be of value
- Set specific goals and expectations and be precise about what they want from the relationship
- Not expect the mentor to make decisions for them
- Learn to resolve problems and issues independently of the mentor
- Maintain clear, distinct boundaries with the mentor
- Be proactive. It is the mentee’s responsibility to maintain contact with the mentor and arrange future meetings
- Not take advantage of the mentor.
- Respect the mentor’s time and help
- Treat the mentor professionally and ethically
- Be thoughtful and sensitive about the mentor’s feelings
- Not take rejection of a mentoring request personally.

Checklist adapted from information given by American Psychological Association

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