Case 1

You are recruited as a clinician educator in the division of geriatrics. You have done your training in this university but you need to find a mentor who will help you navigate your early academic endeavours.

How should you identify a mentor? How should you prepare for your meetings with a mentor? What should you discuss at your initial meeting with a potential mentor?
Potential Issues to Address:

1. what are the potential mentor’s expectations for the relationship (objectives, time devoted to it, how you’d meet, what opportunities they’ll provide, etc.) and how well do they match yours?

2. will they work with you to design your individual development plan and contract with you to set goals and monitor progress?

3. what is their approach to intellectual property (authorship and investigatorship) around any research projects/manuscripts/patents that might develop? How can you broach these subjects with your prospective mentor?

4. Is the mentor agreeable to discussing all aspects of your career, including administration, clinical, educational, research and work/life balance issues? If not, do they have suggestions on potential additional members for a mentorship team who could address the gaps?

5. Given that the vice chair is providing resources to you, how do you ensure that you have the freedom to use these resources as you believe is appropriate to advance your research?

6. Can you speak to this person’s other/previous mentees?

7. How is the ‘chemistry’ between the 2 of you? – is there potential for meaningful interaction?
Case 2.

You are a senior clinical researcher in the Department of Medicine with an interest in models of care to reduce delirium on inpatient surgical patients. A former resident, Dr. Smith, had worked with you on the inpatient service, was both an excellent clinician and a very collegial person. It was this interaction that piqued Dr. Smith’s interest in completing training in clinical research methodology. You were happy to grant his request that you become his mentor in the MSc program in clinical epidemiology, although you didn’t formalize any specific plans for how this would be carried out. At his initial thesis meeting, you discussed his proposed research into quality indicators in hospitalized older patients with fractured hips. And, as part of the thesis process, Dr. Smith subsequently wrote a summary of the proposal and sent it to you to review. Because you concluded that his proposal not only lacked focus, but was too ambitious for a Masters thesis, you provided detailed feedback and urged him to refine his research question and come back with a more workable thesis plan. However, when you met again 1 month later, there was no evidence that he’d made any progress with the project, and he appeared overwhelmed by his clinical and course requirements.

**What should you do?**
Potential Issues to Address:

1. At the start, determine if there are any emotional health issues that are affecting the mentee and arrange care as necessary. But if it’s a matter of a healthy person feeling overwhelmed because of competing demands on his over-committed time, focus on time management and organization.
2. Did you establish a detailed mentorship contract at the outset? The pros and cons of doing that at this point in time?
3. Can you establish regular meetings and set achievable goals for each of them?
4. Are there resources (that you could arrange) that would help your mentee meet his (and your) goals?

What steps may have been taken at the beginning of the research mentorship relationship to attempt to avoid this?

Potential Issues to Address:

1. Establishing and agreeing on expectations for mentor and mentee
2. Establishing an individual development plan/contract
3. Scheduling regular meetings with goals
Case 3.

It has been 1 year since you began your position as an assistant professor at a medium sized department of medicine. When you were hired, the Chair of Medicine suggested that the Vice Chair be your career and research mentor because he had similar research interests to you. The Vice Chair committed $30000 to you as part of your start up package to facilitate your research program.

You initially met with the Vice Chair and created a development plan for the first year of your staff position including research, clinical and administrative goals. As part of this plan, you set goals of applying for a career award and an operating grant. The Vice Chair agreed to provide advice and feedback on your applications and to be named as a mentor on the career award. You provided an outline of your original idea for your operating grant, and discussed it with him in a subsequent meeting.

Since that meeting, you have been unable to arrange a time to meet with the Vice Chair because he was “too busy with his own research and administrative duties.” You sent a draft of your career award application to him but you didn’t receive any feedback, despite trying to meet on several occasions and sending the grant to him several times via email and snail mail.

One day when you were drafting your operating grant, you received an email from the Vice Chair’s administrative assistant requesting that you send her your CV for inclusion in a different operating grant that was being submitted tomorrow with the Vice Chair as PI. The assistant said the Vice Chair wanted to invite you to be a coinvestigator on the grant. But upon reading his grant proposal, you find that its central idea was the one you had developed on your own and had brought to the Vice Chair for with the objective of making it the focus of your own operating grant application.

What should you do?
Potential issues to address:

1. intellectual property, including grants/publications/patents should be discussed upfront by mentor and mentee
2. could meet with the vice chair alone to express concerns
3. could meet with the chair and vice chair if you don’t feel comfortable meeting with vice chair alone to discuss this issue – especially given the vice chair has provided you some research $$. Or could seek out some senior/emeritus member of the department who “has no dog in this fight.”
4. follow-up with written document summarizing the issues discussed – this could be done after each mentor/mentee meeting so that expectations/goals are clear for both the mentor and mentee
5. find another mentor!
Case 4.

Following review of your annual activity report, you mention to your Department Chair/Dean that you and some of your colleagues have been discussing the lack of a formal mentorship initiative in your department. Your Chair/Dean says that she agrees and asks you to lead a working group to establish a mentorship initiative for the department. Currently there is no formal mentorship strategy in place. Your department includes 500 members including researchers, clinicians, educators and administrators.

How would you get started? How would you evaluate the impact of such a program?
Case 5

You are a mid-career clinician teacher and have been feeling ‘stale’ lately. You still enjoy your time on the inpatient clinical service with the trainees but you don’t find it as stimulating as you used to. On the clinical service, you haunt the wards day and night, tirelessly caring for your patients, always available for family conferences, and constantly teaching your house staff and students how to gain expertise in both clinical procedures and critical appraisals (and rescuing and rehabilitating them when their performance falters). Your division perceives you as the ‘go to’ person to get things done, whether providing assistance on research projects, filling in on teaching rounds or leading new administrative initiatives.

What should you do?