

PMCV JMO FORUM & AMA VICTORIA DIT SUBDIVISION

GUIDELINES ON INTERNSHIP MENTORING PROGRAMS

Many Victorian hospitals have highly-regarded mentoring programs for interns. These programs, in line with mentoring models, involve interns as a protégé and more senior doctors with expertise in the knowledge and professionalism of working in a healthcare setting. These guidelines have been developed by consensus of junior doctors within the Postgraduate Medical Council of Victoria Junior Medical Officer Forum and the Australian Medical Association of Victoria Doctors in Training Subdivision. They aim to provide suggestions for the further implementation and optimisation of such programs.

Mentoring Programs:

1. Are generally perceived as valuable by interns and should be well publicised to both junior and senior staff to encourage active participation and engagement.
2. Should encompass different facets of professional development including emotional support and guidance rather than just specific career advice; mentoring programs should be promoted this way.
3. Should be flexible and adaptable; each intern and mentor should discuss and agree upon the aims of their mentoring relationship.
4. Should not discourage or exclude interns from seeking other mentoring partnerships including those that may be more career-specific.
5. Should be confidential for both interns and mentors.

Mentors:

1. Should be available and accessible to interns.
2. Should be clinicians to maximise ability to relate to and understand the experiences of interns.
3. Should have suitable experience to provide insight and advice into issues interns may face. They should therefore preferably be consultants at the same hospital as interns; registrars or local general practitioners may also be appropriate mentors.
4. Can mentor more than one intern provided availability and accessibility to each intern is not affected; and should not feel pressured to have more than one intern.
5. Should arrange at least one face-to-face meeting with their intern(s) in the first three months of commencing internship.
6. Should be encouraged to maintain contact with their intern via phone, email or social media if face-to-face meetings prove difficult to organise.
7. Should not be matched to the specific area of an intern's career interest to avoid future conflicts of interest; however it is desirable to match like-minded mentors and interns, which may involve them sharing broad career interests.

8. Should be discouraged from providing references for their intern, which they should discuss with their intern prior to entering the relationship. This suggestion may be difficult to recognise in rural health services given the smaller number of staff available to be mentors.
9. May be reimbursed for their time and/or receive continuing medical education (CME) recognition for participating in mentoring programs and relevant training activities. Financial gain or CME recognition, however, should not be their primary motivation for taking part.

Interns:

1. Should be encouraged to actively participate and engage in a mentoring program to maintain emotional and psychological wellbeing during their internship year.
2. Should arrange at least one face-to-face meeting with their assigned mentor in the first three months of commencing internship.
3. Should be encouraged to maintain contact with their mentor via phone, email or social media if face-to-face meetings prove difficult to organise.
4. Should not feel that their mentoring relationship is limited only to their internship year; depending on the relationship formed, there may be the possibility of it extending informally beyond this year.
5. Should be discouraged from using their mentors as referees for job applications.

Program Organisers:

1. Should ensure interns have the opportunity to meet face-to-face with their allocated mentor at least once in the first three months of commencing internship.
2. Should contact interns and mentors throughout the year to encourage regular communication.
3. Should ensure mentors receive appropriate training on mentoring that may include face to face sessions, printed and/or online materials; and should provide mentors with relevant resources and contacts in case interns experience emotional and workplace difficulties.
4. Should organise shared mentor and intern social events as they are perceived to be of great benefit in strengthening relationships between mentors and interns.
5. Should conduct ongoing evaluation about the effectiveness of mentoring programs in an anonymous and confidential manner.

Date Endorsed: 22 October 2010

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