Policy on Mentoring of Trainees in the FRANZCOG Training Program

This statement has been developed and reviewed by the Training Accreditation Committee and the RANZCOG Board.

Disclaimer This information is intended to provide general advice to practitioners. This information should not be relied on as a substitute for proper assessment with respect to the particular circumstances of each case and the needs of any patient. This document reflects emerging clinical and scientific advances as of the date issued and is subject to change. The document has been prepared having regard to general circumstances.

First endorsed by RANZCOG: November 2013
Current: May 2015
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Objectives: Ensure appropriate processes are in place for the mentoring of trainees

Outcomes: To ensure appropriate processes are in place for the mentoring of FRANZCOG trainees

Target audience: FRANZCOG trainees, Training Supervisors, ITP Coordinators and Regional Training Accreditation Committee Chairs

Background: This policy was first developed by the RANZCOG Training Accreditation Committee in November 2013 and reviewed in May 2015 by the RANZCOG Board.

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1. **Purpose of this Policy**

This policy relates to the mentoring of trainees in the FRANZCOG Training Program who may request assistance from the College in finding an appropriate mentor, or for those trainees who may be experiencing difficulty in their training/personal situations and would, in the opinion of their Training Supervisor and regional Training Accreditation Committee Chair (in consultation with the trainee,) benefit from having a mentor for a specified period.

The purpose of this policy is to ensure appropriate processes are in place for the mentoring of trainees in the above categories, in accordance with the College’s commitment to providing trainees with appropriate support in the workplace throughout their training. The workplace includes training sites in public and private hospitals, and private practice settings.

NOTE: It is not the purpose of this policy to formally allocate a mentor to every trainee in the FRANZCOG Training Program, but to facilitate the provision of a mentor where required or requested.

2. **Definitions**

2.1 **What is Mentoring?**

For the purposes of this policy, mentoring is defined as a formal professional and confidential relationship in which, by mutual consent, an experienced person in the discipline of Obstetrics and Gynaecology and with appropriate empathetic skills (the mentor) assists and supports another person (the mentee) in developing specific skills and knowledge that will enhance the mentee’s professional and/or personal growth.

The mentoring role is entirely separate from the formal supervisory/assessment role of the Training Supervisor and in no way replaces that role. The trainee remains under the supervision/assessment of a Training Supervisor throughout the period they are being mentored.

2.2 **Who can be a Mentor?**

For the mentoring of trainees in the FRANZCOG Training Program, a mentor may be:

- A Fellow of the RANZCOG with experience of the FRANZCOG Training Program as a Training Supervisor, as a Co-ordinator of an Integrated Training Program (ITP) or as a consultant who has worked with trainees but who is not the trainee’s Head of Department or their formal Training Supervisor (i.e. is not involved in conducting their formal appraisal/assessment). The Fellow may or may not be located at the trainee’s workplace.

- A senior registrar in the FRANZCOG Training Program or other trainee who is more experienced in the discipline than the mentee (i.e. is at a higher year level) and who may or may not be located at the trainee’s workplace.

- In most instances, the mentor will be known to the trainee and specifically requested by them. In those instances where the trainee has been advised that a mentor would be appropriate, the mentor may not be known to the trainee but could still be appointed their mentor subject to the agreement of the trainee.

2.3 **When should a Mentor be Appointed?**

A mentor may be appointed if any of the following circumstances apply:

- A trainee (at any year level) believes that their training would benefit from the guidance, advice and support of a mentor, usually for a defined period (e.g. a specific 6-month or 12-month block of training) or as an ongoing arrangement (if agreeable to trainee and mentor), and the trainee makes
such a request to the College (see Item 4 below). This perceived benefit may relate to any of the following areas:

- clinical training;
- assessment;
- supervision;
- interaction with consultants/fellow trainees/other health professionals/patients;
- examinations;
- career objectives;
- personal difficulties;
- a combination of any of the above; or
- any other area identified by the trainee as requiring the assistance of a mentor.

- A trainee is perceived by their Training Supervisor or Head of Department or regional Training Accreditation Committee Chair to be experiencing difficulties in any of the above areas which would benefit from the guidance, advice and support of a mentor, and the trainee is agreeable to such a mentoring arrangement. (Note: In such instances, the appointment of a mentor must be with the knowledge of the relevant Training Supervisor, Head of Department and regional Training Accreditation Committee Chair.)

- A trainee has restrictions or conditions placed upon their practice or has been stood down by their employing authority, and the trainee is agreeable to such a mentoring arrangement. (Note: In such instances, the appointment of a mentor must be with the knowledge of the relevant Training Supervisor, Head of Department and regional Training Accreditation Committee Chair.)

3. Responsibilities

3.1 Responsibilities of the Mentor

A RANZCOG mentor has the following responsibilities:

- To focus on assisting the trainee to develop professionally and/or personally in the identified areas. As such, the mentor does not evaluate the trainee or conduct formative appraisals/summative assessments.

- To be prepared to invest time and effort in advising/supporting the trainee either through scheduled face-to-face meetings or other communication as agreed with the trainee (e.g. telephone, email, Skype, etc.) and to give the trainee adequate notice if not available for a scheduled meeting.

- To be a good listener and provide encouragement and support.

- To act as a sounding board (with whom the trainee can discuss ideas/concerns), clarify problems and suggest possible alternative approaches.

- To provide appropriate guidance and advice based on their professional/personal knowledge and experiences.

- To create a safe environment in which the trainee feels free to discuss their concerns openly and honestly, without worrying about possible negative consequences for their current or future training positions.
• To treat the trainee with respect and courtesy.

• To be aware of and utilise relevant information resources which would assist the trainee, or suggest resources or persons who may be of further assistance to the trainee.

• To be a role model with respect to collegiality and appropriate professional conduct.

• To treat all discussions with the trainee as confidential, except where the following applies:
  • The trainee has agreed that the mentor may discuss specific issues raised with another party who may be able to provide assistance and advice;
  • The mentor, as a fellow practitioner, has a legal obligation to make a mandatory notification to the Australian Health Practitioner Regulation Agency (AHPRA) or the New Zealand Medical Council (as applicable) if discussions with the trainee reveal that the trainee has behaved in a way that constitutes notifiable conduct in relation to the practice of their profession. Notifiable conduct is defined as: practising while intoxicated by alcohol or drugs; sexual misconduct in the practice of the profession; placing the public at risk of substantial harm because of an impairment (health issue); or placing the public at risk because of a significant departure from accepted professional standards. In such instances, the mentor must advise the trainee that mandatory notification will occur.

3.2 Responsibilities of the Trainee (Mentee)
In their role as mentee, the trainee has the following responsibilities:

• To be open and honest with the mentor about their concerns.

• To accept the guidance and advice offered by the mentor in a courteous and non-defensive manner.

• To treat all discussions with the mentor as confidential.

• To give the mentor adequate notice if unavailable for a scheduled discussion.

4. Appointment of Mentors
The process for the appointment of a mentor is as follows:

• If the trainee wishes to request a mentor and has identified an appropriate person for this role (i.e. as defined in this policy), they should make this request to their Training Supervisor or Head of Department. If the trainee has requested a mentor but is unable to nominate an appropriate person, the Training Supervisor or Head of Department may advise the trainee of possible mentors.

• If the trainee has not requested a mentor but, in the opinion of the Training Supervisor/Head of Department/regional Training Accreditation Committee Chair, a mentor is considered advisable, this proposal must be discussed with the trainee and possible mentors suggested. The trainee must be agreeable to the proposal and to the nominated mentor.

• The Training Supervisor or Head of Department is responsible for liaising with the trainee’s nominated mentor (or the mentor they have suggested) to ascertain if they are willing to act in this capacity. If the person approached is willing to take on this role (and there is no obligation to do so), the trainee should be advised accordingly. The mentor is responsible for making the initial contact with the trainee to arrange a meeting. Subsequent meetings are negotiable between the mentor and trainee.
• IMPORTANT NOTE: The appointment of a mentor does not in any way replace the role of the trainee’s Training Supervisor. Throughout the mentoring period the trainee must continue to be supervised/assessed by their appointed Training Supervisor.

• The College (in the person of the relevant regional Training Accreditation Committee Chair and the Training Services Manager) should be advised by either the Training Supervisor or Head of Department of the establishment of the mentoring relationship and the date when this was agreed to. The Training Services Manager is responsible for ensuring that this information goes into the trainee’s record.

5. **Appointment of Mentors**

The mentoring relationship can be terminated for any of the following reasons:

• The specified period for mentoring (if applicable) has ended and the trainee no longer feels in need of further mentoring.

• Either the trainee or the mentor, or both, believe that the mentoring arrangement is not working. (Mutual consent must at all times be the basis of the mentoring relationship.)

• The mentoring relationship has worked successfully but the trainee and/or mentor believe that the trainee’s changing situation or needs require mentoring from another appropriate person better equipped to assist the trainee.

Whatever the reasons for the termination, the trainee and the mentor must discuss this and advise the Training Supervisor or Head of Department accordingly. The trainee is responsible for notifying the Training Services Manager of the termination, so this can be recorded in the trainee’s file. The Training Services Manager should also ensure that the relevant regional Training Accreditation Committee Chair is advised of the termination.
Appendix

Full Disclaimer
This information is intended to provide general advice to practitioners, and should not be relied on as a substitute for proper assessment with respect to the particular circumstances of each case and the needs of any patient.

This information has been prepared having regard to general circumstances. It is the responsibility of each practitioner to have regard to the particular circumstances of each case. Clinical management should be responsive to the needs of the individual patient and the particular circumstances of each case.

This information has been prepared having regard to the information available at the time of its preparation, and each practitioner should have regard to relevant information, research or material which may have been published or become available subsequently.

Whilst the College endeavours to ensure that information is accurate and current at the time of preparation, it takes no responsibility for matters arising from changed circumstances or information or material that may have become subsequently available.