

RECORD OF DISCUSSION
FROM THE NATIONAL DIABETES CONSULTANTS' MENTORSHIP
PROGRAMME (NDCMP) INAUGURAL ADVISORY BOARD MEETING HELD ON
TUESDAY 10 FEBRUARY 2015 AT THE HILTON (EUSTON)

Attendees

Dr Mike Baxter, Guildford	(MB)
Dr Chris Bayne, London	(CB)
James Carlisle, Eli Lilly	(JC)
Nicki Copeland , Eli Lilly	(NC)
Prof Mike Cummings, Portsmouth	(MC)
Dr Pete Davies, Birmingham	(PD)
Dr Rob Davies, Manchester	(RD)
Dr David Levy, London	(DL)
Dr Paul Newrick, Worcester	(PN)
Dr Ian Scobie, Kent	(PS)
Dr Dev Singh, Wolverhampton	(BS)
Dr Arash Tabhaz, Eli Lilly	(AT)
Keith Whitfield, UPBS	(KW)
Dr Peter Winocour	(PW)

Apologies (received after confirming attendance)

Prof Steve Bain, Swansea
Dr Chris Walton

Purpose

1. The purpose of the inaugural NDCMP Advisory Board was to gather feedback from mentors on their experience of mentorship and to evaluate the effectiveness of the Programme. The following specific outcomes were sought:
 - To establish progress made in establishing the NDCMP as a viable and worthwhile development opportunity for newly appointed consultants in diabetes and endocrinology;
 - To validate the Scheme's proposed outcomes;
 - To evaluate the effectiveness of the pairing process and to make changes where necessary;
 - To determine and evaluate the benefits derived from mentorship for both mentee and mentor; and,
 - To share (and subsequently) publicise good practice amongst mentors.

Item 1 – Opening Remarks

2. Keith Whitfield (UPBS) opened the meeting outlining its purpose, welcoming mentors and colleagues from Eli Lilly to the Advisory Board. James Carlisle (Eli Lilly) thanked mentors for their contribution both as mentors and for taking time to attend the Advisory Board. JC outlined how the Company was committed to developing and maintaining long-term relationships within the diabetes

speciality and how the mentorship programme was an example of this strategy. Dr Arash Tabhaz (Eli Lilly), introduced himself, explaining how the Company had (and was) moving from provision of specific therapies to a providing a range of services. He outlined the work that Lilly has done bringing research back into the UK and reinforced Eli Lilly's long-term commitment to strategic partnerships.

3. Dr Peter Winocour proposed a vote of thanks to Eli Lilly for their support to the NDCMP highlighting the kudos this had brought to ABCD. PW stated that ABCD too say the Programme as a long-term commitment. Dr Dev Singh seconded the proposal and it was unanimously accepted.

Item 2 – Update on Progress

4. BS provided attendees with an update on progress (Enclosure One). It was agreed that the update provided an excellent 'snapshot' of progress to date and generated lively discussion around 2 key themes: Programme capacity and how to measure and evaluate the effectiveness of the Programme (covered under Item 5).
5. Programme Capacity. BS stated that the Steering Committee had identified Programme capacity and, in particular, the recruitment of new mentors as the biggest risk to the NDCMP. There was some discussion about the possible barriers to recruitment of new mentors and the potential loss of existing mentors which reflected an accelerated cohort of retirees from the speciality.
6. There also was some discussion on the size and scale of the problem. There are currently 20 mentors in active mentorship relationships and a further cohort of 11 mentees selecting mentors from a pool of 25 mentors. There was further discussion focusing on the impact of geography where, specifically, some mentors in the South West were not active because they were perceived to be 'out on a limb'. The willingness of existing mentors to take on more than one mentee was discussed in the context of the Programme guidelines which stated that no mentor should be in more than one active relationship.
7. Further consideration and discussion of the capacity issue highlighted that the current pool of mentors, whilst highly credible, was not fully representative of all groups of consultants and that, within any recruitment drive, the Programme could benefit from a more diverse cadre of mentors. There also was discussion around the 5-year minimum experience threshold for appointment as a mentor. Some attendees expressed a concern that 5 years experience may not be enough for an individual to be credible as a mentor. In addition, attendees thought that particular attention needs to be given considering how the Programme markets the role of mentor and which other bodies can support any marketing campaigns. Dr Mike Baxter agreed to assist in the development of a marketing message setting out the benefits of becoming a mentor and articulating the speciality's need for mentors. **[Action: MB]**
8. It was noted that 2 locum consultants had been allowed to access mentorship through the Programme and there was some discussion about whether, where

places were in short supply, this was appropriate. BS explained that both individuals were actively pursuing consultant appointments but that places for locums would be the exception to the rule. This broadened the discussion out and it was agreed the principle that the NDCMP should be open to all newly appointed consultants – it is not a ‘*secret society*’ nor is it one which supports advancement through ‘*who you know*’ – should be maintained as far as practicable. It was felt that a move to selection of mentees for mentorship would weaken the Programme and was unhealthy.

9. There were several suggestions that were considered by the Board and it was agreed that the **NDCMP Steering Committee (SC)** should take the following action:
 - All mentors should be asked to recruit one (or more) new mentor(s) to the NDCMP;
 - Existing mentors should be asked whether they are prepared to take a second mentee (not simultaneously but midway through an existing relationship);
 - Consider how to fund the necessary expenses of mentors and mentees to enable existing qualified mentors in the more remote locations to be paired; and,
 - Engage with ABCD Secretariat and the RCP to promote the Programme and the benefits of mentoring both to the mentee and the mentor.

Item 3 – Review of Processes and Procedures

10. PW stated that, since the NDCMP was still in its infancy (relatively speaking) and that the majority of mentors had completed only one active pairing, the Board should be cautious in proposing significant change. Attendees felt that as they progressed through their second relationship, they would be able to provide more meaningful feedback on the processes and procedures which underpin the Programme. Nonetheless, it soon became apparent that, in addition to the minor changes identified in the earlier discussion on Programme Capacity, there might be a requirement to provide more structured support to mentors; this will be covered under Item 5 – Being a Mentor).
11. The early discussion highlighted some concern that the pairing process was overly bureaucratic. Indeed, a significant number of attendees felt that there had been too long between their orientation and appointment as a mentor. BS explained how the pairing process worked in practice highlighting that, typically, it took approximately 6 weeks following a mentee orientation workshop for a mentee to be paired with a mentor. The length of time between acceptance as a mentor and pairing was acknowledged as an issue in the early days of the Programme when recruitment of newly appointed consultants as prospective mentees was slow. The current demand for places on the Programme suggests that this is no longer a problem but the NDCMP SC will continue to monitor the pairings process.
12. In the debate, a number of attendees suggested that it would be helpful for mentors to meet mentees before any pairing took place. It was suggested that a

'speed-dating' style meeting be considered. One of the challenges associated with a meeting of appointed mentors and prospective mentees is the time commitment and individual availability to attend such an event for it to be worthwhile. KW explained that one of the early aspirations of the Programme had been to encourage mentors and mentees to meet but not necessarily before pairing. While not dismissing the idea, the NDCMP SC would like to consider whether other ways of connecting mentors and mentees, including the use of social media and, in particular, Linked-In, might offer an alternative approach?

13. The other area that was discussed was the rules for retirees and the importance of providing adequate safeguards for those mentors who remain active on the Programme after retirement. There was broad consensus that mentors did not immediately cease to be credible after retirement but that, equally, the importance of current clinical practice could not be forgotten. The NDCMP SC agreed to review the existing guidance and to circulate any proposed revision for comment to attendees.
14. In summary, it was agreed that the **NDCMP SC** would take the following action:
 - To update existing processes and procedures to enable the effective recruitment of new mentors;
 - To monitor and review as necessary the pairing process for consideration at the next Advisory Board;
 - To consider how mentors and mentees might be connected on a regular basis and whether there would be value in some form of 'speed-dating' activity; and,
 - To draw up revised guidelines for recently retired clinicians who wish to remain on the list of mentors.

Item 4 – Evaluation of the NDCMP

15. BS introduced to the Board feedback provided by both mentors and mentees; a copy of the report is at Enclosure 2. He explained that feedback from those mentors and mentees who were paired in the first 2 tranches of pairings has been extremely positive. There was some discussion around the availability of meaningful quantitative data to measure the benefits of mentorship programmes and it was concluded that for the time being the focus should be in extracting high quality qualitative data.
16. There are many interesting themes that emerge from the feedback and, with the data captured thus far (grouped by BS in to primary, secondary, tertiary and global domains), it is now possible to initiate a survey probing the effectiveness of the relationships in each the 16 secondary domains. The responses from this first cohort of mentors and mentees will form the benchmark for future surveys. It is intended that the first cohort will be surveyed again in the future (timing to be determined) while subsequent cohorts will be surveyed using the survey developed.

17. Attendees suggested that to improve the quality of the evaluation, the NDCMP SC should poll mentees to establish where improvements to processes and procedures could be made. As mentors, attendees were very keen for mentees to be asked whether, for example, they [the mentee] got the 'right' mentor for them.
18. Attendees thanked BS for his efforts in collating, analysing and presenting the evaluation undertaken by the NDCMP SC to date. BS promised to circulate proposed papers for publication, requesting that colleagues provide input as more data is captured and refined. **[Action: All attendees]**

Item 5 – Being a Mentor

19. Attendees shared their experience of being a mentor, providing comprehensive feedback on the effectiveness of the mentorship relationships they had been in. A note of caution was offered where the majority have been paired only once. There were a number of interesting observations arising from the feedback, specifically:
 - The overall consensus was that, from the mentors' perspective, the relationships conducted by attendees had been overwhelmingly positive;
 - The way the relationships were conducted varied significantly in terms of frequency and method of contact. Some relationships were solely face-to-face meetings, while others were a single face-to-face meeting at the beginning of the relationship followed by regular phone calls and e-mails and others somewhere in between;
 - Some mentors observed that they preferred to follow a coaching/mentoring model (either the one provided or another from elsewhere) when mentoring, while others adopted a 'laissez-faire' or 'free-flow' approach;
 - The value of 'externality' was perceived to be key to the effectiveness of the relationship;
 - Some mentors were concerned that they had been taken out of their 'comfort zone' during their time as a mentor and questioned whether they had been able to add sufficient value to the relationship;
 - There was broad agreement that the duration of the relationship, set at 1-2 years, was sufficient for the mentee to develop;
 - The issue of local, regional and national politics was the most regular theme; and,
 - There was a requirement to connect mentors to share good practice.
20. Structured Support to Mentors. In terms of support to mentors, it was felt that a forum for sharing good practice was important. The Advisory Board had provided this opportunity, although that was not the Board's primary purpose. KW explained that the original concept had been for calibration meetings, at which mentors could share good practice and receive feedback, to take place twice a year. Unfortunately, it has proved extremely difficult to arrange these. However, the NDCMP SC would consider how support to mentors in the form of calibration (mentoring supervision) might be undertaken both for individual mentors and for the mentor body as a whole.

21. In summary, it was agreed that the **NDCMP SC** would consider:

- How mentors could be better connected, thereby enabling good practice to be shared; and,
- What type of activities should be introduced to support the development and well-being of mentors.

Item 6 – Any Other Business

22. There was no other business.

23. The meeting closed at 1600 hours.

Date of the Next Meeting

24. The next Advisory Board is scheduled to take place on , venue to be confirmed.

K Whitfield
Secretary

12 February 2015

Enclosures:

1. NDCMP Advisory Board Progress Report dated 10 February 2015.
2. Structured Feedback fro mentor Mentee Pairings