Impact of a Speed Mentoring Program in an Academic Radiology Society

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DESCRIPTION OF THE PROBLEM

Mentorship is critical to the success of academic radiologists. Mentors provide advice and guidance with the intention of fostering the growth of their mentees’ careers. In a qualitative study of junior faculty members in academic medicine, nearly all of the faculty cited a lack of mentorship as one of the two most significant impediments to their career advancement [1]. Similarly, the vast majority of surveyed program directors of diagnostic radiology residencies believe that mentorship is important to residents when choosing to pursue an academic career [2]. Mentorship has been reported to positively influence personal development, career choice, academic career development, research productivity, and success in grant funding [3] and to help junior faculty effectively prepare for promotion and develop their unique identity as an academician [1]. Finding a mentor may require patience and persistence because it is important to find the person or people who can provide the guidance that mentee personally requires.

Speed dating is an organized event wherein several pairs of people interact with each other for brief periods of time, with the intention of identifying an interpersonal connection. Building off of the concept of speed dating, Cook et al first described the concept of speed mentoring in the setting of a local academic medicine department [4]. This innovative speed mentoring event paired junior faculty (mentees) with each of six senior faculty (mentors) for a series of 10-min encounters. At the conclusion of the event, mentees perceived that the event was helpful in broadening their network [4]. This concept has subsequently been applied at the national level in the setting of pediatrics and surgical national meetings [5-7] and has more recently been incorporated into the annual meeting of the ACR and the RSNA by the American Association of Women Radiologists [8,9], although the benefits have not been well studied. Incorporating a speed mentorship program at a national meeting has several potential advantages. First, the arrangement allows for several brief interactions between mentor-mentee dyads to determine if they have interpersonal coherence. Second, because this process occurs in a setting where there are many committed potential mentors from around the country, it allows mentees to cast a much broader net than they would otherwise be afforded in their home institution.

WHAT WAS DONE

Because the aim of the Alliance of Clinician Educators in Radiology, a subdivision of the Association of University Radiologists (AUR), is to advance the careers of clinician-educators, we sought to improve access to mentorship for clinician-educators in radiology by offering a speed mentoring event at the 2017 AUR annual meeting. Our intention was that this mentoring event would serve to fill gaps in mentorship at home institutions for mentees and create a greater sense of community and belonging at the AUR meeting by facilitating relationships between meeting attendees and established clinician-educators.

Invitations to participate as mentors included the expectation of the mentors to prepare one or two “pearls” or “words of wisdom” for mentees. Invitations to participate as a mentee included a description of the expectations of the mentees, including preparation of a 2-min elevator pitch and questions for the speed mentor.

Before the event, the mentors and mentees submitted basic information about themselves, including their academic title, rank, and position and institution and areas of expertise or interest or areas in which they were seeking mentorship. Based upon this information, efforts were
made to predict an optimal pairing of mentors and mentees. For instance, associate- or professor-level mentors were paired with assistant-level mentees, and assistant-level mentors were paired with trainee-level mentees. Similarly, an effort was made to match the interests of the mentees with the expertise of the mentors. Finally, matches between mentors and mentees from the same institution were avoided to encourage interactions and relationships that otherwise would not be possible because of geography.

Thirty minutes were allotted to the speed mentoring event itself. The event was scheduled midweek of the AUR annual meeting because this is when meeting attendance tends to be highest. Additionally, it was timed such that it occurred immediately after the final planned session of the day and immediately preceded the Alliance of Clinician Educators in Radiology open business meeting and reception. Therefore, the mentors and mentees would have an opportunity to informally continue their conversations during the cocktail hour.

One week before the AUR meeting, the schedule of mentor-mentee pairings was distributed to each participant. This allowed the mentees an opportunity to research their mentors before the event. Each mentee was scheduled to meet with three separate mentors. At the event, the mentees were asked to deliver their 2-min elevator pitch to their mentor and to ask their questions. The mentors were instructed to deliver their pearls or words of wisdom only if there was a lull in the conversation. Each meeting was allotted 10 min. Several mentors and mentees arrived at the event without preregistration; all attendees were accommodated resulting in some ad hoc mentor-mentee pairings.

OUTCOMES

A total of 40 people participated in the speed mentoring event. One week after the conclusion of the event, an anonymous electronic survey was distributed to all participants via SurveyMonkey (Palo Alto, California). There was a 65% response rate from participants (26 of 40).

Participants overwhelmingly felt that this event built a stronger sense of community and inclusiveness. Feeling connected to others is an innate characteristic of human beings. In the medical setting, fostering peer support and a sense of community helps physicians to be more resilient in challenging situations and encourages physician well-being [10]. In our experience with the speed mentoring event, both the mentors and mentees felt that the event made them feel more connected to AUR and more valued in the organization, both important characteristics of cultivating community. This is similar to what was observed in a speed mentoring program at a national surgical meeting [7].

The reported prevalence of mentorship in academic medical centers is widely variable, ranging between 19% and 84% in 2003 [3]. In all, 30% of our mentees and 45% of mentors reported that they did not have a mentor in their home institution; however, 56% of mentors (including two individuals who reported having a mentor) and 40% of mentees (including one individual with a mentor) reported that they did not feel supported with respect to career development at their home institution. This reported lack of a sense of assistance is an indication that we, in academic radiology, still have to make progress to ensure that our faculty members are adequately mentored at all stages of their careers.

A survey of all junior faculty at a single large academic medicine group revealed that only 36% had a mentor, and even after adjusting for age, years on faculty, and fellowship training, faculty with mentors were more likely to be men and clinician scientists [11]. Although this speed mentoring event was not intended to be focused on women in radiology, 60% of the mentors and 70% of the mentees were women. Because only 21.5% of the practicing radiology workforce in 2017 were women [12], the relatively large number of female participants in our event may be an indication that women are looking for opportunities to expand their radiology network or community. In a similar program administered in the setting of an academic pediatrics society meeting, 88% of the mentees were women and nearly 60% of the mentors were women [6], and 60% of the mentees were women in a speed mentoring program in the setting of an academic general surgery society meeting [7]. As such, these data suggest that women may seek external opportunities for mentorship more often than men, implying that there is an unmet need.

Interpersonal connection is key to a successful mentoring relationship. Straus et al evaluated the characteristics of mentoring relationships among faculty in academic medical institutions; they determined that mutual respect, personal connection, and shared
values are among the key components of a successful relationship and that poor communication and personality differences contributed to failed relationships [13]. Our speed mentoring event created the opportunity for several mentor-mentee dyads to network with each other over the course of 30 min. In this way, each mentee was exposed to several mentors, and the mentee could quickly determine if there was a potential connection. Because the pairs were asked to provide contact information to each other, the mentee had the means to reach out for further, probably remote, mentorship.

We identified several opportunities to improve the design of our speed mentoring program. Promotion of the event is necessary to optimize pre-event registration and thus limit the ad hoc mentor-mentee pairings. The fact that some of the pairing was done randomly without the opportunity to predict which mentors may be most appropriate for the mentee may have contributed to some of the mentees perceiving that the mentor pool was not broad enough. We can strive to increase the pool of mentors to diversify the academic radiology community.

In summary, this speed mentoring program at a national academic radiology society meeting was easy to organize, was overwhelmingly well received, and required few monetary resources. It allowed multiple mentor-mentee pairs from geographically diverse academic radiology institutions to interact over the course of 30 min and set the stage to potentially foster a remote mentorship dyad in the future. Finally, it fostered an increased sense of connection to the greater academic radiology community.

REFERENCES