
**PRE–CONFERENCE WORKSHOP**

# Supporting effective mentorship: Strategies and mentor competencies to foster self-regulation of learning by mentees

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TMEC, Feb 4th, 2024

# HEALTH CARE PROFESSIONS EDUCATION

# HEALTH CARE PROFESSIONS EDUCATION MENTORING

*..'a **conversation [dialogue]** focused on the **enhancement of learning and development** through **increasing self-awareness** and a sense of **personal responsibility**, where the mentor **facilitates the self-regulated learning** of the mentee through questioning, active listening, and appropriate challenge in a supportive and encouraging climate.'*

*Van Nieuwerburgh C, ed. Coaching in Education: Getting Better Results for Students, Educators, and Parents. London: Karnac Books 2012;222.*

# HEALTH CARE PROFESSIONS EDUCATION MENTORING

Support and guidance for the mentees' professional and personal development

Beneficial effects on job satisfaction, career success

Beneficial effects guidance of reflection and self-regulation of learning

Benefits for mentee, mentor and institute/ program


*- Driessen E, Overeem K. Mentoring. In: Walsh K, editor. Oxford textbook of medical education. Edn. Oxford: Oxford University Press; 2013. p. 265–74.*
*- Tan et al. A framework for mentoring of medical students: thematic analysis of mentoring programmes between 2000 and 2015. AHSE 2018*
*- Ramani et al, Mentorship in health professions education – an AMEE guide for mentors and mentees: AMEE Guide No. 167. Med Teach 2024*


Mentoring is a bidirectional relationship between mentors and mentees which focusses on mentees' professional growth.

# M E N T O R ( I N G )
# D E F I N I T I O N S & C O N S I D E R A T I O N S

Different terms and functions:

Mentor, coach, supervisor, role model … ?

Mentor can serve as role models > help shape knowledge, skills, and attitudes of future healthcare professionals.

Mentor can serve as coach > achieving goals and enhancing performance in a particular area

Mentoring is a **bidirectional relationship** between mentors and mentees which focusses on mentees' **professional growth**.

*- Ramani et al, Mentorship in health professions education – an AMEE guide for mentors and mentees: AMEE Guide No. 167. Med Teach 2024*

# M E N T O R ( I N G )
# D I V E R S E  D E S I G N S

Intended outcomes

- Pastoral guidance?
- Coaching?
- Role model?
- Self-regulation of learning?
- ?

Will determine D E S I G N

# MENTORING PROGRAM DESIGN (within possibilities)

Embed and align
- with educational program
  - (meetings and content, feedback loop)
- with assessment (system)
  - (information on performance available for mentor)

Be clear on & Manage expectations on Intended outcomes

Enable:
- appointment mentor coordinator,
- support of organization/ logistics,
- protected time for mentors

Faculty development/ mentor training program (embed, continuous)

Mentoring network, e.g. buddy for new mentors

# CONTEXT MATTERS


CONTEXT
MATTERS

# M E N T O R ( I N G )

## D E S I G N
## C O N T E X T  M A T T E R S

Often teacher/ staff

– or (also) peer / group mentoring?

Duration – Short(er) term, often Longitudinal

Use of Portfolio, how?

– depository? reflection?

– (often) starting point for the dialogue, shared with mentor

Activities in mentoring program > part of assessment program?

– what is assessed, by whom?

# AT EACH TABLE–
Share and discuss

# AT EACH TABLE –
## Share and discuss


- At your setting:
- Mentoring programme
  - Intended outcomes (current or foreseen)
    - Who are the mentors, who are the mentees?
  - Design?
    - Longitudinal?
    - Portfolio? (depository, reflection?)
    - (how) Embedded in education? Assessment?

# MENTORING...

ROLES & CONCEPTUA–LISATIONS

SKILLS

FACULTY DEVELOP–MENT

SELF–REGULATED LEARNING

*Barry J. Zimmerman*

# Becoming a Self-Regulated Learner: An Overview

In an era of constant distractions in the form of portable phones, CD players, computers, and televisions for even young children, it is hardly surprising to discover that many students have not learned to self-regulate their academic studying very well. Consider the case of Tracy, a high school student who is infatuated with MTV.

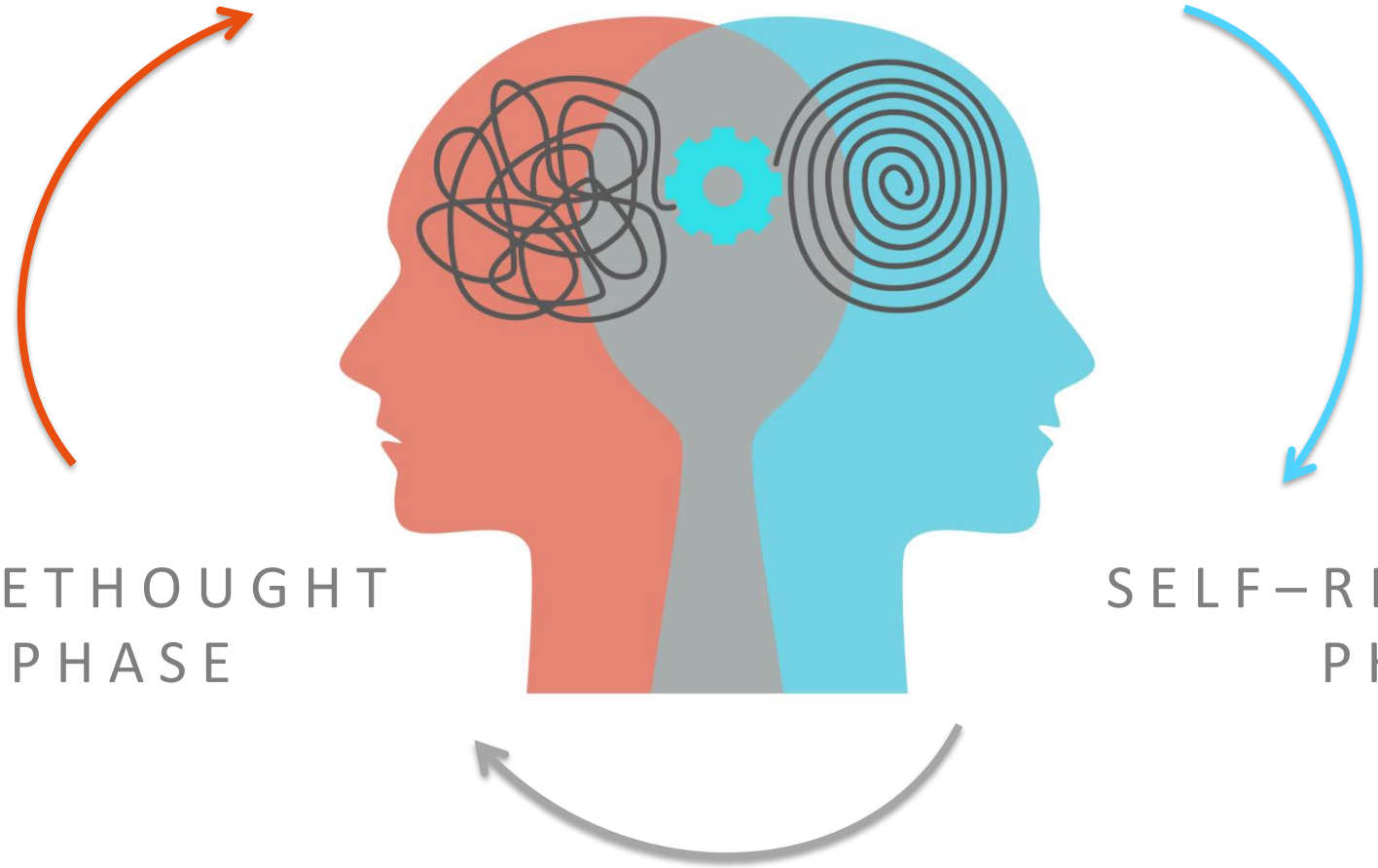
An important mid-term math exam is two weeks away, and she has begun to study while listening to popular music "to relax her." Tracy has not set any study goals for herself—instead she simply tells herself to do as well as she can on the test. She uses no specific learning strategies for condensing and memorizing important material

Self-regulation researchers have sought to understand students like Tracy and to provide help in developing key processes that she lacks, such as goal setting, time management, learning strategies, self-evaluation, self-attributions, seeking help or information, and important self-motivational beliefs, such as self-efficacy and intrinsic task interest.

In recent years, there have been exciting discoveries regarding the nature, origins, and development of how students regulate their own learning processes (Zimmerman & Schunk, 2001). Although these studies have clearly revealed how self-regulatory processes lead to success in school, few teachers currently prepare students to learn on their

# SELF–REGULATED LEARNING

PERFORMANCE PHASE



FORETHOUGHT PHASE

SELF–REFLECTION PHASE

*Zimmerman, Becoming a Self-Regulated Learner: An Overview. Theory & Practice 2002*

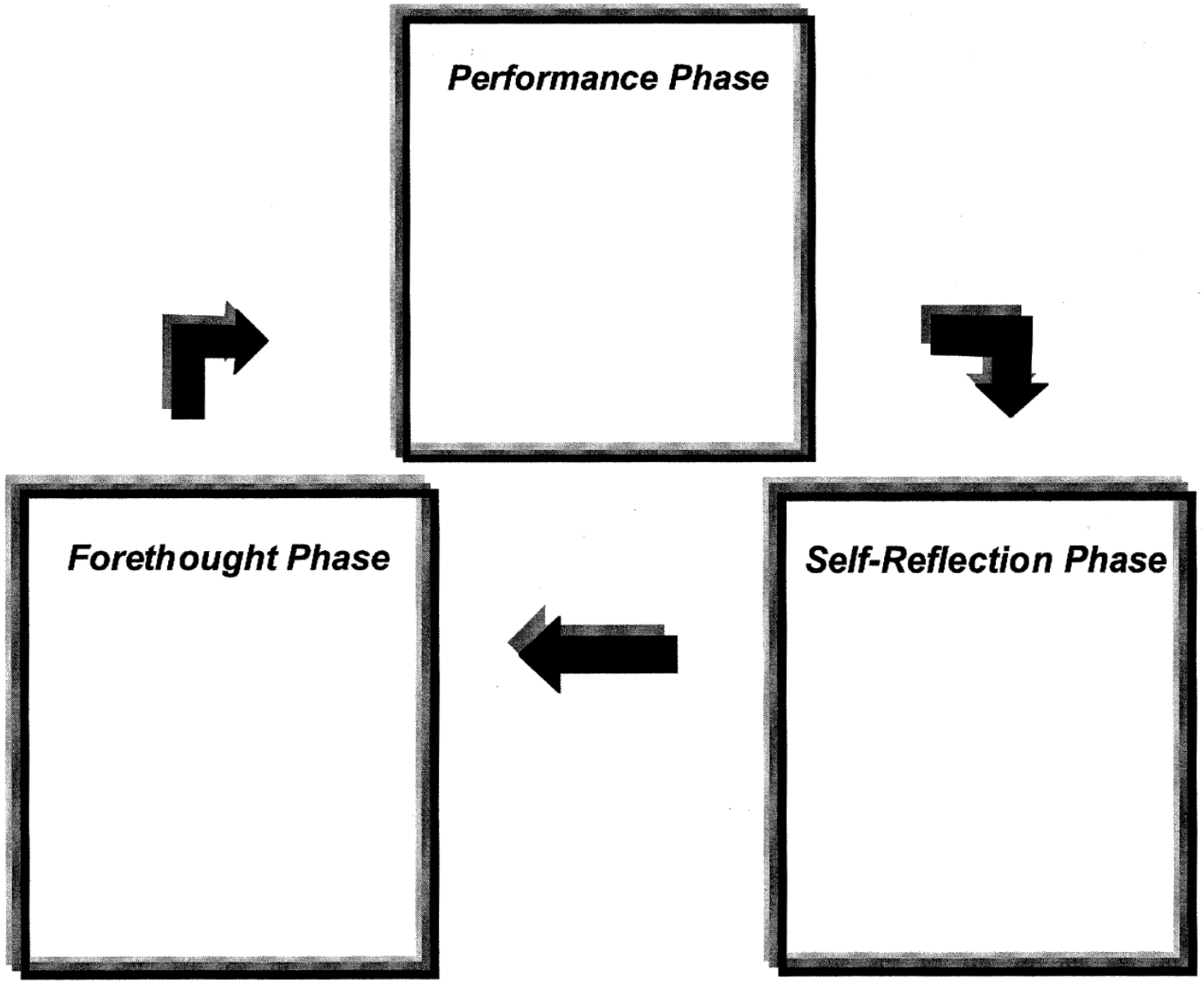
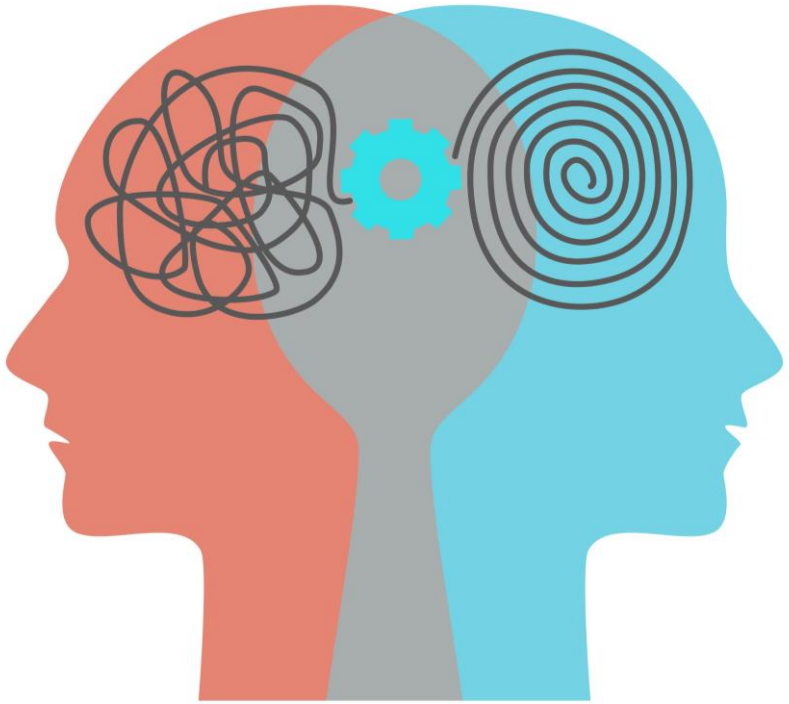



**Figure 1.** Phases and Subprocesses of Self-Regulation. From B.J. Zimmerman and M. Campillo (in press), "Motivating Self-Regulated Problem Solvers." In J.E. Davidson and Robert Sternberg (Eds.), *The Nature of Problem Solving*. New York: Cambridge University Press. Adapted with permission.

# SELF–REGULATED LEARNING

## Embedded in education

In curriculum, information on performance (feedback), opportunities to complete the cycle, training, eg. Study SMART (Biwer et al, AHSE 2023)



Advances in Health Sciences Education (2023) 28:147–167
https://doi.org/10.1007/s10459-022-10149-z

# Study smart – impact of a learning strategy training on students' study behavior and academic performance

Felicitas Biwer[1] · Anique de Bruin[1] · Adam Persky[2]

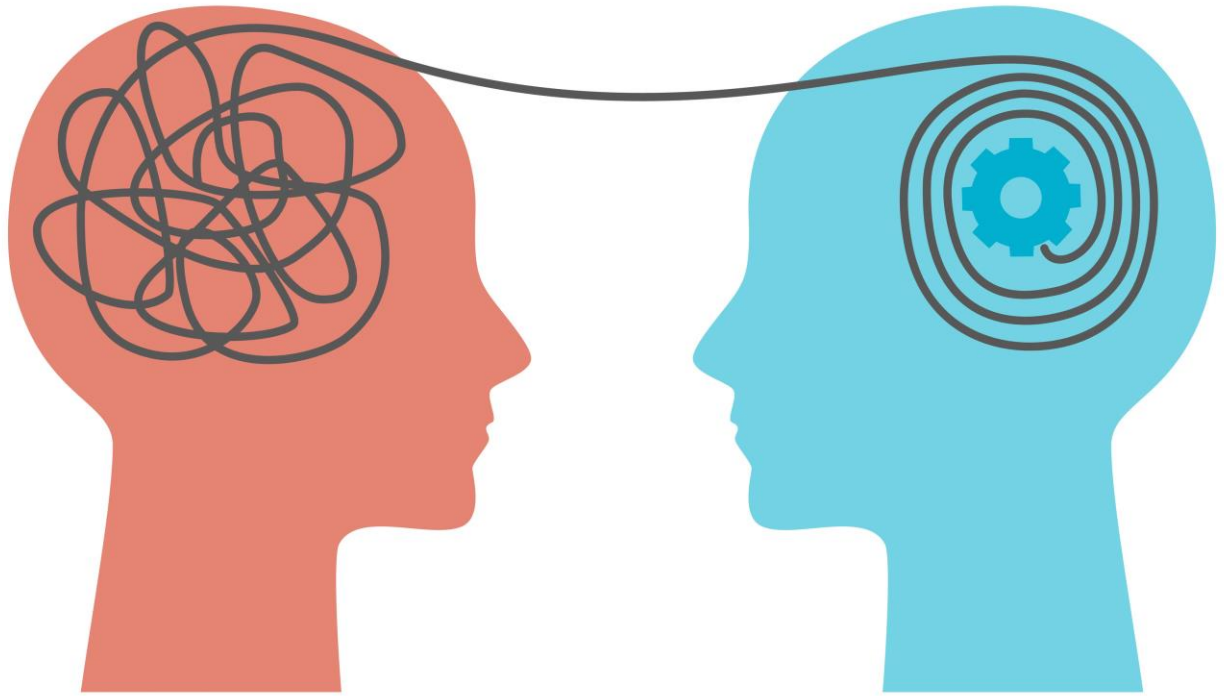
Received: 12 November 2021 / Accepted: 23 July 2022 / Published online: 23 August 2022


## Abstract

Recent research shows the importance to teach students the self-regulated use of effective learning strategies at university. However, the effects of such training programs on students' metacognitive knowledge, use of learning strategies, and academic performance in the longer term are unknown. In the present study, all first-year pharmacology students from one university attended a learning strategy training program, i.e., the 'Study Smart program', in their first weeks. The 20% (n = 25) lowest scoring students on the first mid-term received further support regarding their learning strategies. Results showed that all

**Table 1** Study Smart Outline

| | Pre-Class | | to Next | Components |
|---|---|---|---|---|
| Day 1: Awareness | 1. Narrated | | olog | Declarative knowledge, conditional knowledge, beliefs |
| Day 2: Practice | | | | Motivation, practice, conditional knowledge |
| Day 3: Reflection | 1. Exercise orientatic<br>2. Reflectic in using e | | | Motivation, practice |



IN MENTOR GROUP

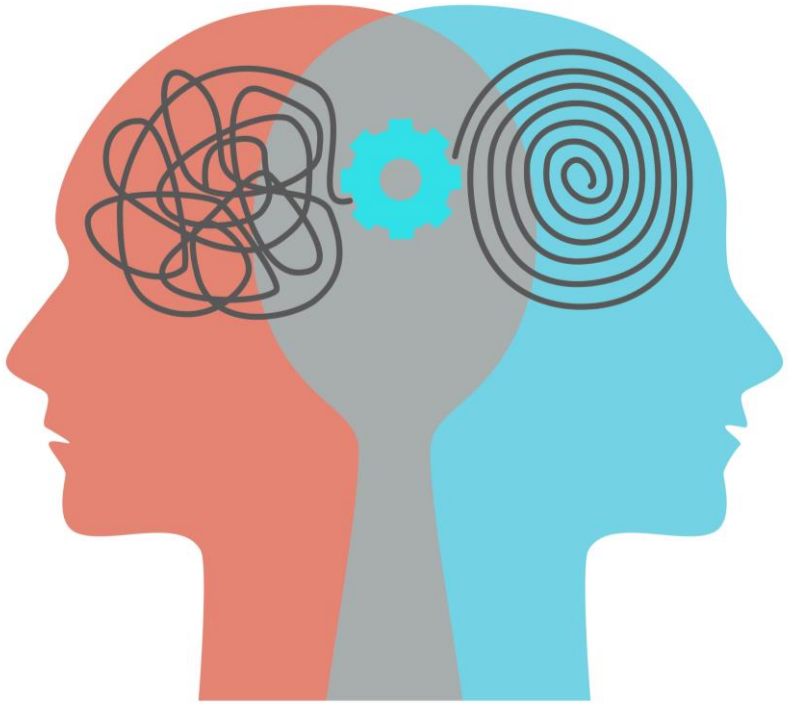
# SELF–REGULATED LEARNING

## Embedded in education

In curriculum, information on performance (feedback), opportunities to complete the cycle, training, eg. Study SMART (Biwer et al, AHSE 2023)

## Support/ structure in

Portfolio – as depository, as tool for **self-regulation of learning** (reflection), starting point dialogue

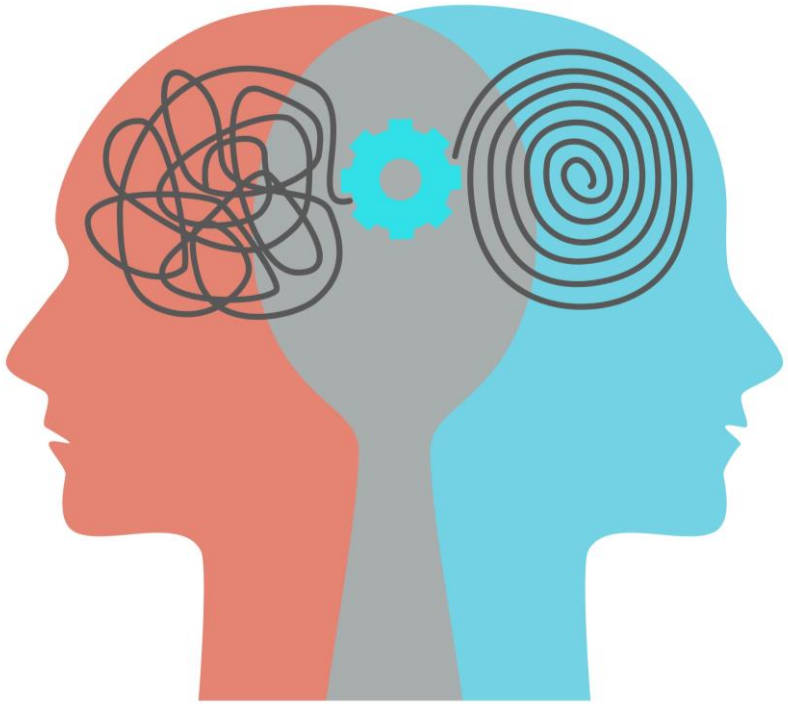


# SELF–REGULATED LEARNING & USE OF PORTFOLIO - 1

## DOCUMENTING

As a moment of contemplation (learners analyze experiences writing portfolio reports)

As a reminder of past events (previous portfolio reports aid recall).



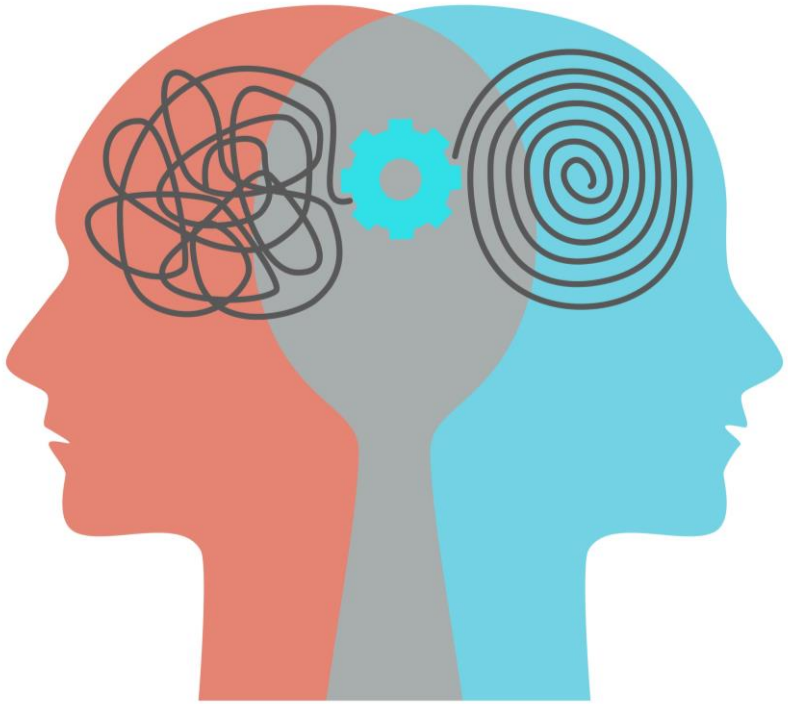
Outcomes supported: self-assessment, reflection and feedback

*Van der Gulden et al,How does portfolio use affect self-regulated learning in clinical workplace learning: What works, for whom, and in what contexts? PME 2022*

# SELF–REGULATED LEARNING & USE OF PORTFOLIO - 2

## POTENTIAL NEGATIVE SIDE – EFFECTS

- Contribution to perceived workload
- Limited agency due to mandatory content
- Variable evidence for support use of learning goals
- Tension if there is assessment associated with portfolio use
- Stress/ anxiety/ time-consuming
- Negative perceptions with portfolio as a tool



## DESIGN & SUPPORT PIVOTAL

*Van der Gulden et al,How does portfolio use affect self-regulated learning in clinical workplace learning: What works, for whom, a in what contexts? PME 2022*

# SELF–REGULATED LEARNING

## Embedded in education

In curriculum, information on performance (feedback), opportunities to complete the cycle, training, eg. Study SMART (Biwer et al, AHSE 2023)

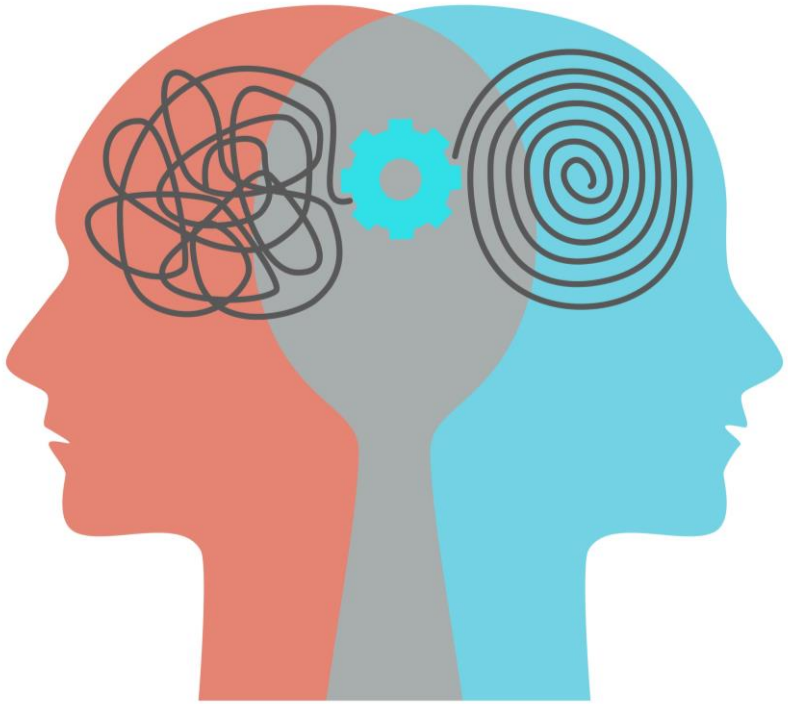
## Support/ structure in

Portfolio – as depository, as tool for **self-regulation of learning** (reflection), starting point dialogue

## Guidance needed

Mentoring (Driessen et al, 2005, 2007; Dekker et al, 2009; Heeneman et al, 2017; Kalen et al, 2012)

e.g. R2C2 model (Sargeant et al, 2015) (more later on)



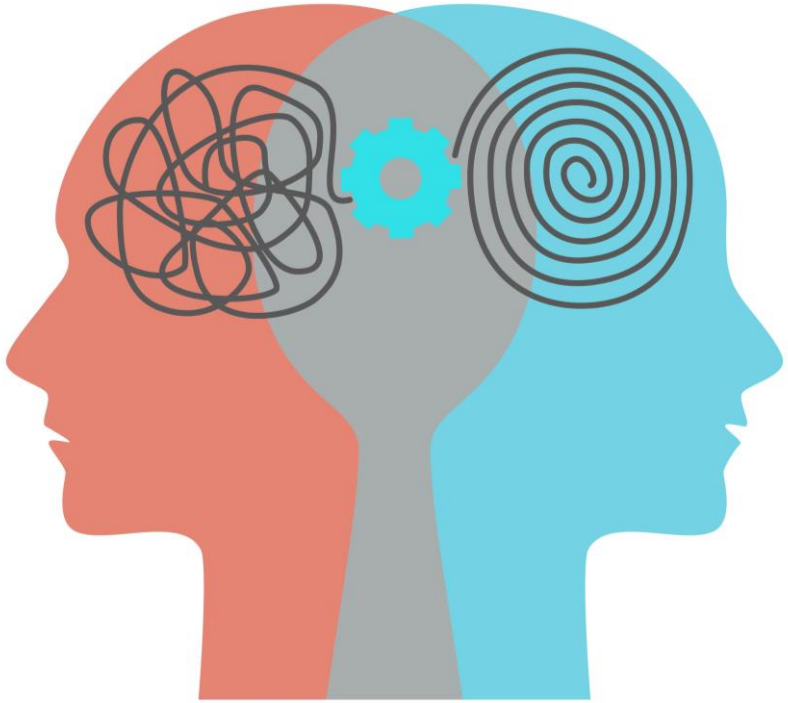
# M E N T O R I N G & S R L

Feedback dialogue
Follow-up of feedback

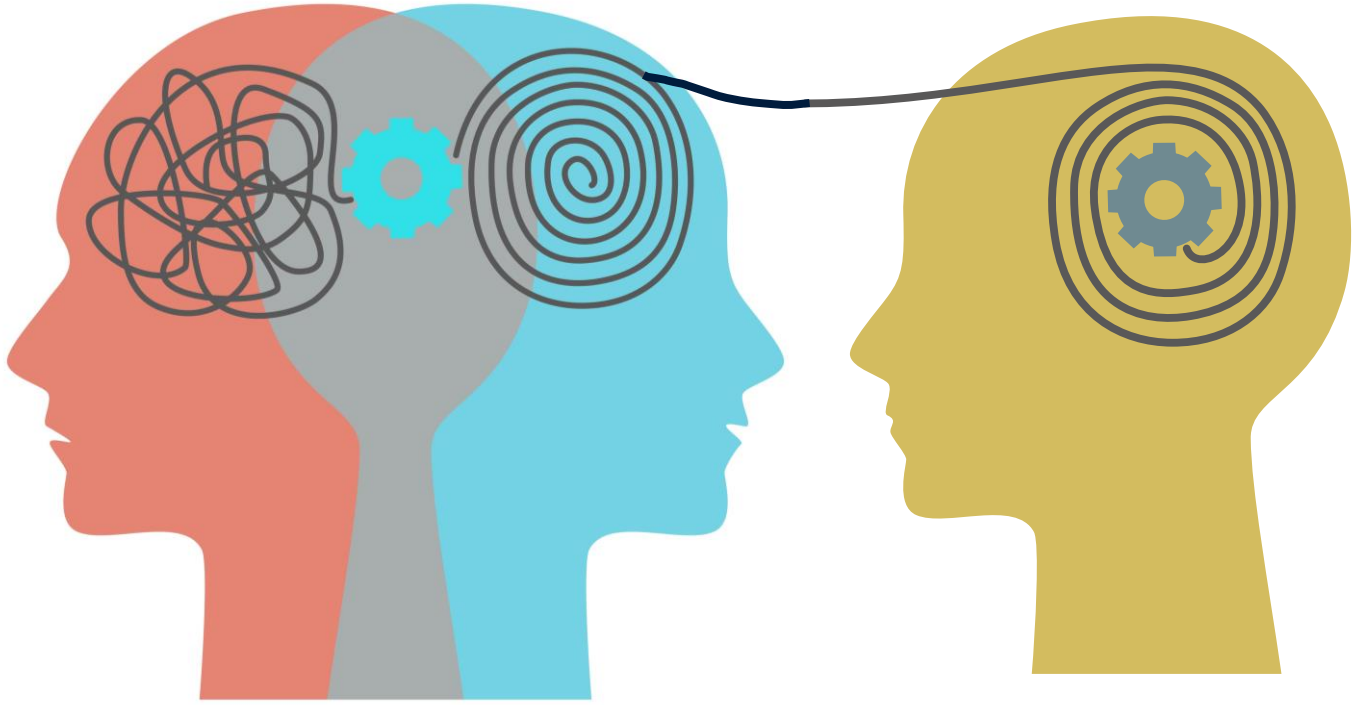
Guidance/ mentoring
- Self-regulation of learning
- needs ‘regulation’

Guidance also needs embedding
- Education and assessment
- Information on performance

# SELF–REGULATED LEARNING & GUIDANCE



STUDENT SRL



MENTOR GUIDANCE FOR STUDENT SRL

# AT EACH TABLE –
## Share and discuss

# AT EACH TABLE –
Share and discuss


- Self-regulated learning:
  - Your experiences? Do you ‘have’ SR-learners?
    - How is SRL embedded in education? If not, what is needed?
    - Is there support/ guidance for SRL? How? If not, what is needed?
  - What works well and why?
  - What does not work (well) and why?

# MENTORING...

**ROLES & CONCEPTUA–LISATIONS**

SKILLS

FACULTY DEVELOP–MENT

SELF–REGULATED LEARNING

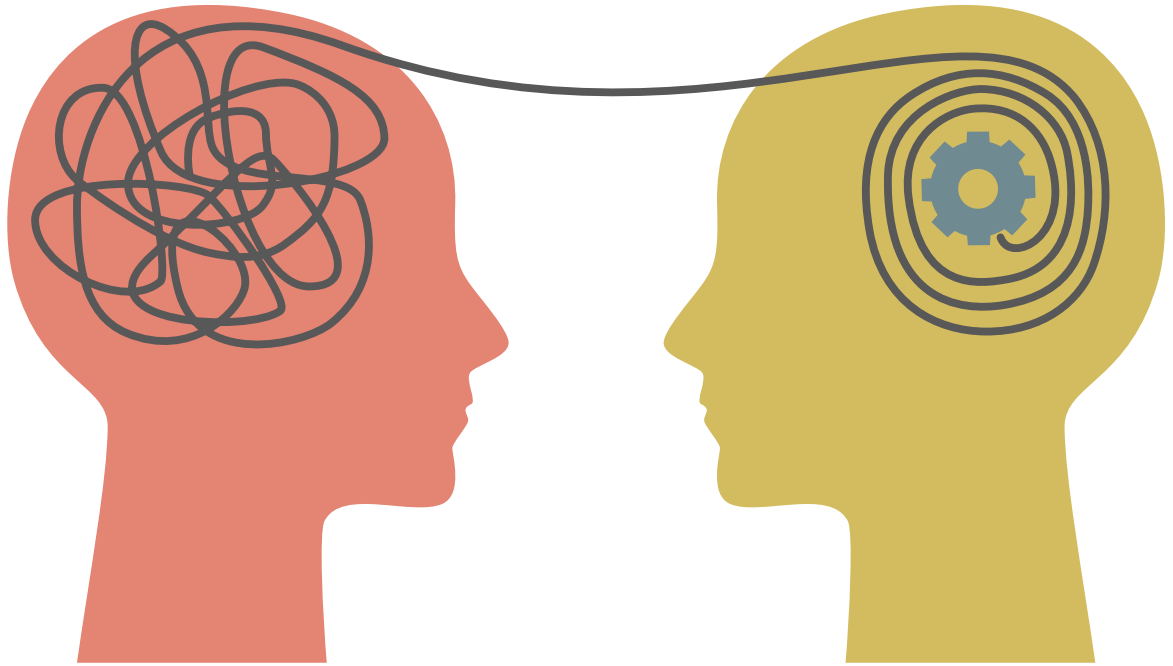
# MENTORING ROLES & CONCEPTUALISATIONS

CHANGES SEEN:

Aligned with longitudinal educational and assessment approaches (e.g. programmatic assessment)

LEADING TO:

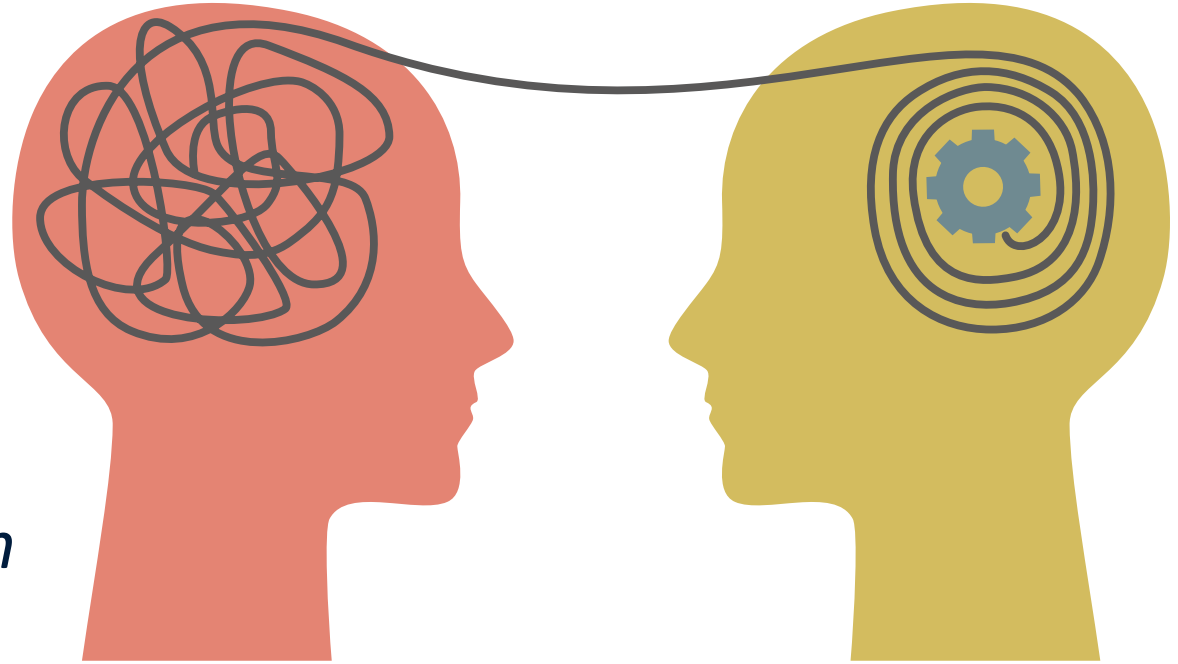
- Mentoring embedded/ part of study programs
- Longitudinal, educational alliance
- Implementation of portfolio-s, follow-up of feedback
- Emphasis on Professional and personal development



# MENTORING ROLES & CONCEPTUALISATIONS

## INTERESTING PAPERS

Meuwissen et al. *Multiple-role mentoring: mentors' conceptualisations, enactments and role conflicts*. Med Educ, 2019



Loosveld et al. *MERIT: a mentor reflection instrument for identifying the personal interpretative framework.* BMC Medical Education (2021) 21:144

*> Come back to this paper in Faculty Development section of Workshop*

# Multiple-role mentoring: mentors' conceptualisations, enactments and role conflicts

Stephanie N E Meeuwissen, Renée E Stalmeijer & Marjan Govaerts

**INTRODUCTION** Outcome-based approaches to education and the inherent emphasis on programmatic assessment in particular, require models of mentoring in which mentors fulfil dual roles: coach and assessor. Fulfilling multiple roles could result in role confusion or even role conflicts, both of which may affect mentoring processes and outcomes. In this study, we explored how mentors conceptualise and enact their role in a multiple-role mentoring system and to what extent they experience role conflicts.

**METHODS** We conducted a constructivist grounded theory study at one undergraduate medical school. A purposive sample of 12 physician-mentors active in a programmatic assessment system was interviewed. Data analysis followed stages of open, axial and selective coding through which themes were constructed.

**RESULTS** Three predominant mentoring approaches were constructed: (i) empowering (a reflective and holistic approach to student development); (ii) checking (an observant approach to check whether formal requirements corresponding type of mentor-mentee relationship: (i) partnership; (ii) instrumental, and (iii) faculty-centred. Furthermore, mentors' strategies, focus, agency provided to students and perception of the assessment system characterised mentoring approaches and relationships. Role conflicts were mainly experienced by mentors with a directing mentoring approach. They used various coping mechanisms, including deviation from assessment guidelines.

**CONCLUSIONS** In multiple-role mentoring in the context of programmatic assessment, mentors adopted certain predominant mentoring approaches, which were characterised by different strategies for mentoring and resulted in different mentor–mentee relationships. Multiple-role mentoring does not necessarily result in role conflict. Mentors who do experience role conflict seem to favour the directing approach, which is most at odds with key principles of competency-based education and programmatic assessment. These findings build upon existing mentoring literature and offer practical suggestions for

# MENTORING ROLES & CONCEPTUALISATIONS

## Meuwissen et al – MENTORING APPROACHES

(i) **Empowering** - a reflective and holistic approach to student development

(ii) **Checking** - an observant approach to check whether formal requirements are met

(iii) **Directing** - an authoritative approach to guide students' professional development

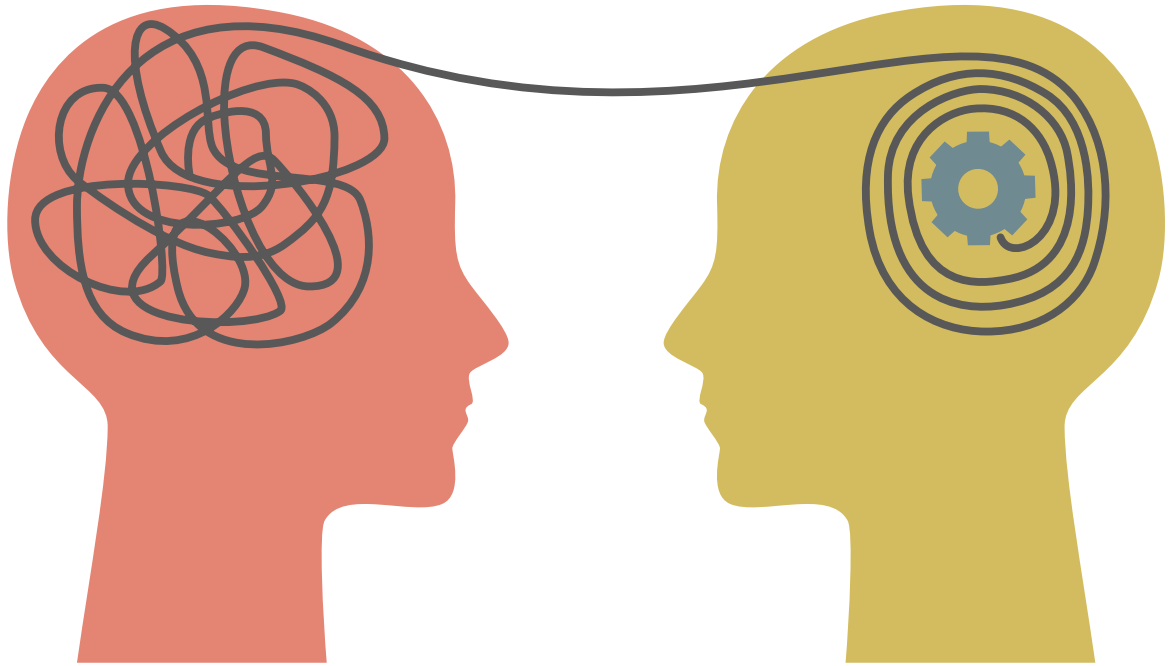


*Table 2 Model of mentoring approaches and conflicts of roles in a multiple-role mentoring system*

| | | Characteristic factors | | | | |
|---|---|---|---|---|---|---|
| **Predominant mentoring approaches** | **Mentor–mentee relationship** | **Mentors' strategies** | **Primary focus on mentoring** | **Extent of students' agency** | **Perception of the feedback and assessment system** | **Conflict of roles** |
| Empowering | Partnership | Reflective, mirroring student's behaviour | A holistic approach to the development of students' personal and professional identity | The student is given considerable agency by the mentor | A support in the mentor role | No: different roles are considered to be a surplus |
| Checking | Instrumental | Observe, ticking boxes | A check of what the assessment programme prescribes and whether performance standards are met | The student is granted full agency by the mentor | A purpose in itself | No: different roles are considered to be a surplus |
| Directing | Faculty-centred | Authoritative, telling students what to do | Give direction on what it takes to become and be a doctor | The student is given a low degree of agency, whereas the mentor steers and has a high degree of agency | A defective system that is not trusted | Yes: mentors feel uncomfortable advising on a student's level |

# MENTORING ROLES & CONCEPTUALISATIONS

## Meuwissen et al – MENTORING APPROACHES

*Relationship:*

(i) **Empowering** - a reflective and holistic approach to student development

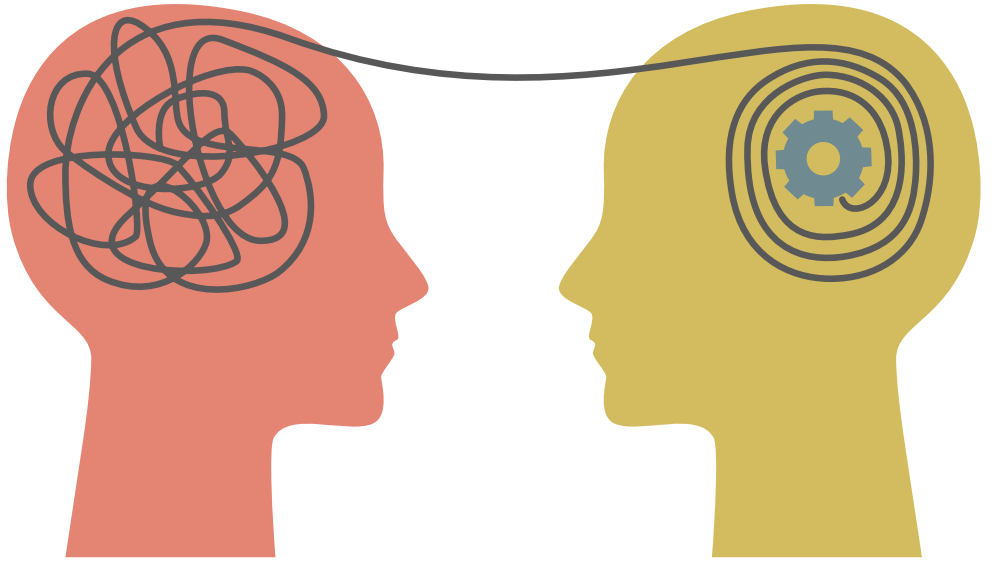
*Partnership, support as mentor, student has agency*

(ii) **Checking** - an observant approach to check whether formal requirements are met

*Instrumental/ some distance, student is responsible and given full agency*

(iii) **Directing** - an authoritative approach to guide students' professional development

*Staff/teacher-centered, little confidence in the (programmatic) assessment system, little agency for student*

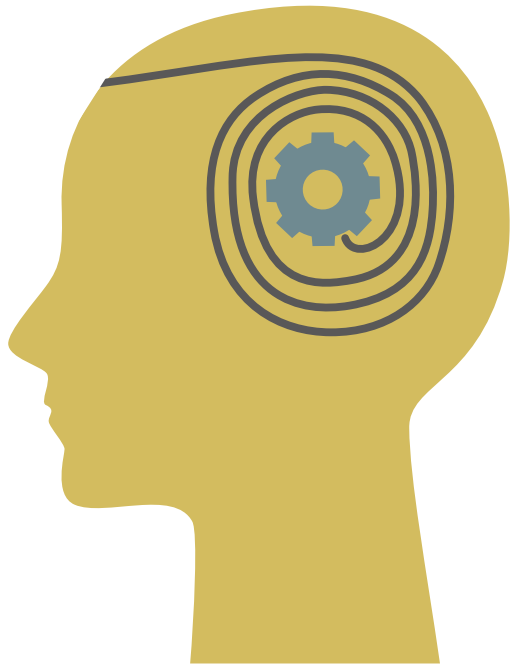


# MENTORING ROLES & CONCEPTUALISATIONS

## TENSIONS IN MENTORING

Meuwissen et al –

Directing: conflict in role/ tension, in giving advice on student level.



Heeneman & de Grave 2017 – interviews mentors, experiencing tensions when:

- mentor experience/ novice > more directing and instrumental (due to insecurity by mentor)
- personal relationship with the mentee > empowering, yet some felt tension to give advice on student level
- if students' end level was at stake/ doubtful > more directing, also at the instrumental level (performance level not met)

# AT EACH TABLE –
## Share and discuss

# AT EACH TABLE –
Share and discuss


- Mentoring conceptualisations
  - Is the model of Meuwissen et al applicable for your context?
  - If yes: what is your 'primary' conceptualisation and why?
    - (i) **Empowering** - a reflective and holistic approach to student development

      *Partnership, support as mentor, student has agency*
    - (ii) **Checking** - an observant approach to check whether formal requirements are met

      *Instrumental/ some distance, student is responsible and given full agency*
    - (iii) **Directing** - an authoritative approach to guide students' professional development

      *Staff/teacher - centered, little confidence in the (programmatic) assessment system, little agency for student*
  - If no: what would be your mentor conceptualisation?

# MENTORING...

ROLES & CONCEPTUA–LISATIONS

**SKILLS**

FACULTY DEVELOP–MENT

SELF–REGULATED LEARNING

# HEALTH CARE PROFESSIONS EDUCATION MENTORING

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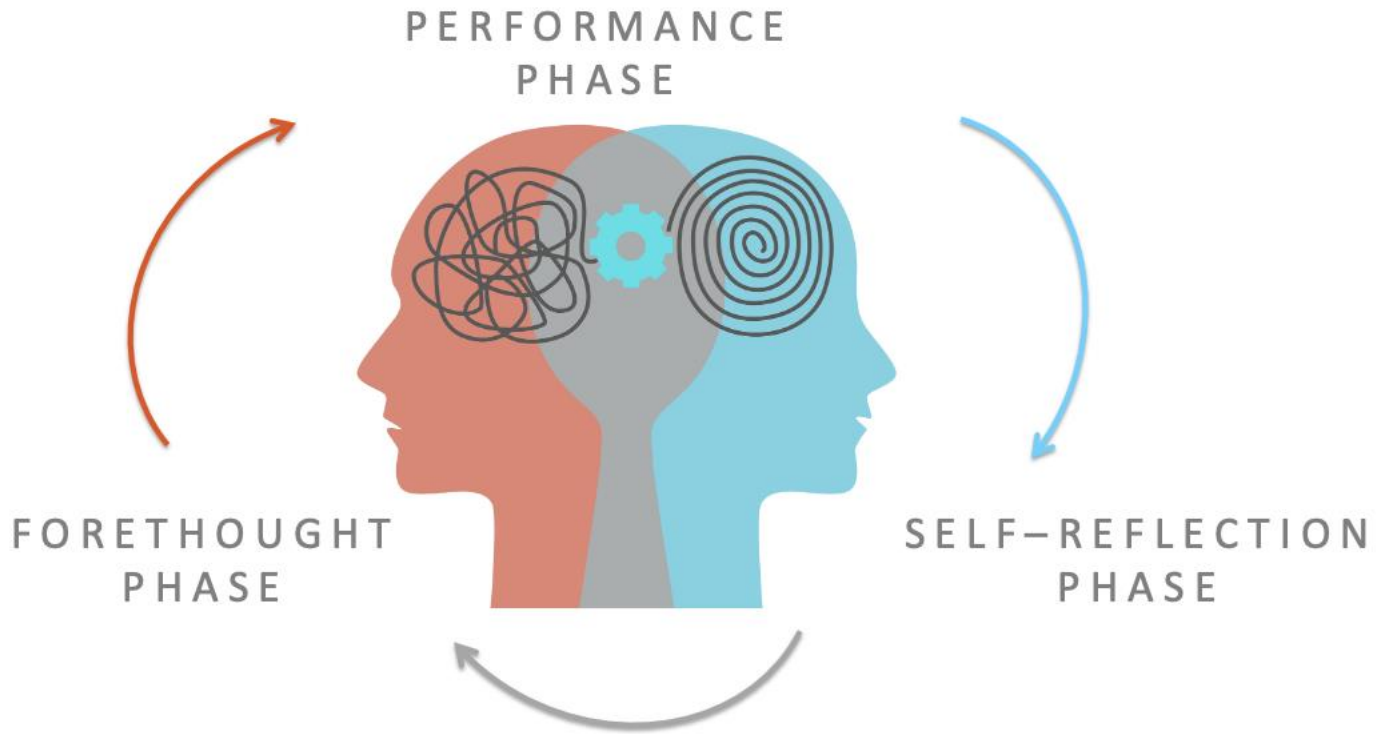
*Van Nieuwerburgh C, ed. Coaching in Education: Getting Better Results for Students, Educators, and Parents. London: Karnac Books 2012;222.*

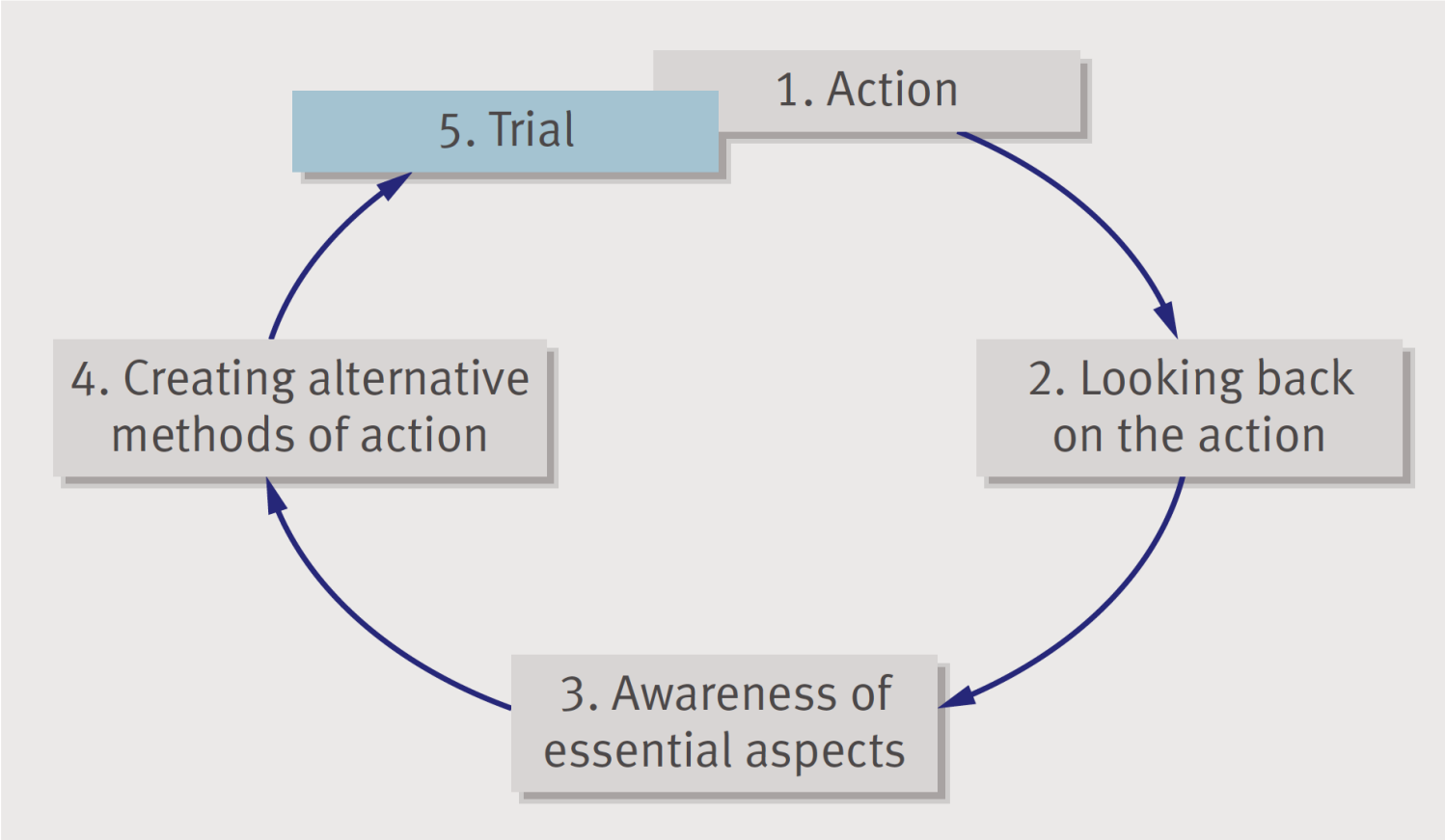
# MENTORING & SELF–REGULATED LEARNING

# KEY FEATURES: CYCLE AND DIALOGUE



# MENTORING & SELF–REGULATED LEARNING

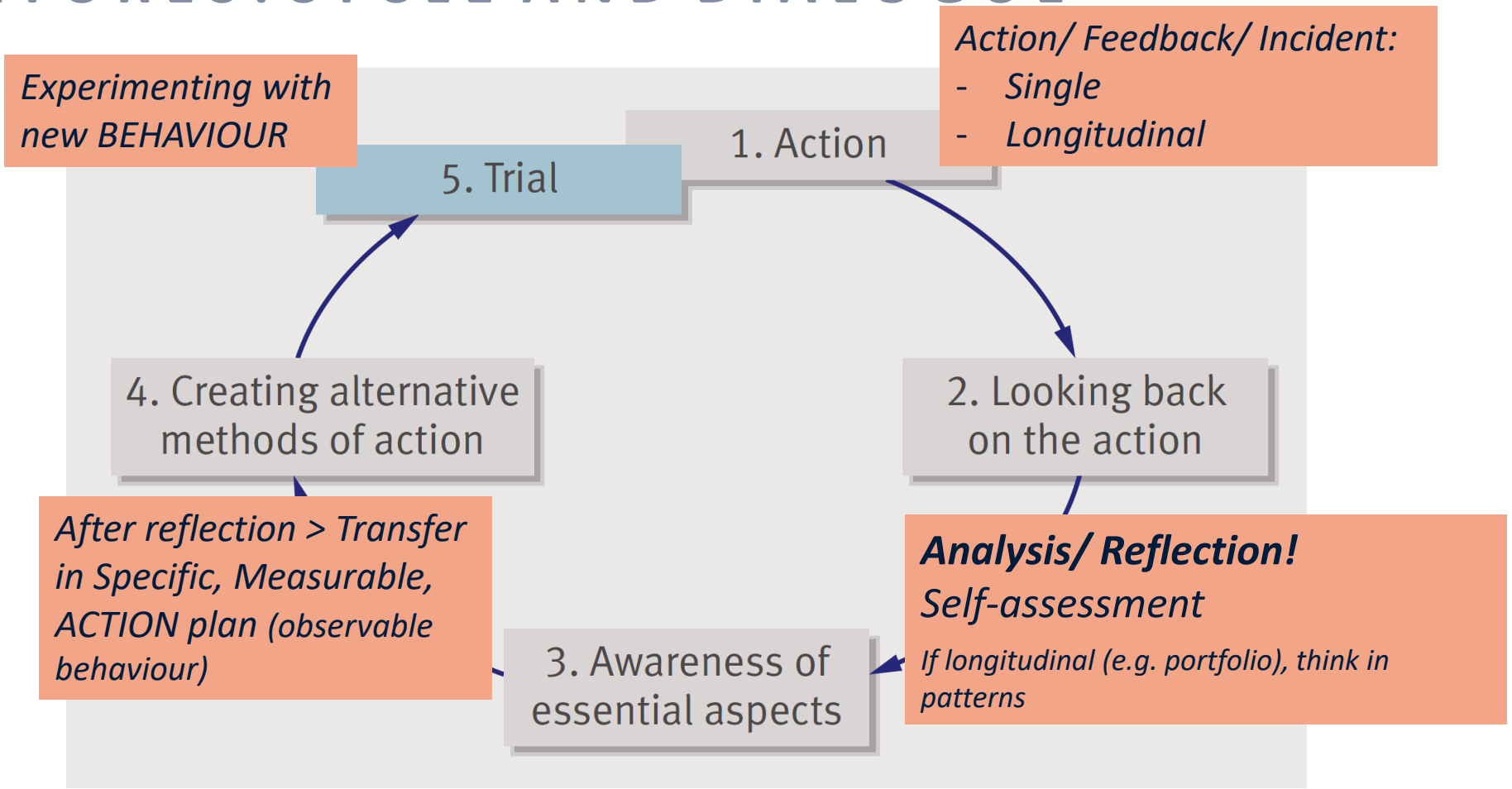
# KEY FEATURES: CYCLE AND DIALOGUE




*By Korthagen, in Driessen et al, 2008*

# MENTORING & SELF–REGULATED LEARNING

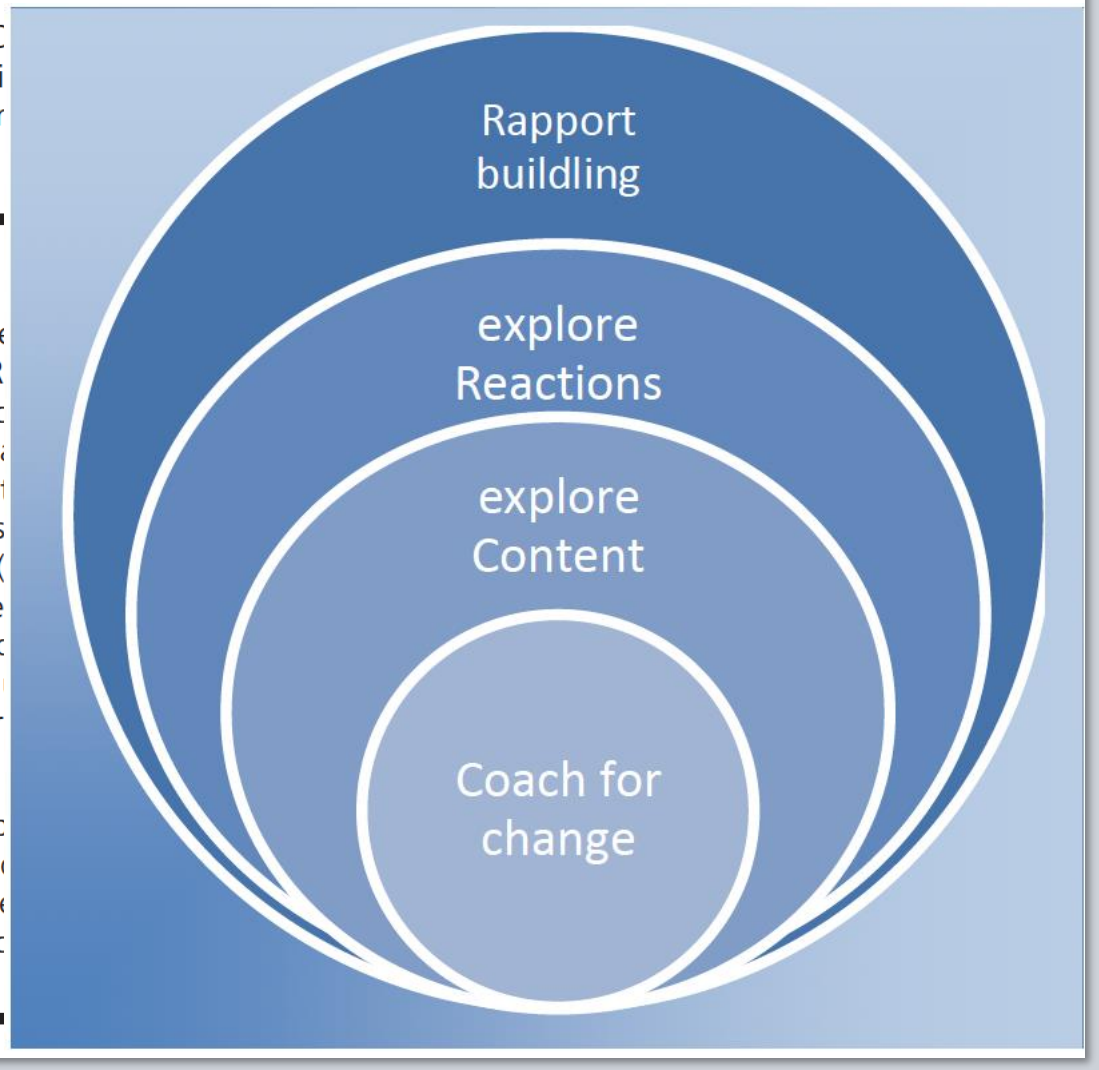
## KEY FEATURES: CYCLE AND DIALOGUE




*By Korthagen, in Driessen et al, 2008*

# Facilitated Reflective Performance Feedback: Developing an Evidence- and Theory-Based Model That Builds Relationship, Explores Reactions and Content, and Coaches for Performance Change (R2C2)

Joan Sargeant, PhD, Jocelyn Lockyer, PhD, Karen Mann, PhD
Ivan Silver, MD, MEd, FRCPC, Heather Armson, MD, Erik Dri
Tanya MacLeod, MSc, Wendy Yen, MA, Kathryn Ross, MSc, ar




## Abstract

**Purpose**
To develop and conduct feasibility testing of an evidence-based and theory-informed model for facilitating performance feedback for physicians so as to enhance their acceptance and use of the feedback.

**Method**
To develop the feedback model (2011–2013), the authors drew on earlier research which highlights not only the factors that influence giving, receiving, accepting, and using feedback but also the theoretical perspectives which enable the understanding of these influences. The authors undertook an iterative, multistage, qualitative study guided by

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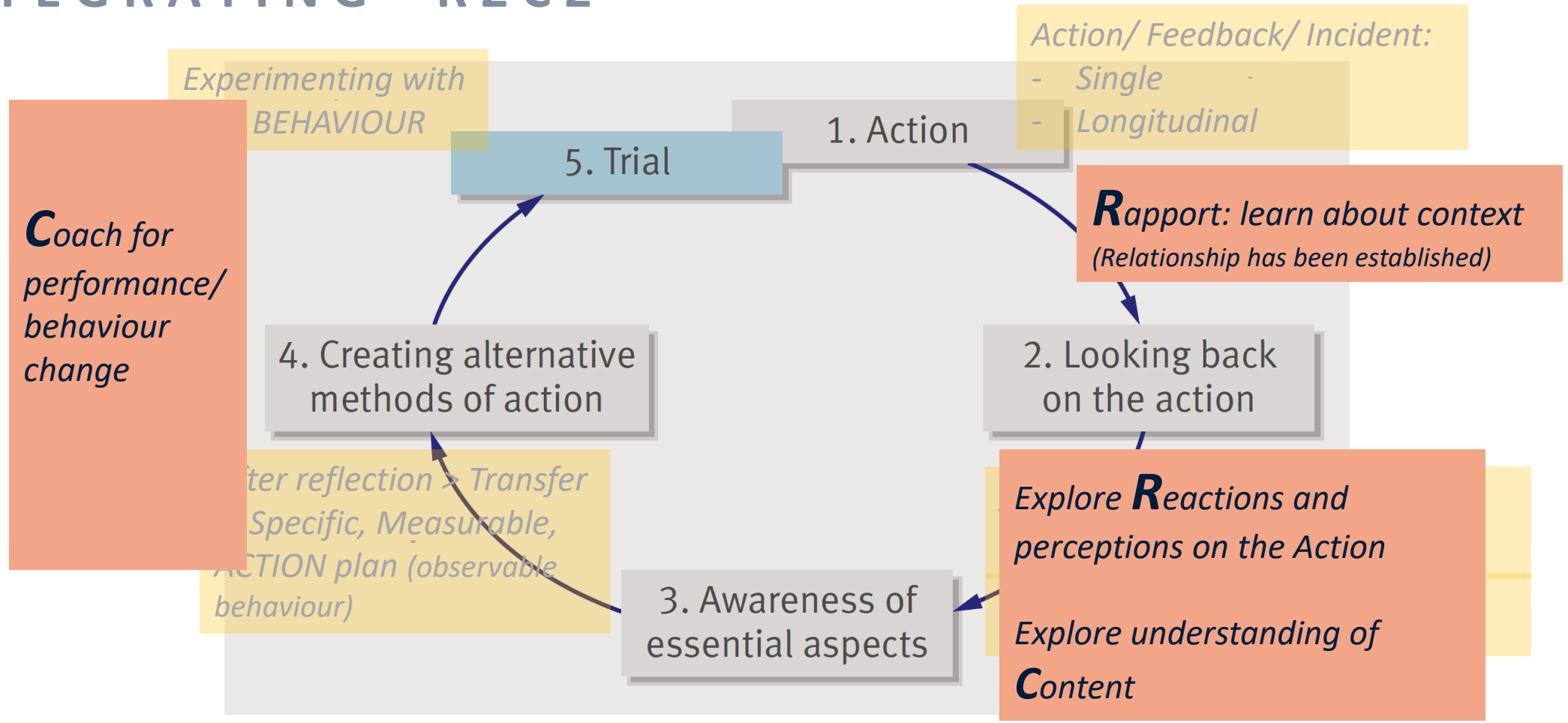
# MENTORING & SELF–REGULATED LEARNING INTEGRATING - R2C2

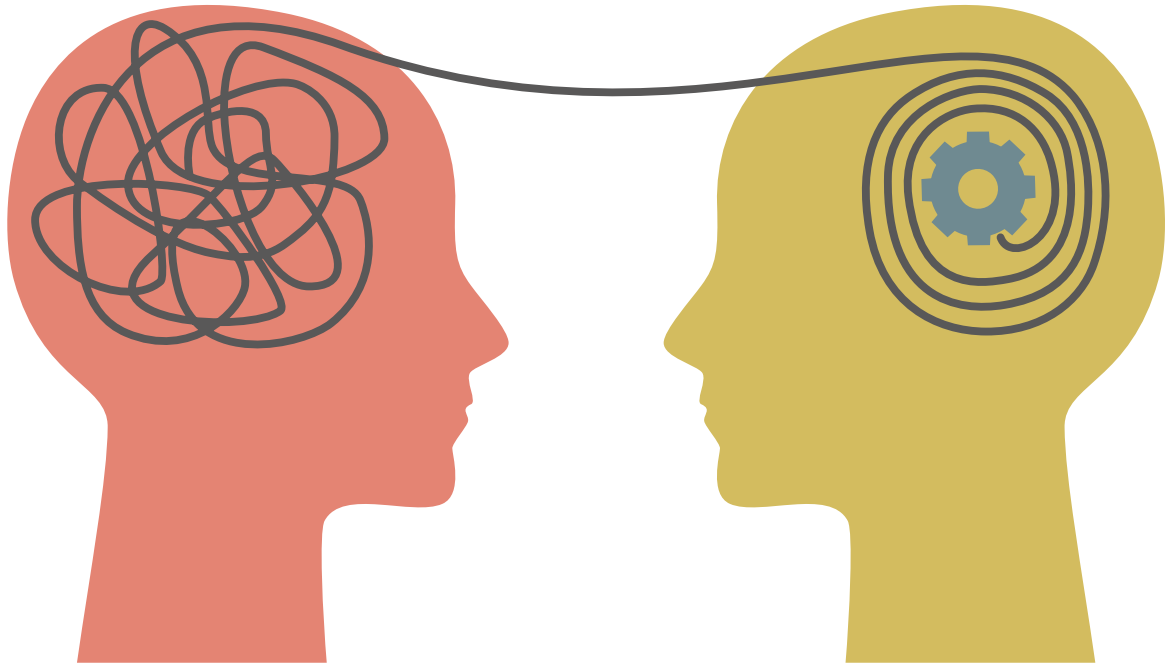



Sargeant J, et al. MedEdPORTAL. 2016;12:10387.

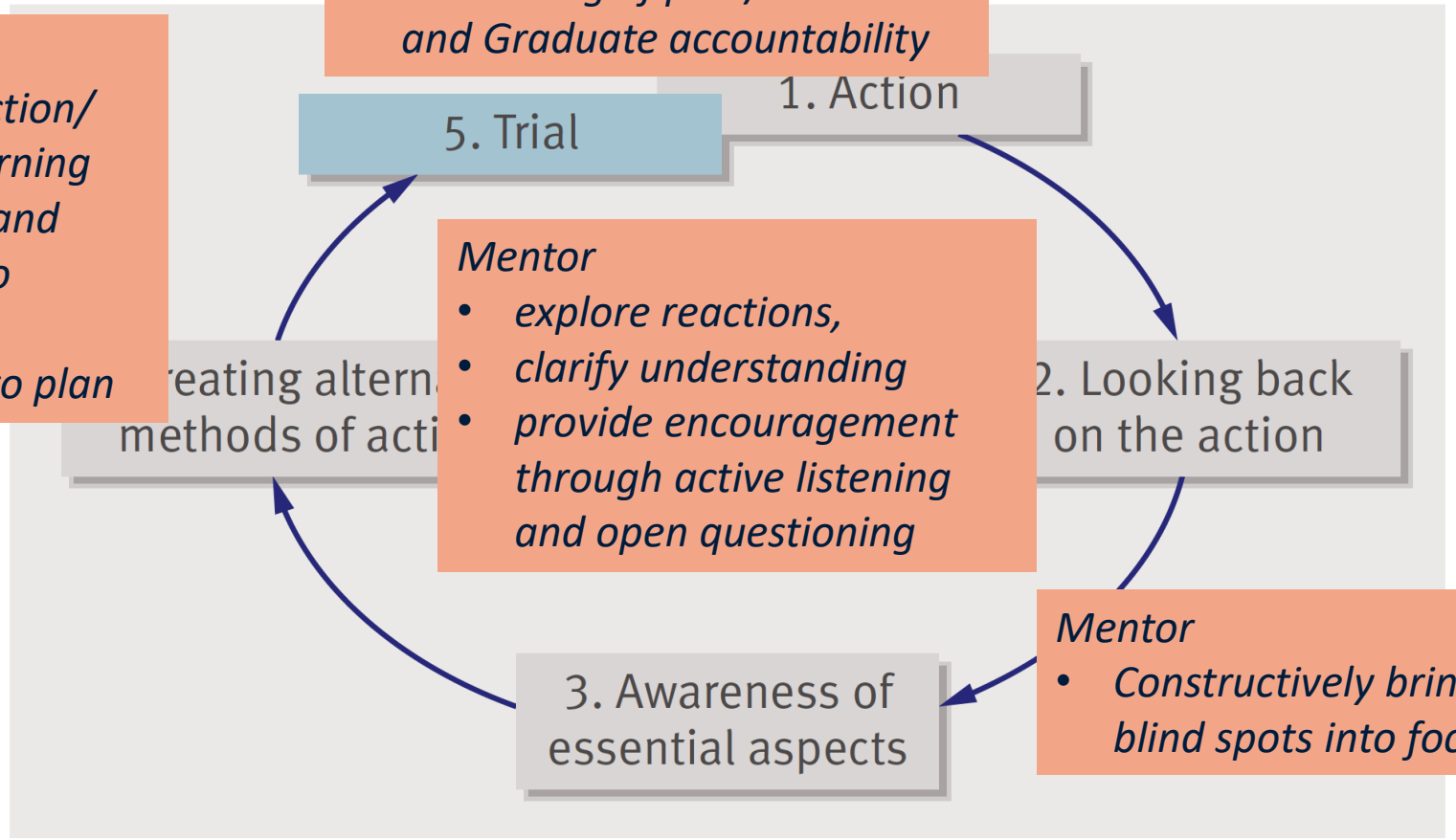
# MENTORING & SELF–REGULATED LEARNING

# INTEGRATING - R2C2

- On the spot
  - Certain incident
  - Direct request for advice or help (but do not ‘solve’)
  - Can lead to behavioural change for a next time
  - Plan a follow-up!
- Planned meeting, using information/ e.g. portfolio activities
  - Has been prepared, by Mentor and Student
  - More longitudinal, overarching, leading to ‘formal’ learning plan
- For both: mentoring **skills** and ’coaching’ type of **questions** can be similar >>



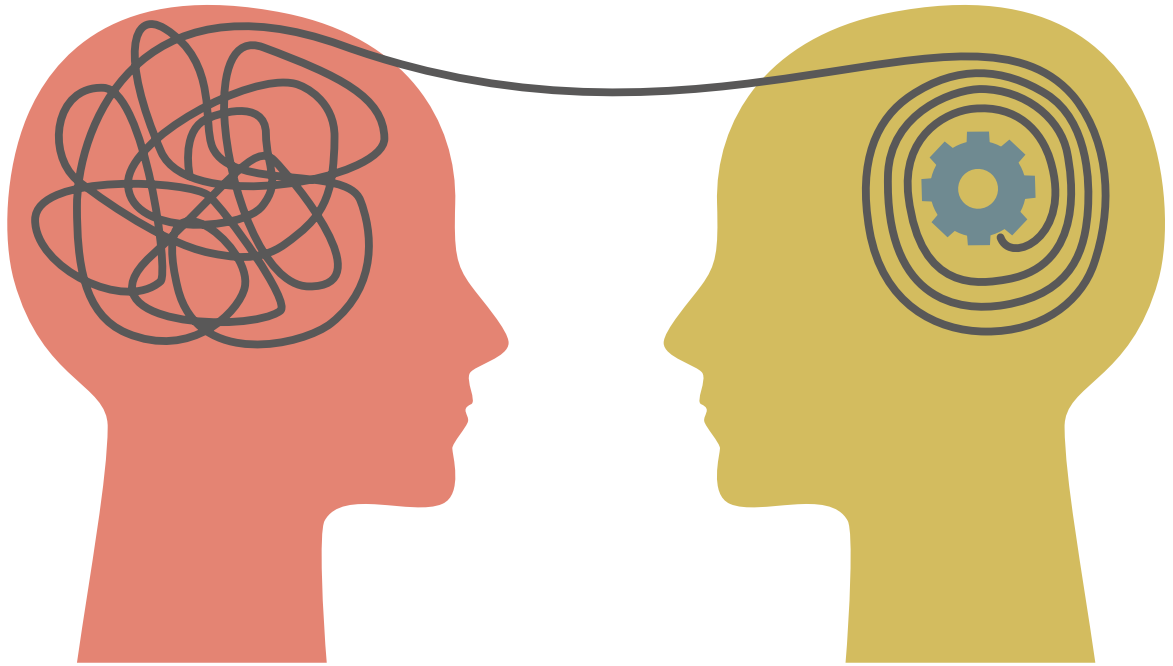
# MENTORING & SELF–REGULATED LEARNING SKILLS




*Armson et al, 2019*

# MENTORING & SELF–REGULATED LEARNING SKILLS

- offer encouragement and support through active listening and reinforcement of good performance
- is responsive to mentees' concern(s)
- explores mentees' interpretation of their experience(s) and asks for further explanations
- summarises content with additional analysis
- uses open questions to stimulate reflection
- employs extensive clarification of thinking to promote development of understanding through encouraging reflection
- encourages consideration of next step(s)



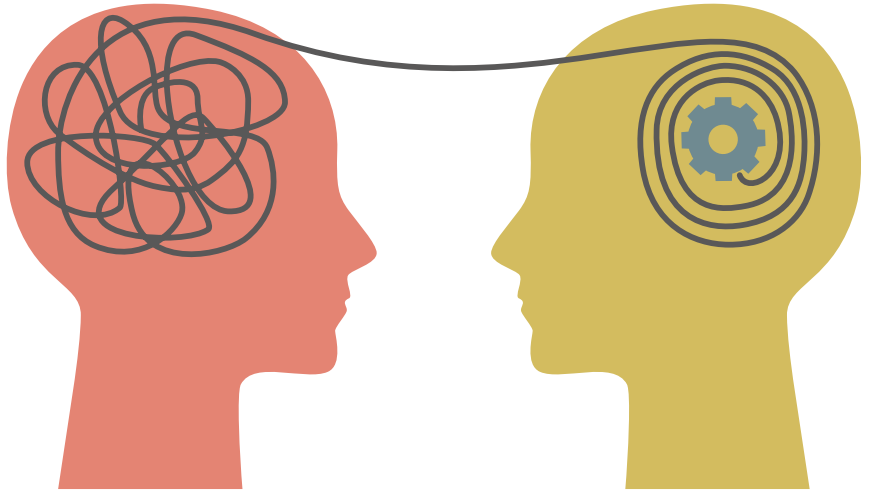
*Armson et al, 2019*

# MENTORING & SELF–REGULATED LEARNING

# 'SAMPLE' QUESTIONS

- How have your assessments and feedback been to date? What's been especially helpful for you?
- Can you say more about that?
- I'm curious about that, can you tell me more?
- That sounds like it was ... difficult, rewarding, etc., can you tell me more?
- You said you were surprised by that?
- Tell me more
- What was your role in this ….
- Were you in a similar situation/ experience earlier? Tell me more

- Also: summarizing
  - Let's summarize this piece before moving on...
  - Could I ask you to summarize what we've discussed? Where we are now?



*Sargeant et al 2016, Supplement D*

# AT EACH TABLE –
## Share and discuss - I

# AT EACH TABLE –
# Share and discuss - I


- Context matters
  - Will these questions ‘work’ in your context? E.g.
    - I'm curious about that, can you tell me more?
    - That sounds like it was ... difficult, rewarding, etc., can you tell me more?
    - You said you were surprised by that?
    - What was your role in …
    - Were you in a similar situation/ experience earlier?
  - If yes, share experiences?
  - if not, what would be fitting questions?

# AT EACH TABLE –
## Practice and feedback - II

# AT EACH TABLE –
## Practice and feedback - II


- Vignette ‘Noa’:
  - 1 person mentor, 1 person Noa
  - You have been Noa’s mentor for the clerkships
  - Using the information in the short portfolio, have a dialogue
    - on the follow-up of feedback (recurring feedback and behaviour, not the first time)
    - on the learning goals, in terms of not fit for purpose, not formulated  well (not SMART)
  - Feedback of observers

# MENTORING...

ROLES & CONCEPTUA–LISATIONS

SKILLS

**FACULTY DEVELOP–MENT**

SELF–REGULATED LEARNING

# FACULTY DEVELOPMENT MENTOR TRAINING

Mentor training leads to more confident mentors and improved mentoring skills, also in the perception of the mentees *(Pfund et al. 2014, Feldman et al. 2012)*

Tailor faculty development to

- Design of your mentoring program
- Context

# FACULTY DEVELOPMENT MENTOR TRAINING

Questionnaire(s) that can be helpful, to be used in Faculty development

- Heeneman & Grave. *Development and initial validation of a dual-purpose questionnaire capturing mentors' and mentees' perceptions and expectations of the mentoring process* BMC Medical Education (2019) 19:133

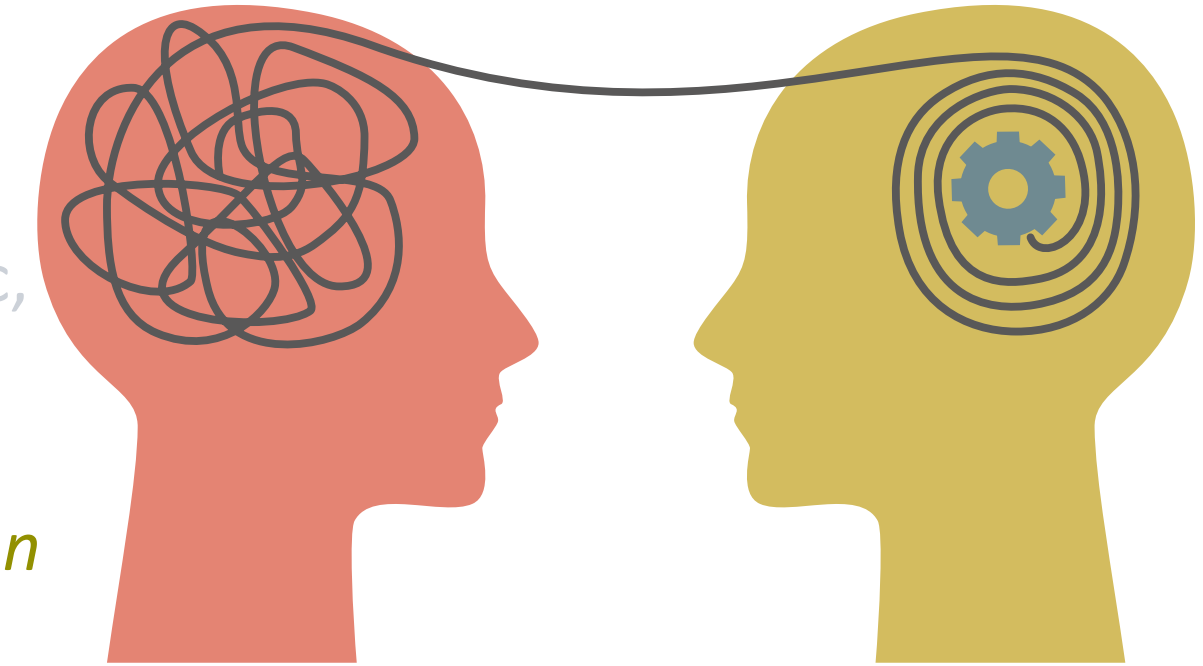
-MERIT : Loosveld et al.

# MENTORING ROLES & CONCEPTUALISATIONS

## INTERESTING PAPERS

Meuwissen et al. *Multiple-role mentoring: mentors' conceptualisations, enactments and role conflicts*. Med Educ, 2019

Loosveld et al. *MERIT: a mentor reflection instrument for identifying the personal interpretative framework.* BMC Medical Education (2021) 21:144



Loosveld *et al. BMC Medical Education* (2021) 21:144
https://doi.org/10.1186/s12909-021-02579-x

BMC Medical Education

RESEARCH ARTICLE Open Access

# MERIT: a mentor reflection instrument for identifying the personal interpretative framework

Lianne M. Loosveld[1*], Pascal W. M. Van Gerven[1], Erik W. Driessen[1], Eline Vanassche[2] and Anthony R. Artino Jr[3]

## Abstract

**Background:** Essential to the professional development of mentors is making explicit and critically challenging the knowledge and beliefs underpinning their mentoring practice. This paper reports on the development of a survey instrument called MERIT, MEntor Reflection InstrumenT, which was designed to support mentors' systematic reflection on the how, what and why of their practice.

**Methods:** In 2019, a twenty-item survey instrument was developed and piloted. Initial validation data ($N = 228$) were collected by distributing the survey through the authors' network. An exploratory factor analysis (EFA) was conducted and internal consistency reliability coefficients were calculated.

**Results:** The Principal Axis EFA with Direct Oblimin rotation (Delta = 0) resulted in four factors: 1) supporting personal development, 2) modelling professional development, 3) fostering autonomy, and 4) monitoring performance. The four factors explained 43% of the total variance of item scores. The Cronbach's alphas for the subscale scores were between .42 and .75.

**Conclusions:** The MERIT can help mentors reflect on their beliefs and professional knowhow. These reflections can serve as input for the faculty development initiatives mentors undertake, which may ultimately improve their knowledge and skills as a mentor.

**Keywords:** Mentoring, Systematic reflection, Faculty development, Personal interpretative framework, Survey study

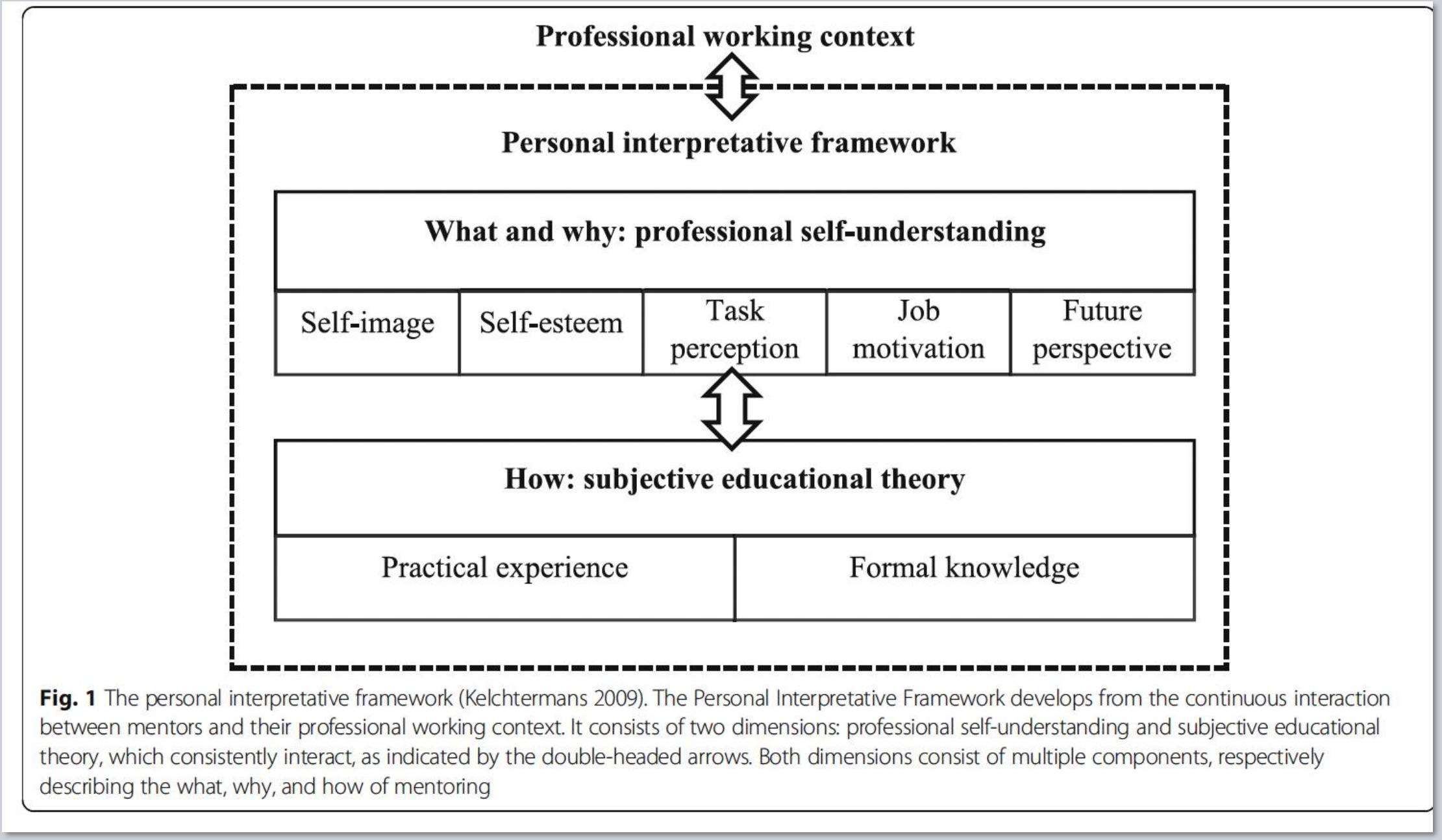


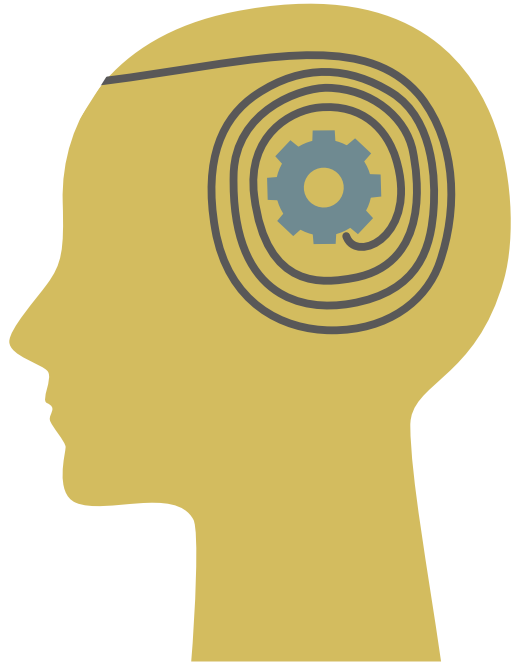

**Fig. 1** The personal interpretative framework (Kelchtermans 2009). The Personal Interpretative Framework develops from the continuous interaction between mentors and their professional working context. It consists of two dimensions: professional self-understanding and subjective educational theory, which consistently interact, as indicated by the double-headed arrows. Both dimensions consist of multiple components, respectively describing the what, why, and how of mentoring

# MENTORING ROLES & CONCEPTUALISATIONS

MERIT was designed as an instrument to
to stimulate reflection and to make explicit and (if needed) challenge mentors' personal knowledge and beliefs (personal interpretive framework)

MERIT has 4 factors, and enables comparison of ACTUAL and PREFERRED mentoring practices and behaviour:

(1) supporting personal development,
(2) modelling professional development,
(3) fostering autonomy,
(4) monitoring performance.



# AT EACH TABLE–
# USE MERIT

# AT EACH TABLE – USE MERIT


- Per table choose **1 factor**
    1) supporting personal development,
    2) modelling professional development,
    3) fostering autonomy,
    4) monitoring performance.
- Complete the items **of that factor**
- Compare ‘ACTUAL’ and “PREFERRED’
- Discuss

# MENTOR TRAINING EXAMPLE

Maastricht University


# MEDICAL SCHOOL

Bachelor of Medicine (3 years, 320 students)

Master in Medicine (3 years, 320 students)

Master in Medicine (graduate entry – 4 years, 50 students)

# MASTER IN MEDICINE
(graduate entry program)

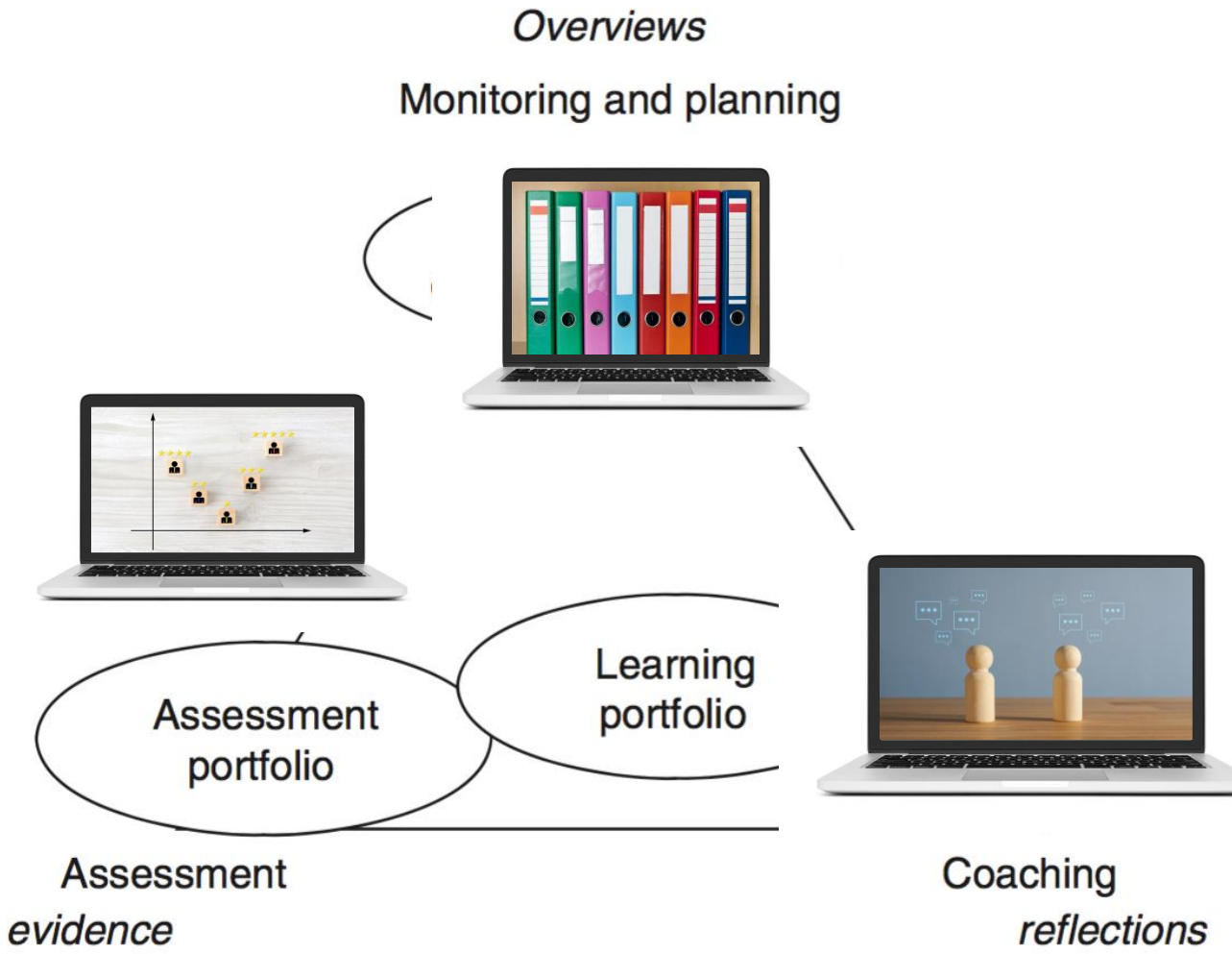
- Competency-framework – national framework
- Assessment/ feedback information for students is collected in an e-portfolio (programmatic assessment)
- Reflective activities in portfolio > Self-regulation of learning
- Competency assessment at the end of the year, high stake decision
- Mentoring: longitudinal, 4 years same mentor

# (e) - PORTFOLIO IN MEDICINE

Overview
- Dossier/ data

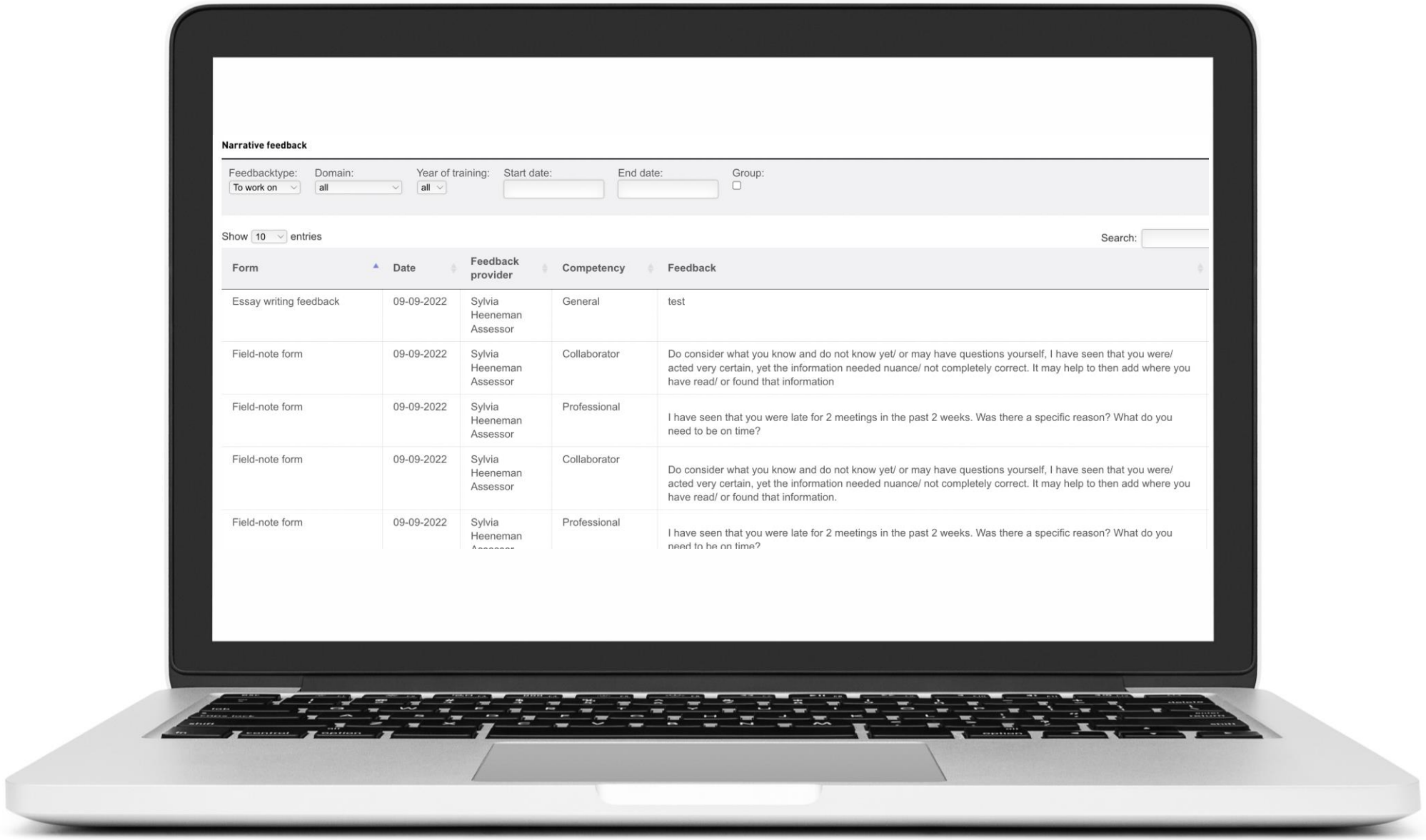
Assessment
- Use data for learning (reflections)
- Use data for decision making (aggregation)

Mentoring
- Feedback loop
- Reflection (using the data)
- Personal and professional development




*Van Tartwijk & Driessen, 2009, Med Teach*

# OVERVIEWS – e.g. PER COMPETENCY



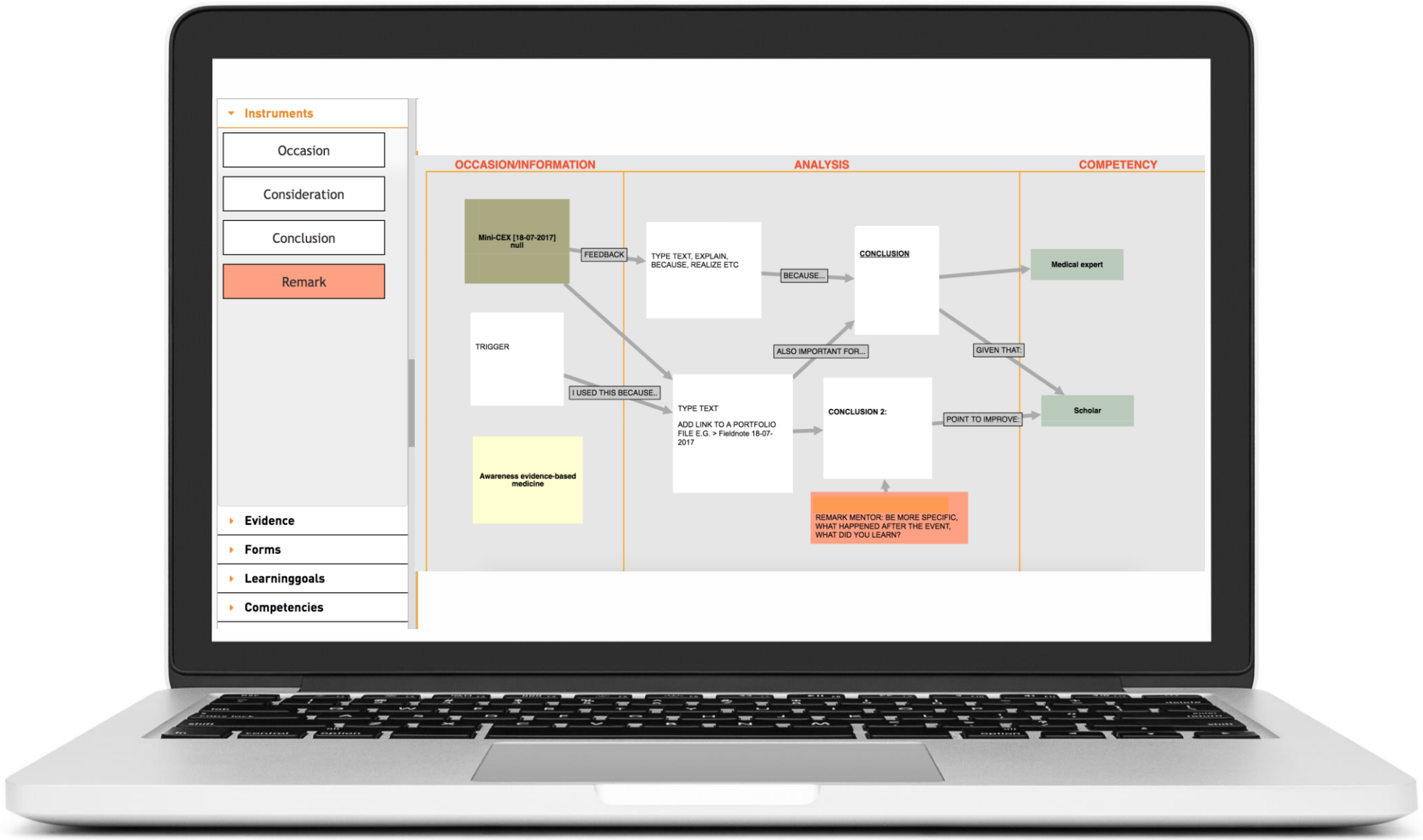
**Narrative feedback**

Feedbacktype: To work on | Domain: all | Year of training: all | Start date: | End date: | Group:

Show 10 entries | Search:

| Form | Date | Feedback provider | Competency | Feedback |
|---|---|---|---|---|
| Essay writing feedback | 09-09-2022 | Sylvia Heeneman Assessor | General | test |
| Field-note form | 09-09-2022 | Sylvia Heeneman Assessor | Collaborator | Do consider what you know and do not know yet/ or may have questions yourself, I have seen that you were/ acted very certain, yet the information needed nuance/ not completely correct. It may help to then add where you have read/ or found that information |
| Field-note form | 09-09-2022 | Sylvia Heeneman Assessor | Professional | I have seen that you were late for 2 meetings in the past 2 weeks. Was there a specific reason? What do you need to be on time? |
| Field-note form | 09-09-2022 | Sylvia Heeneman Assessor | Collaborator | Do consider what you know and do not know yet/ or may have questions yourself, I have seen that you were/ acted very certain, yet the information needed nuance/ not completely correct. It may help to then add where you have read/ or found that information. |
| Field-note form | 09-09-2022 | Sylvia Heeneman Assessor | Professional | I have seen that you were late for 2 meetings in the past 2 weeks. Was there a specific reason? What do you need to be on time? |

# REFLECTIVE PRACTICE–CONCEPT MAPPING

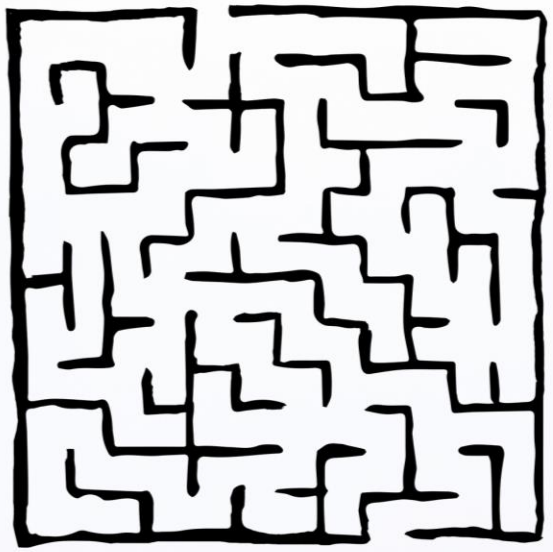


# MASTER IN MEDICINE MENTOR TRAINING

- Yearly mentor training > videos, discussion
- Mentor coordinator
- Buddy system for new mentors
- 5x/ year mentor meeting – specific topics and fostering mentoring network
- 2nd mentor – intermediate and end of year advice (used in highstake decision)
  - generating feedback for the mentors
  - alignment of mentoring processes

# CHALLEGING SITUATIONS

1. Mentee has difficulty translating a specific competency (e.g. health advocate) into learning objectives
2. Reflections by the mentee fall short of depth.
3. The mentee mainly sees the portfolio as an obligation
4. The mentee has problems with planning and time management
5. The results obtained by the mentee for the progress test (=knowledge test) are unsatisfactory
6. The mentee has difficulty finding the right balance between study and private life
7. The learning objectives formulated by the mentee lack specificity
8. The mentee is insecure about assessment/ feedback
9. The mentee has a distinctive personality (e.g. perfectionist, dominant)
10. The mentee has personal problems that affect mentee's studies



# MENTOR TRAINING
# USE OF VIDEO VIGNETTES

- Not to show the good example..
- There are usually multiple perspectives
- Stimulate discussion, see the other perspective (mentor-network)
- Follow up
  - e.g. by practicing the situation with a different perspective during the training
  - or discuss theory of mentor processes, coaching styles, question-techniques in a next mentor meeting

# SOME EXAMPLES

- I-1 – lack of focus due to personal problems
- I-3 – student too busy, work-life balance
- I-6 – career planning, choice post-graduate
- I-7 – deficiencies knowledge/ progress test
- I-8 – deadlines (thesis), setting learning objectives
- I-10 – good progress, time for next step/ challenge?
- II-1 – failed knowledge-test
- II-2 – student is not proactive/ ‘grey mouse’
- II-6 – discussing learning goal (meaningful/ concrete?)
- II-7 – no follow-up learning goal, too busy workfloor)
- II-8 – abundant positive feedback, what to improve (insecurity)
- II-9 – superficial reflections
- II-10 – portfolio is not useful, just extra work
- II-12 – perfectionism, work-life balance
- II-13 – not recognizing certain competencies
- II-14 – recurrent feedback – not that proactive
- II-17 – use of feedback in the portfolio; reluctant

# AT EACH TABLE–
# DISCUSS VIDEO

# AT EACH TABLE – DISCUSS VIDEO


- View video >
- Questions:
  - What would you describe as the problem?
  - Positive – negative aspects of the mentor approach
  - What would you do differently?
- Discuss per table
- Plenary wrap-up


Mentoring is a bidirectional relationship between mentors and mentees which focusses on mentees' professional growth.

# M E N T O R ( I N G )
# T A K E H O M E M E S S A G E S

Mentoring is a dynamic art: *The dynamic interplay between personal beliefs, system design, and faculty development will shape the execution of the mentor role.*

Foster development of mentoring competencies for impactful mentoring: *Mentors can have a critical role in supporting mentees' professional and personal development, closing feedback loops, and promoting self-regulation of learning.*

Context matters: *To shape successful mentoring programs it is important to appreciate and understand the influence of context and design on the outcomes of mentoring programs.*


**PRE–CONFERENCE WORKSHOP**

Supporting effective mentorship:
Strategies and mentor competencies to foster self-regulation of learning by mentees

THANK YOU FOR YOUR ATTENTION!