RESEARCH

Teaching Certificate Program Participants' Perceptions of Mentor-Mentee Relationships

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Objective. To assess teaching certificate program (TCP) participants' perceptions of mentor-mentee relationships.

Methods. A 15-item survey instrument was administered to all 2014-2015 participants of the Indiana Pharmacy Teaching Certificate (IPTeC) program.

Results. One hundred percent of IPTeC program participants (83/83) responded to the survey. The majority of participants indicated that having a professional mentor was either very important (52%) or important (47%) to their professional development and preferred to choose their own professional mentor (53%). Mentor characteristics rated as highly important by mentees included having similar clinical practice interests (82%), having similar research interests (66%), and being available to meet face-to-face (90%). Age, race, and gender of the mentor were not rated by mentees as important.

Conclusion. Teaching certificate program participants place high importance on having a professional mentor. Mentorship of pharmacists completing TCPs should be a priority for current pharmacy faculty members so adequate guidance is available to future pharmacy educators.

Keywords: teaching certificate program, residency training, mentoring, mentor-mentee relationships

INTRODUCTION

The American Association of Colleges of Pharmacy (AACP) Pharmacy Practice Section Task Force on Student Engagement and Involvement, in conjunction with the American Society of Health-Systems Pharmacy (ASHP), released recommendations for pharmacy resident teaching experiences.¹ The American College of Clinical Pharmacy (ACCP) released similar guidelines for pharmacy residents completing postgraduate training.² Both of these documents support the role of a designated teaching mentor to provide regular feedback on teaching experiences, evaluations, and portfolio development. Qualified academic mentors for pharmacists have been defined as faculty members with a minimum of three years of teaching experience, or one year of teaching experience if they have also completed a formalized teaching certificate program; while experiential mentors should have three years of precepting experience.²

Mentorship is commonly defined as a dynamic, reciprocal relationship in a work environment between an advanced career incumbent (ie, the mentor) and a beginner (ie, the protégé) aimed at promoting the development of both individuals.³ Mentorship has a variety of benefits depending on the context of the relationship. In academic medicine, these reciprocal relationships offer the mentee support in career choice, professional advancement, and productivity, and may provide the mentor with personal satisfaction of contributing to a mentee's professional development.³ A systematic review of mentoring in academic medicine found the prevalence of mentorship among medical students and physicians to range from 19% (adolescent medicine faculty members) to 93% (primary care research fellows).³ Additionally, medical school faculty members with mentors are reported to have significantly higher career satisfaction than those without mentors.³

Within the health care professions literature, studies evaluate mentor/mentee relationships among nursing and medical residents, including specialties of internal medicine, family medicine, neurology, general surgery, otolaryngology, and obstetrics and gynecology.³⁻¹⁰ However,

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literature regarding mentor-mentee relationships specific to teaching certificate program (TCP) participants in the field of pharmacy, particularly from the mentee perspective, is limited. Because preparing for a career in academia is typically not incorporated in pharmacy curricula, it is important to provide resources and experience to pharmacists interested in pursuing careers in academic pharmacy. A mentoring relationship provides an avenue for offering guidance, resources, and networking that may benefit career selection and productivity. To enhance the mentoring program within the Indiana Pharmacy Teaching Certificate (IPTeC) program, we conducted a cross-sectional survey of participants to assess their perceptions of the mentor-mentee relationship.

METHODS

A 15-item electronic survey instrument was developed and reviewed by the IPTeC Program Executive Committee. The survey consisted of questions designed to capture demographic information and program participants' perceptions of mentor-mentee relationships. Participants were asked about the importance of having a professional mentor and how they would rate perceived importance of specific characteristics of a professional mentor using a 5-point Likert scale (1=very important to 5=not important). Participants were also given the opportunity to comment using free text about any additional preferences related to having a professional mentor.

In August 2014, an electronic invitation containing a direct hyperlink to the survey instrument was sent to all program participants who were present at the 2014-2015 IPTeC Conference (N=83). Qualtrics Research Suite software (Qualtrics Lab, Provo, UT) was used to design and distribute the survey instrument electronically, as well as maintain confidentiality of all responses. The project was

granted exempt status for human subjects research by the Purdue University and Butler University Investigational Review Boards. All data were analyzed using descriptive statistics. Open-ended responses were reviewed by two investigators who identified general themes.

RESULTS

Eighty-three IPTeC program participants responded to the survey instrument, providing a response rate of 100%. The majority of participants who responded to the survey were completing postgraduate year one (PG1) pharmacy residencies (66/83, 79.5%), followed by postgraduate year two (PG2) pharmacy residencies (7/83, 8%), and fellowship programs (2/83, 2%). Practicing pharmacists serving the role of residency preceptors also responded (8/83, 9.6%), including one residency program director. Having a professional mentor was reported as very important or important by 99% (82/83) of the program participants. Fifty-three percent (44/83) of respondents reported that they would prefer to choose their own professional mentor, rather than having one assigned (9/83, 11%), with 36% (30/83) indicating no preference. Approximately half of the respondents (41/83, 49%) reported they did not currently have a professional mentor.

Of the respondents who did report having a professional mentor, 19% (8/42) indicated having one mentor, with the rest reporting two or more professional mentors. The majority of participants (57/83, 69%) indicated they would prefer to meet with their mentor on a monthly basis. Seventy-three percent (61/83) of participants indicated that the age of their professional mentor did not matter. However, 19% (16/83) noted that they would prefer their professional mentor to be no more than 10 years older than they were. Participants' perceptions of the importance of specific characteristics of a preferred professional mentor are detailed in Table 1.

Table 1. Program Participants Perceptions of the Importance^a of Professional Mentor Characteristics (n=83)

Statement: The mentor...	High Importance, n (%) ^b	Neutral, n (%)	Low or No Importance, n (%) ^c
Is a nationally-recognized expert in his/her field.	37 (44.6)	30 (36.1)	16 (19.3)
Is the same gender as I am.	6 (7.2)	20 (24.1)	57 (68.7)
Is the same race as I am.	2 (2.4)	13 (15.7)	68 (81.9)
Has similar clinical practice interests as I have.	68 (81.9)	10 (12.1)	5 (6)
Is a member of my social network.	7 (8.4)	32 (38.6)	44 (53)
Is older than I am.	44 (53)	19 (22.9)	20 (24.1)
Has similar research interests as I have.	55 (66.3)	22 (26.5)	6 (7.2)
Is available for face-to-face contact.	75 (90.4)	7 (8.4)	1 (1.2)
Is available for virtual contact.	70 (84.4)	9 (10.8)	4 (4.8)
Is affiliated with the same institution as I am.	24 (28.9)	30 (36.1)	29 (35)

^aBased on a 5-point Likert scale (1=very important, 2=important, 3=neutral, 4=low importance, and 5=not important)

^bHigh importance=very important + important

^cLow or no importance=low importance + not important

Characteristics rated as very important or important by the majority of participants included having similar clinical practice interests, having similar research interests, being available to meet face-to-face, and being available for virtual contact. Characteristics rated as low importance or not important by the majority of participants included having a mentor of the same gender or race and having a member who was in the same social network. Examples of additional characteristics that respondents added using free text are highlighted in Appendix 1.

DISCUSSION

Although much research has been conducted regarding the importance and implementation of mentoring programs for professional development of pharmacy faculty members,¹¹⁻¹⁵ limited research assesses postgraduate mentees' perspective on these relationships. This is the first study to assess pharmacy TCP participants' perceptions of the importance of mentor-mentee relationships. Almost all participants indicated that having a professional mentor was important or very important, which underscores the significance of establishing this mutually beneficial relationship. Although the majority of participants were PG1 pharmacy residents, practicing pharmacists serving as preceptors also participated, emphasizing the continued importance of establishing successful mentor-mentee relationships throughout one's pharmacy career.

More than half of the participants indicated they preferred to choose their own professional mentor. Although medical resident literature indicates greater mentee satisfaction when mentees are able to choose their own mentor,^{16,17} in our experience, allowing participants to choose their own mentor may not always work. Popular mentors typically receive multiple requests and may not have time to adequately provide guidance to multiple mentees. Furthermore, participants who relocate to a region may not be familiar with potential mentors available and may feel uncomfortable approaching them. In these cases, IPTeC program coordinators provide a list of potential mentors to align mentees with a mentor who have common practice and research interests. Of note, the majority of our participants preferred to meet with their mentor monthly, which may not be feasible and may prove especially difficult for mentors with multiple mentees. In these cases, we encourage virtual correspondence.

The IPTeC has been offered to pharmacy residents, fellows, and preceptors for the last 12 years.¹⁸ In 2011, a mentoring program was incorporated, in which all participants choose a teaching mentor. An electronic list of potential mentors is posted on the program website at the beginning of the academic year. The list includes faculty members who have served as mentors in the past or have

expressed interest in mentoring IPTeC participants. Participants may also choose mentors who are not on the list. It is the participants' responsibility to contact the mentor. IPTeC coordinators provide assistance to participants who have difficulty contacting a mentor.

A description of the expectations for mentors in the IPTeC program is listed in Appendix 2. These expectations parallel the recommendations provided by AACP, ASHP, and ACCP.^{2,3} At minimum, mentors are required to complete an electronic midpoint evaluation designed to document participants' progress towards completion of the program requirements. In some cases, mentors choose instead to schedule regular meetings to provide verbal feedback and nurture the mentor-mentee relationship. Furthermore, some residency programs have developed more formalized PharmAcademic (McCreadie Group, Ann Arbor, MI) evaluations to evaluate and encourage positive outcomes from the mentee-mentor relationship.

Ideally, pharmacy faculty members should serve as the mentors to TCP participants; however, an insufficient number of local faculty members are available to support the growing number of IPTeC participants each year. Several local faculty members serve as mentors for several residents. This presents a challenge likely not unique to our program and will continue to persist with expansion of residency programs. Potential solutions for increasing the number of faculty mentors include reaching out to neighboring colleges and schools of pharmacy for additional faculty mentors and considering use of faculty mentors from other health professions (eg, medicine, nursing). As the program continues to grow, the IPTeC Program Executive Committee continues to seek out additional qualified individuals to serve as teaching mentors.

Quality mentor/mentee relationships can often be difficult to manage and maintain because of busy work schedules and time restrictions of each individual. Hsu and colleagues reported implementation of a formalized mentoring program for otolaryngology residents and noted that successful implementation was often limited by time restrictions of the resident and faculty member, by lack of structure, and by loose monitoring of the relationship.⁶ Initial challenges with the IPTeC mentor program included insufficient communication between IPTeC participants and the committee regarding the frequency or content of mentor-mentee interactions. As a result, the committee implemented two liaison positions. Liaisons are selected from among the current IPTeC participants following an application process.

The IPTeC liaisons are responsible for maintaining regular communication with IPTeC participants, developing a monthly IPTeC newsletter, and providing additional structure and consistency with mentor-mentee

relationships. Liaisons are encouraged to attend all committee meetings, during which the liaisons may share concerns of IPTeC participants. Additionally, a pedagogical seminar titled “Successful Mentor-Mentee Relationships” was implemented during the 2-day conference, which defined the roles of mentors and mentees and described ways that IPTeC participants could play an active role in the mentor-mentee relationship. This seminar was provided after the participants completed the survey instrument.

Although an excellent response rate (100%) was achieved, our results regarding the importance of mentor-mentee relationships may have been inflated by having residency preceptors and a residency director in our sample. Additionally, perceptions were measured near the beginning of the residency year and may not reflect true perception as time progresses, especially as a large number of participants indicated that they did not previously have a mentor. Regardless of these limitations, having a professional mentor was reported as important or very important by 99% of respondents.

Based on the results of the survey, the IPTeC Program Executive Committee plans to enhance the mentor program by implementing changes in the 2015-2016 year. First, the list of potential mentors provided to the participants at the beginning of the academic year will include characteristics such as clinical practice interests, research interests, and availability to meet face-to-face and/or virtually. Participants will continue to choose their own professional mentor, rather than having one assigned. Secondly, because most respondents reported that they would prefer to meet with their mentor on a monthly basis, a method for documenting monthly meetings will be implemented. Finally, additional feedback about the mentor-mentee relationships will be sought at the end-of-year event to seek insight after participants complete the program. The committee plans to continue evaluation of the mentor program to facilitate effective mentor-mentee relationships.

CONCLUSION

The results of the study provide novel insight for teaching certificate program directors charged with implementing a mentoring program with a TCP. Teaching certificate program participants placed high importance on having a professional mentor. Mentorship of pharmacists completing TCPs should be a priority for pharmacy faculty members to provide adequate guidance for future pharmacy educators.

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Appendix 1. Additional Characteristics Noted as Important for Professional Mentors From Open-Ended Responses

1. Approachable, honest, innovative, well-connected, balanced, and passionate
2. Personable, easy to talk to, knowledgeable about their field
3. Actually want to mentor (ie, not forced or “encouraged” by someone else)
4. Have a genuine interest in me and my professional interests
5. Willing to answer questions, be patient, and is very knowledgeable
6. Open to allowing me to shadow/gain experience in their practice field
7. Well connected to many professionals in pharmacy
8. Have a similar career path as the one I desire and not much older than me so that their experiences are relatable to the ones I will have
9. Have some similar interests outside of pharmacy
10. Willing to teaching me through their own successes and failures
11. Passionate about the profession and area of practice
12. Trained evaluators, or have had years of experience in giving constructive feedback; willing to mentor on an as needed basis, or during nontraditional hours

Appendix 2. Indiana Pharmacy Teaching Certificate (IPTeC) Program Mentor Information

Mentors should have the following characteristics:

- Experience as pharmacy educators through didactic teaching, examination question writing, and significant experience precepting pharmacy students
- Involved in the commitment of IPTeC participant learning and development
- Previous participation in a teaching certificate program

Responsibilities of mentors may include:

- Providing feedback for lecture handouts, case development, and examination questions written by the IPTeC participant
- Reviewing and assessing the teaching portfolio, including the teaching philosophy
- Offering professional guidance and insight into career development