



## **Proposed BOS mentoring scheme for new consultants**

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The step up from trainee to Consultant can be daunting. Mentoring programmes are a well-established way of facilitating that transition through discussion with a more senior Consultant in an informal setting. The following aspects can be particularly challenging for the new Consultant:

- No clinical supervision anymore. In the latter stages of training, supervision may just mean the Consultant agreeing with a plan but when this safety net is removed it requires a swift period of adjustment
- Expected workload and matching the job plan to this
- Providing leadership within the team and managing relationships within the team in that new role. Any conflicts can be particularly challenging
- The interaction with managers and how the dynamic of this relationship works. Balancing managerial priorities with priorities from a clinical perspective

Although a mentorship scheme would apply mostly to newly qualified Consultants, it can also apply to more experienced Consultants who are moving to a new area.

Most Trusts will run mentoring schemes for new Consultants. This will usually marry up the new Consultant with a mentor from a different specialty and usually from a different division. This has advantages as it allows the mentor to approach the role from an entirely independent background but to still bring the benefit of experience of working for the same Trust.

However, Orthodontics is an unusual specialty from the point of view of the longitudinal care and the fact it is a dental rather than a medical specialty. There are specific challenges facing a Consultant Orthodontist that a medical Consultant will find difficult to advise on. For those new Consultants working alongside Consultant Orthodontic colleagues in the same department, discussions will be had daily which provide advice and help. However, there is a benefit in setting up a scheme where new Consultants can access mentors who are Orthodontists but based in a different hospital elsewhere in the country. This would particularly be of benefit in smaller departments or in departments where there is some conflict between staff. This is not a scheme which a Trust could provide and the BOS is well placed to be able to offer this service.

### **Framework for proposed scheme**

The scheme must be voluntary with respect to both the mentee and mentor. Confidentiality is also essential.

The mentor should have at least three years' experience in post. They should be trained in mentorship (can be accessed via the Trust, Royal College or Deanery).

Each mentor should have no more than two mentees to allow sufficient time to be spent. Considering the number of new appointments to Consultant posts per year, the BOS should hold a bank of around 10 mentors. Emails could be sent out to the Consultant group looking for interested candidates in order to recruit. Ideally, job types should be matched between mentor and mentee e.g. a newly appointed cleft Consultant Orthodontist should be matched with a cleft Consultant Orthodontist as a mentor.

The mentorship can be initiated by one point of contact within the BOS which all potential mentees contact. This central figure within the BOS then passes on the mentees details to the selected mentor from the mentor list. The mentor then makes contact with the mentee to initiate the mentorship.

Ideally meetings would be face to face with the mentor and mentee but this may be limited by geography. If the mentee is new to the area then a mentor elsewhere in the region would be beneficial. If the mentee trained within the locality then a mentor outside the region could be offered. In this case meetings will need to be either by phone or video conferencing.

Meetings should last around 30-60 minutes with meetings happening roughly every 4-8 weeks. The mentorship should be reviewed after 2-3 meetings to ensure it is working well for both parties. The mentorship can be terminated at this stage if needed.

Usually the mentorship should last around 1-1.5 years although could be less depending on the mentee. There should be a formal end point to the mentorship at which point a review of learning takes place. Meetings can carry on on an informal and ad hoc basis afterwards if desired by mentor and mentee.

At the start of the mentorship, there should be a signed agreement by both the mentor and mentee laying out the terms of the mentorship. This should be held with the mentee with a copy sent to the mentor. This agreement should include the following: goals, an expectation of how these will be achieved, areas of discussion to avoid, frequency and duration of meetings, method of communication and duration of relationship. The goals laid out in this agreement should be reviewed throughout the mentorship period.

#### Long term vacancies

A more hands on approach may be beneficial for some posts which have had a long-term vacancy. Ideally an experienced neighbouring Consultant could run PAs at the vacant unit at the same time as the newly appointed Consultant to have a closer working relationship in the short term. However, this would need to be decided at a local level depending on availability and geography in the region.

#### Co-mentoring service

In addition, the BOS could consider holding a list of recently appointed consultants. This would then allow new Consultants to be put in touch with one another. In this co-mentorship arrangement, it allows each mentee to act as a sounding board for one another which could create an additional support network.