Mentored Clinical Research Training Program

Mentoring Handbook

June 2006

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* *The Mentoring Handbook is a work in progress. Please send your suggestions, comments, and ideas for improvement to Glynis Butler-Stone (glynis.butler-stone@ucdmc.ucdavis.edu) or 916.703.9181.*

MENTORING PLAN

MENTOR/MENTEE ROLES AND RESPONSIBILITIES

Responsibilities of Mentor

- provide assessment and feedback regarding accomplishments in mentored research
- discuss coursework progress (including core courses, workshops, seminars, labs)
- identify gaps in training and skills, and design strategies to close these gaps
- plan “next steps” in clinical research career development
  - preparation of grants / manuscripts
  - publication of research
  - local and national presentations
- provide coaching for career direction
- assist with networking among professional colleagues

Responsibilities of Mentee (Scholar)

- Primary responsibility for progress and development in MCRTP program
  - understanding MCRTP requirements,
  - managing and meeting requirements,
  - establishing and maintaining productive relationship with Mentor, Mini-Advisory Committee and other MCRTP colleagues
- Actively engage in proposed mentored clinical research
  - complete quarterly scientific/technical reports
  - work towards grant application and research publication
  - seek out clinical career development opportunities
- Clarify mentorship needs and set priorities for accomplishing goals as noted in Mentorship Agreement
- Provide the mentor with feedback

MENTORSHIP AGREEMENT

We have agreed to work together as Mentor and Mentee (Scholar) in a Mentoring relationship as part of the Mentored Clinical Research Training Program (MCRTP). We have briefly outlined our mentorship plan following the guidelines of the MCRTP and agree to notify the Program Director if this agreement changes in any significant way.

Mentorship Begins: Mentorship Ends:

Mentorship: List goals and outcomes of the mentorship (i.e., research, professional and career development needs)

Plan: Define mutual goals for the mentorship. How do you plan to accomplish these goals? Make sure goals are both specific and measurable so that you can clearly evaluate your progress during the mentorship.

Expectation(s): Clarify your expectation(s) of the mentorship. What do you expect of the mentoring relationship? Make sure expectations are realistic.

Meetings: Set meeting frequency and location. Regular meetings are important to the mentoring process. How often do you plan to meet? (minimum quarterly) Who is responsible for scheduling meetings? Either set up a regular time to meet (such as the first and third Thursday of each month), or set the next meeting at the conclusion of this meeting. Be flexible, but insistent about meeting.

Contact Information:

Mentor name:	Mentee (Scholar) name:
Phone:	Phone:
Email:	Email:
Pager:	Pager:

MENTORING GENERAL GUIDELINES

This guide is intended as a resource to assist mentors and mentees in assessing mentoring needs and developing the mentoring relationship. Given that mentoring is a relationship, it requires strong commitment from both the mentor and the mentee. This guide is meant as an aid to foster such commitment.

1. Mentors and mentees should:

- Negotiate a mentoring agreement that:
    - Establishes the roles of the mentor and the mentee
    - Discusses expectations both mentor and mentee
    - Transforms the mentee's goals into a working plan (see sample worksheet)
    - Sets short- and long-term goals for the mentee's career development
    - Discusses the duration of the relationship, including a realistic and flexible stop date and a no-fault termination if appropriate
- Recognize that the mentoring relationship is mutually rewarding and a reciprocal relationship
- Provide trusted and confidential feedback to each other on agreed upon areas
- Respect time limits available for mentoring

2. Mentors should:

- Direct the mentee to appropriate channels for resolving and advancing professional issues
- Advocate for the mentee and provide professional exposure and guidance without being authoritarian
- Alert mentees of appropriate career opportunities in education, skills workshops, grant funding, etc.
- Help mentee establish professional networks
- Help monitor the academic process of the mentee
- Be open to the mentee's concerns about performance, interactions with colleagues, and the workplace environment (e.g. how to evaluate expectations of others, when to say "No")
- Be available and accessible to the mentee- consider setting up a system for regular or periodic communication and interchange
- Offer valuable advise in areas important to the mentee's career development
- Recognize the mentees independence while providing guidance, and be generous with providing mentee credit for contributions
- Ensure a positive and supportive professional environment for the mentee
- Ask mentee what he/she expects from the mentoring relationship

3. Mentees should:

- Be willing to assume primary responsibility for his/her academic growth and development (understanding academic values, managing an academic career, establishing and maintaining productive work relationships with colleagues)
- Actively seek out career development opportunities and develop them with the mentor
- Develop career autonomy
- Take the initiative in identifying possible mentors recognizing that more than one mentor may be needed at different times or for different functions
- Clarify his/her needs vis a vis the mentor and set priorities for accomplishing them
- Communicate career development goals to mentor and develop these with help of mentor
- Provide the mentor with feedback

4. Approaching and Selecting a Mentor:

- Be as specific as possible in stating your needs, skills you want help with, and time commitment you expect (e.g., help in understanding the promotion process, grant writing, networking within the field, introduction to potential collaborators, setting priorities, time management, being effective in a group or committee, etc.)
- Interview a number of potential mentors to find the right working relationship for you. Recognize that one individual may not be able to fulfill all roles and more than one mentor may be needed.
- State implicitly and explicitly that as the reciprocal relationship develops you will contribute to the mentoring relationship and recognize the contributions of the mentor to your career development.
- Is mentor available, successful, approachable, well-connected within and outside the institution, and willing to invest the time you need.

Sample Worksheet For Mentor / Mentee Career Development Planning

Expectations	**What Mentee Can Do**	**What Mentor Can Do**
Improve communication	Be open to feedback	Provide honest feedback
	Observe mentor in action	Serve as a role model
Organizational involvement at higher levels	Volunteer to help with a project	Enlist mentee to help with a project
	Help with a presentation at a meeting	Invite mentee to executive meetings
		Introduce mentee to others at an academic meeting
Improve grant writing	Obtain information on and read potential grants	Refer mentee to a grant writing seminar
	Prepare grant application	Critique the grant and provide basic didactics

NIH K AWARD RESOURCES

K Kiosk - Information about NIH Career Development Awards
http://grants2.nih.gov/training/careerdevelopmentawards.htm

- **Career Award Wizard** - Helps you select the right career award
- **Visual Guide to NIH Career Development Awards**
  - For individuals with a research doctorate
  - For individuals with a health-professional doctorate

- **Career Award Data and Administrative Information**
  - Funded Career Development Awards
  - Career Award Application Success Rates

Program	Description
K01	Mentored Research Scientist Development Award Career development in a new area of research. 3-5 yrs; Salary determined by the sponsoring Institute. International Research Scientist Development K01 Award (IRSDA) Provides US scientists with the opportunity to embark/enhance research careers related to global health. Mentored Career Development Award to Promote Faculty Diversity in Biomedical Research (K01) - NHLBI (RFA-HL-05-015) Mentored Career Award for Faculty at Minority Institutions (K01) - NHLBI (RFA-HL-05-015)
K02	Independent Scientist Award Develop the career of the funded scientist. 5 yrs; 75% effort.
K05	Senior Scientist Award For outstanding scientists with a sustained level of high productivity. 5 yrs; 75% effort; Funding determined by the sponsoring Institute
K07	Academic Career Award Developmental/Leadership in academic instruction, research, administration. 2-5 yrs, 25-75% effort; requires institutional sponsorship.
K08	Mentored Clinical Scientist Development Award Development of the independent clinical research scientist. 3-5 yrs; 75% effort.
K12	Mentored Clinical Scientist Development Program Award Support to an institution for the development of independent clinical scientists.

	5 yrs; 75% effort; initiated by the educational institution. • NCI • NCRR • NEI • NIA • NICHD • NIDA • NIDCR • NINDS
K18	Career Enhancement Award for Stem Cell Research Supports full-time or part-time training in the use of human or animal embryonic, adult, or cord blood stem cells. Usually 6 months to 1 year (up to 2 years allowed) full or part-time. NIDDK, NIAAA, NIAID, NHLBI, and NINR participate.
K22	Career Transition Award Support to an individual postdoctoral fellow in transition to a faculty position. • NCI • NEI • NHGRI • NHLBI • NIAID • NIAMS • NICHD • NIDA • NIDCR • NIDDK • NIEHS • NIMH • NINDS • NINR • NLM
K23	Mentored Patient-Oriented Research Career Development Award Development of the independent research scientist in the clinical arena. 3-5 yrs, 75% commitment.
K24	Midcareer Investigator Award In Patient-Oriented Research Development of clinical mentors conducting funded research. 3-5 years, 25 to 50% effort
K25	Mentored Quantitative Research Development Award (K25) To foster interdisciplinary collaboration in biomedical research by supporting career development experiences for scientists with quantitative and engineering backgrounds. 3-5 yrs; 75% effort
K26	Midcareer Investigator Award In Mouse Pathobiology Research Provides support for established pathobiologists who wish to devote up to 50 percent of their effort to research and mentoring in the field of mouse pathobiology. 3 to 5 years, renewable, 25 to 50% effort

K30	Clinical Research Curriculum Development Institutional award for development of a clinical research curriculum. 5 yrs; up to $200,000 per year.
K99/R00	NIH Pathway to Independence (PI) Award (K99/R00) The NIH Pathway to Independence Award provides an opportunity for promising postdoctoral scientists to receive both mentored and independent research support from the same award. The initial phase will provide 1-2 years of mentored support for highly promising, postdoctoral research scientists followed by up to 3 years of independent support contingent on securing an independent research position. Award recipients will be expected to compete successfully for independent R01 support from the NIH during the career transition award period. For more information, see the New Investigators Program web site. • The total cost per year for the mentored phase is up to $90,000. • The total cost per year of the independent investigator phase is up to $249,000.

NIH RESOURCES FOR NEW INVESTIGATORS

Statement of Commitment to New Investigators
http://grants2.nih.gov/grants/new_investigators/

New investigators are the innovators of the future – they bring fresh ideas and technologies to existing biomedical research problems, and they pioneer new areas of investigation. Entry of new investigators into the ranks of independent, NIH-funded researchers is essential to the health of this country's biomedical research enterprise. NIH's interest in the training and research funding of new investigators is understandably deep and longstanding. Over the years, special programs to assist new investigators in obtaining independent research funding have been created – for example the New Investigator Research Award (NIRA or R23), in 1977, and the First Independent Research Support and Transition (FIRST or R29) Award, which superseded the NIRA in 1986. Both of these special programs were discontinued because neither was able to significantly and positively affect the overall ability of new investigators to obtain independent research support (see Report of the Working Group on New Investigators). In spite of these and other efforts, the average age at which an investigator first obtains R01 funding has increased by five to six years (to 42 for PhD degree holders and 44 for MD and MD/PhD degree holders). In addition, although the overall numbers of new R01 investigators has increased, the proportion of R01 grants going to new investigators has remained at approximately 6% of the total R01s awarded throughout the doubling of the NIH budget.

Currently, NIH encourages new investigators to self-identify by checking a box on the face page of their R01 applications so that they can be given special consideration. Peer reviewers are instructed to focus more on the proposed approach than on the track record, and to expect less preliminary data than would be provided by an established investigator. In addition, many NIH institutes and centers give new investigators special consideration in their selection for funding, and in some cases provide five years of support instead of the four that is the NIH average duration for a grant.

We at NIH remain committed to identifying and attracting new independent biomedical researchers and will continue to explore novel ways to accomplish this. However, we cannot do it alone. Institutions – our partners in this venture - must continue to look for ways to reduce the duration of graduate and postdoctoral training and find new ways to enable new investigators to compete successfully for extramural funding. I would welcome your ideas in this regard.

Norka Ruiz Bravo, PhD, Deputy Director for Extramural Research, NIH

NIH Loan Repayment Programs
hhtp://www.lrp.nih.gov/about/eligibility.htm

NIH Loan Repayment Programs (LRP) are a vital component of our nation's efforts to attract health professional to careers in clinical, pediatric, health disparity, or contraceptive and infertility research.

In exchange for a two or three year (for Intramural General Research) commitment to your research career, NIH will repay up to $35,000 per year of your qualified educational debt. In addition, the NIH will make corresponding Federal tax payments for credit to your IRS tax account at the rate of 39% of each loan repayment to cover your increased Federal taxes. The NIH may also reimburse any increased state or local taxes and/or additional increased Federal taxes (where the Federal tax payments were not sufficient to fully cover your increased Federal taxes) that you incur as a result of your LRP benefits.

Interested?

Here's what you need before you apply: U.S. citizenship (or national or permanent resident status), a doctorial-level degree, and educational debt equal to at least 20% of your base salary.

Here's what NIH will require of you: For two years (at least 20 hours weekly based on a 40 hour week) you must conduct qualified research at a nonprofit institution, funded by a domestic nonprofit or US government (Federal, state or local) entity.

LRP's are competitive. If your application is accepted and you enter the program, NIH will repay half of your qualified repayable educational debt in two years (up to $70,000). In addition, you can compete for additional loan repayments to repay your remaining debt.

5 Quick Checks for LRP Eligibility

Here are the basic eligibility requirements for NIH loan repayment programs:

- Doctoral-level degree
- Government research funding (Federal, state, or local) or domestic nonprofit research funding
- Student loan debt equal to at least 20% of annual salary
- U.S. citizenship or permanent residency
- Non-Federal government job

NIH provides the entire LRP application on line, plus a Help Line is available to answer your questions.

MENTORING MEETINGS

MENTORING WORKSHEET

Initial Meeting

Date:

Purpose:

The main purpose of this initial meeting is to get acquainted with each other and define a mentoring plan using the mentorship agreement form. A carefully planned mentorship agreement will set the stage for a successful mentoring relationship.

Goals for this meeting:

1.) Get acquainted
   a. Review CV
   b. Hobbies, Research Background
   c. Contact Information

2.) Mentorship Agreement
   a. Discuss mentor/mentee expectations
   b. Begin to define a mentorship plan (including mentor/mentee responsibilities and expectations)

Next Steps:

3.) Set agenda and goals for next meeting
   a. Definitive mentorship plan
   b. Begin review of research proposal

4.) Set next meeting date and location
   a. If you are unable to schedule at this moment, determine who will take the initiative to schedule the next meeting.

Tip:

* Regularly scheduled meetings are strongly recommended, at least for the first few months, in order to establish a solid mentoring relationship. After the first few months, feel free to individualize. Scheduling time that is convenient can be difficult. Make an effort to commit to protected mentoring time. It can be as valuable as any other academic activity in which either mentor/mentee participates. If at all possible, avoid being interrupted during your meetings, and avoid scheduling meetings at times when you know you will be preoccupied or rushed.

MENTORING MEETING WORKSHEET

Meeting #____

Date:

Review/Update:
(Briefly review goals and desired outcomes from the last meeting. Follow up on goals from previous meeting and any outstanding discussion items.)

Goal #1 _____
☐ Completed
☐ On-going (State progress. What are the obstacles? What resources can be applied?)

Goal #2 _____
☐ Completed
☐ On-going (State progress. What are the obstacles? What resources can be applied?)

Goal #3 _____
☐ Completed
☐ On-going (State progress. What are the obstacles? What resources can be applied?)

Status Report/Update:
Mentor/Mentee discussion of any new issues or concerns that have arisen since the last meeting. Mentee may offer a brief research status update. Progress to date and new goals for continued progress. Mentor/Mentee review of pertinent literature, mentee research proposal and/or grant application.

Discussed Item #1_____

Discussed Item #2 _____

Next Steps:

5.) Items to complete prior to next meeting

6.) Next meeting date, time, and location

CALENDAR 2006

Link to UC Davis academic calendar: **http://www.ucdavis.edu/calendar.html**

January 2006

Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

February 2006

Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28				

March 2006

Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

April 2006

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						1
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23	24	25	26	27	28	29
30						

May 2006

Su	Mo	Tu	We	Th	Fr	Sa
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14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31			

June 2006

Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	

July 2006

Su	Mo	Tu	We	Th	Fr	Sa
						1
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9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30	31					

August 2006

Su	Mo	Tu	We	Th	Fr	Sa
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

September 2006

Su	Mo	Tu	We	Th	Fr	Sa
					1	2
3	4	5	6	7	8	9
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17	18	19	20	21	22	23
24	25	26	27	28	29	30

October 2006

Su	Mo	Tu	We	Th	Fr	Sa
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

November 2006

Su	Mo	Tu	We	Th	Fr	Sa
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30		

December 2006

Su	Mo	Tu	We	Th	Fr	Sa
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

MINI-ADVISORY COMMITTEE

MINI-ADVISORY COMMITTEE SHEET

Members:

Mentor: _____

Department Chair (or designee):_____

Member of the GCLR Graduate Group Faculty:_____

Purpose:

The purpose of the Mini-Advisory Committee (MAC) is to enhance and expand the clinical research mentorship component of the MCRTP. The MAC will augment the guidance of the research mentor and help the MCRTP scholar choose the appropriate program curriculum components that best serve the individual's clinical research and career goal needs.

The Mini-Advisory Committee will meet quarterly with the MCRTP scholar to review the scholar's curriculum progress, set checkpoints and completion dates, and evaluate quarterly scientific / technical reports submitted by the scholar as well as the career development plan. The MAC provides feedback on the scholars overall progress, and helps the GCLR Graduate Group determine when a scholar has successfully completed all MCRTP requirements.

The instruments used to gauge scholar progress will include:

- Quarterly scientific / technical reports completed by scholars
- Peer evaluations of scholar skills
- Traditional classroom assessment of courses (using existing or modified instruments)
- Evaluations from workshops, seminars, and retreats
- Scholar self assessments: self-rating of skills, rating of institutional support / capacity for clinical research

The Mini-Advisory Committee (MAC) will work directly with the MCRTP scholar to resolve programmatic issues, mentor relationship concerns, time management constraints, workload balance, and retention issues. If necessary, tutorials can be arranged for particularly difficult course material. When the course and research workload are overwhelming, the MAC may assist in the design of a program extension.

Meetings:

Quarterly Meetings

REPORTS

REPORTS

Quarterly Progress Report(s):

Each MCRTP scholar is required to submit a quarterly progress report to their respective Mentor(s) and Mini-Advisory Committee (MAC). The Mentor and MAC will review the report and offer pertinent research and career development feedback based on the scholar's research and career development plan. After the Mentor and MAC review, the scholar will submit the final report to the MCRTP Program Representative.

The quarterly reports function as an assessment tool and track record of the scholar's progress during the Mentored Clinical Research Training Program. The reports should contain:

- a scientific and technical assessment of research progress over the period
- milestones and checkpoints for future progress assessment
- current progress in the scholar's clinical research career development plan. This section of the report should assess both short and long term goals, e.g. progress on grant submission, publications, presentations, collaborative cohort development, etc.
- scholar's MCRTP course work, workshop and seminar completion status
  (See requested format on page 18)

These progress reports will allow the Mentor and MAC to review the scholar's curriculum progress, set checkpoints and completion dates, evaluate research progress, and assess milestones of the career development plan. The report will also be used to help determine when a scholar has successfully completed all MCRTP requirements.

MINI ADVISORY COMMITTEE (MAC)
QUARTERLY PROGRESS REPORT

MCRTP Scholar: _____

Date: _____

Research Progress:

Milestones and Checkpoints:

Career Development:

Publications/Presentations:

Grant Submissions/ Awards:

MCRTP Coursework:

MAC Reviewer comments:

We have reviewed and discussed the scholar's quarterly progress report.
Please sign below.

1._____
Name Date

2._____
Name Date

3._____
Name Date

Please complete the entire form and return to Glynis Butler-Stone via email, glynis.butler-stone@ucdmc.ucdavis.edu , or campus mail to CRISP Building, 1469. Questions call (916) 703-9181.

Mentored Clinical Research Training Program
Seminar/ Workshop Reporting Form

Seminars: Expected to attend 20 seminars throughout the 2-year curriculum.

Workshops: Expected to attend 8 throughout the 2-year curriculum.

Please complete and turn in this form for each seminar and workshop attended.
A separate form is required for each event attended.

Name: _____

Please select one: _____Workshop ____Seminar

Date and time of event: _____

Event Title: _____

Event facilitator(s)/presenter(s):_____

List two things learned from the workshop/seminar: _____

_____

_____

_____

_____

_____

How does this workshop/seminar relate to your research goals? _____

_____

_____

_____

_____

_____

Please complete the entire form and return to Glynis Butler-Stone via email, glynis.butler-stone@ucdmc.ucdavis.edu , or campus mail to CRISP Building, 1469.
Questions call (916) 703-9181.

RESEARCH PLAN

RESEARCH PLAN

This area is designated for scholar research plan.

CURRICULUM VITAE

CURRICULUM VITAE

This area is designated for scholar CV.

CAREER PLAN

INDIVIDUAL DEVELOPMENT PLAN

1. **Name**_____

2. **Date**_____

3. **Long-range Goals**
   It is recommended that faculty complete a self-appraisal to assist in determining personal and long-range career goals prior to completing an Individual Development Plan.

   - **Identify Career Track**
     - ☐ **Ladder Rank**
     - ☐ In-Residence
     - ☐ **Adjunct**
     - ☐ Clinical X
     - ☐ Salaried Clinical

   - **Identify Terminal Academic Rank**
     - ☐ **Assistant**
     - ☐ **Associate**
     - ☐ Professor

   - **Identify Mentor(s)**_____

   - **Identify Long-range Goals**

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Reflection/Resources

This side bar is designed to prompt self-analysis associated with various components of the IDP. When you see a "♪" it signals a reflection opportunity.

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Long Term Goals

Having difficulty thinking about these goals – consider:

- *Why did you decide to work at a medical school? What did you hope to accomplish?*
- *You're about to go up for promotion, what are the accomplishments and/or activities that you want your chair to be able to write effusively about?*

4. **Distribution of Areas of Effort (Definitions)**
   There are six central areas of effort to which faculty mainly direct their activities:

   - ***Education (Teaching/Scholarly Activity)*** **–**student and/or resident teaching, student advising, CME/curriculum teaching/involvement, new course development,
   - ***Research and Other Scholarly Activity*** – conducting basic science and/or clinical research, presentations and publications, funding and grant support and application, copyrights and patents, editing, and peer review
   - ***Patient Care (Clinical Activities)*** **–** direct patient care, chart reviews, related clinical activities, clinical budget performance
   - ***Administration*** **–** participation or leadership in governance of the unit, department, program, school, personnel management, recruitment
   - ***Self Development*** **–** training activities (CME training, earning advanced degrees, preparing for certification/re-certification, participation in professional academic associations or societies, consulting in one's field)
   - ***Service*** **–** committee membership, community outreach and service

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To accomplish your long-term goals, what should be the major areas of energy/focus?

List Your Current Time Distribution by Area estimating % of duties and approximation of hours

Outline the estimated time spent in areas of effort

Area	% of Total Duties	# Hrs/Week
Education		
• Medical Student		
• Resident		
• Gradate Student		
• CME/Other		
Research / Scholarly Activity		
Patient Care		
Administration		
Self-Development		
Service/Citizenship		
TOTAL		

♪

What is the congruency between your actual time/effort and what you anticipated you needed for long-term goals?

- *What can you change?*

5. Specific Goals in Areas of Effort

Education

Year in Review: Please list last year's goal(s) and significant accomplishments (teaching appointments, invitations, course or program improvements, etc). If goal not met, explain and identify barriers.

Upcoming Year's Education Goal(s):

Identify Resources, Collaborators, and time commitment needed to achieve goal:

Identify Barriers to achieve new goals:

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After listing your goals and accomplishments – consider the degree to which you are "on track" to accomplish your long-term goals?

Research and Research Related Activities

Year in Review: Please list last year's goal(s) and significant accomplishments (major publications, grants, presentations, invitations, etc). If goal not met, explain and identify barriers.

Upcoming Year's Research Goal(s):

Identify Resources, Collaborators, and time commitment needed to achieve goal:

Identify Barriers to achieve new goals:

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If you have identified needed resources and/or barriers

- *What specific action-oriented steps can you take to put you back "on track" to achieve your long-term goals?*
- *Who can help you if you're stuck?*
- *What resources are available to guide you? See faculty affairs website.*

Patient Care (Clinical Activities)

Year in Review: Please list last year's goal(s) and significant accomplishments (exceptional patient care, development of new techniques, clinical programs, etc). If goal not met, explain and identify barriers.

Upcoming Year's Patient Care goal(s):

Identify Resources, Collaborators, and time commitment needed to achieve goal:

Identify Barriers to achieve new goals:

Administration

Year in Review: Please list last year's goal(s) and significant accomplishments. If goal not met, explain and identify barriers.

Upcoming Year's Administration goal(s):

Identify Resources, Collaborators, and time commitment needed to achieve goal:

Identify Barriers to achieve new goals:

Self Development

Year in Review: Please list last year's goal(s) and significant accomplishments (CME training or earning advanced degree, professional society participation, certification/re-certification, learning new clinical /research techniques, etc). If goal not met, explain and identify barriers.

Upcoming Year's Self Development Goal(s):

Identify Resources, Collaborators, and time commitment needed to achieve goal:

Identify Barriers to achieve new goals:

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After completing your review consider:

- *Were there specific areas of the IDP that were difficult for you to complete? If yes – which areas and what was difficult. Consider need for more self-development in this area.*
- *Are you "on track" to achieve your goals?*
- *Do your short term goals and accomplishments feed into your long term goals? If not, why not? What can you do to enhance that alignment?*
- *What resources are available to help you achieve your short and long-term goals.*
- *Critically assess your own competencies relative to your goals – In what areas do you need to improve and enhance your continued development?*

Answers to these questions can inform your discussions with your chief/chair as part of annual review process.

Service
Year in Review: Please list last year's goal(s) and significant accomplishments (committee membership, community outreach, other university and/or community service).

6. Optimal time/effort needed to achieve career goals

Revisit the outline in step 4. Create new time outline taking into account your desired focus and specific goals listed in step 5.

Area	% of Total Duties	# Hrs/Week
Education		
• Medical Student		
• Resident		
• Gradate Student		
• CME/Other		
Research		
Patient Care		
Administration		
Self-Development		
Service/Citizenship		
TOTAL		

♪

How do the time/effort outlines in Step 4 and Step 6 align?

Is the time/effort outline in Step 6 congruent with specific goals listed in Step 5?

- *Where can you fine-tune and make adjustments to create optimal alignment of time/effort and desired focus/goals?*
- *What resources do you need to achieve your optimal time/effort?*

7. Approved and Submitted by:

_____ _____
Faculty Member Date

_____ _____
Mentor Date

_____ _____
Department Chair Date

MENTORSHIP EVALUATION

These questions are a starting point to allow you to begin to assess and evaluate your mentoring relationship. Your mini-advisory committee is another important assessment mechanism that can help ensure the strategic alignment of your career development, and clinical research goals. Completing an evaluation and sitting down with your mini-advisory committee for review will help you achieve your MCRTP career and clinical research goals.

For your consideration…

• Is your mentor academically successful? (publications, grants, committees, active research, patient referrals)

• Are you interested in your mentor's research areas and techniques?

• Is your mentor easy to approach and talk with?

• Does your mentor advise and encourage you with respect to your independent goals?

• Do the two of you meet regularly?

• Do you receive regular feedback and constructive criticism?

• Does your mentor facilitate your participation in professional activities outside of the institution (regional, state, national organizations)?

• Is your mentor your advocate within the MCRTP (department or division)?

• Does your mentor encourage you to submit grant applications, help you develop research ideas and push you to write manuscripts?

• Does your mentor connect you to other senior professionals who could "fill in the gaps" in areas where he or she might be less skilled?

• Has your mentor observed you in the laboratory setting and provided feedback on critical research skills?

Mentored Clinical Research Training Program
CONTACT INFORMATION
and ANNOUNCEMENTS

CONTACT INFORMATION

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Internal Medicine: Endocrinology, Clinical Nutrition & Vascular Medicine

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Internal Medicine

Timothy Albertson, MD, PhD
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Pediatrics: Pulmonary

Jill Joseph, MD, PhD
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Internal Medicine

Nancy Lane, MD
Internal Medicine

Jerold Last, PhD
Internal Medicine: Pulmonary and Critical Care Medicine

Hao Liu, PhD
Public Health Sciences

Kent Lloyd, DVM, PhD
Veterinary Medicine: Anatomy/Physiology & Cell Biology

Dennis Matthews, PhD
Neurological Surgery

Stephen McCurdy, MD, MPH
Epidemiology and Public Health Sciences

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Family and Community Medicine

David Pleasure, MD
Neurology

Richard Pollard, MD
Internal Medicine: Infectious and Immunologic Diseases

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Internal Medicine: Infectious and Immunologic Diseases

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MCRTP Program Representative

EXTERNAL ADVISORY BOARD (EAB)

An External Advisory Board (EAB) will provide general oversight and advice on the direction for the Mentored Clinical Research Training Program. The EAB will also participate in the evaluation of the program at the annual retreat of faculty and students.

The EAB members are:

C. William Balke, M.D. is the Senior Associate Dean for Clinical Research and Professor of Medicine and Physiology at The University of Kentucky. Dr. Balke is also the Director of the Institute for Molecular Medicine. Dr. Balke received his B.S. in Biology in 1975 from Haverford College in Haverford, PA and his M.D. in 1981 from Temple University, School of Medicine in Philadelphia, PA. Dr. Balke's research interests focus on the role of individual ions (especially calcium) as second messengers in the regulation of a variety of cellular processes relevant to cardiovascular function. He received the NIH, NHLBI Physician-Scientist Award from 1990 – 1995.

Michael R. Grever, MD, is the Associate Dean for Medical Services at the Ohio State University Medical Center. Dr. Grever is Chairman of the Department of Internal Medicine and the Charles A. Doan Chairman of Medicine. Dr. Grever is also Professor of Medicine and Program Co-Leader for Experimental Therapeutics at Ohio State's James Comprehensive Cancer Center. Dr. Grever received his B.S. and M.D. from the University of Pittsburgh. Dr. Grever is internationally known for his expertise in experimental therapeutics and hematologic oncology.

Gerald Sonnenfeld, PhD, took up his present position in July of 2004 as Vice President for Research and Professor of Biological Sciences at Binghamton University, State University of New York. Dr. Sonnenfeld received his B.S. in Biology in 1970 from the City College of New York and his Ph.D. in Microbiology and Immunology in 1975 from the University of Pittsburgh, School of Medicine. Dr. Sonnenfeld's research has centered on the effects of stress, including space flight conditions, on the immune system and resistance to infection. Dr. Sonnenfeld has carried out multiple space flight experiments in that area and has also directed multiple pre-clinical studies, and clinical study development for multiple clinical immunoregulatory agents.

MENTORSHIP ARTICLES

MENTORSHIP ARTICLES

Mentoring for the New Millennium: http://www.med-ed-online.org/f0000038.htm
The challenges and benefits of a formal mentoring program are considered within the context of learning organizations: specifically, graduate medical education and professional development. While no single definition addresses every aspect of mentoring, this process is a distinct one with established traditions and expectations. The core requirements of attraction, action and affect remain and are essential for this adult developmental process to be successful. This paper's review of the literature supports the belief that mentoring has value, even into the next millennium, with some conceptual evolution. We are encouraging a paradigm shift from the traditional dyad model of mentoring to a triad model: organization, mentor, and protégé. The future development of outcome measures will be a necessary goal to demonstrate that both personal and organizational goals can coexist. (see link for full text)

The Joy of Research:
http://ampe.allenpress.com/pdfserv/10.1367%2F1539-4409(2003)003%3C0068:TJOR%3E2.0.CO%3B2
I was going to talk about mentoring, but one of my mentors from afar—John Leventhal—said it best in his talk when he received this award.[1] I was going to discuss the ingredients necessary for good research, but Ruth Stein captured it perfectly in her recipe for research that she presented in her award talk.[2] I wanted to delve into the role of passion in research and the critical importance of helping poor children, but Michael Weitzman expressed this so eloquently when he received his award.[3]
I have decided instead to focus on a subject that is rarely discussed in academics yet is nevertheless absolutely critical to the success of any researcher—the joy of research. I direct these words particularly toward younger members of the APA and the next generation of child health researchers. There are literally hundreds of books about joy, involving writing, speech, sex, meditation, and so on. But there is no book on the joy of research. In Medline and Psych Info, nothing is listed about the pure joy and fun of doing research, about the aspects of research that are so fulfilling. Yet it is the joy of research that provides the sustenance, the life-bread to this difficult and challenging academic endeavor. What does the joy of research entail? (see link for full text)

A Survival Guide for Generalist Physicians in Academic Fellowships:
http://www.blackwell-synergy.com/links/doi/10.1046/j.1525-1497.1999.12138.x
Generalist physicians often pursue fellowship training to develop skills and expertise that will help them toward establishing academic careers. In part 1 of this two-part series, we discussed issues relevant to effective learning and development during the early part of fellowship. [1] Here we offer advice, from our experience as former general medicine fellows and a fellowship program director, for planning during the latter part of fellowship, when trainees are preparing to make the transition to junior faculty. (see link for full text)

TROUBLESHOOTING

TROUBLESHOOTING TIPS

Conflicts are a part of life. An important key to troubleshooting conflict is to remember that you have a "choice" and can "choose" how to respond. The following troubleshooting tips suggest different approaches and ways for you to choose "how" you wish to response to a conflict.

The Mentored Clinical Research Training Program (MCRTP) is structured to mitigate conflicts using the following escalation path:

1. Mentor
2. Mini-Advisory Committee
3. Program Manager
4. Graduate Group Advisor
5. Program Director / Co-Director

Should you have any questions or concerns regarding these troubleshooting tips, please contact the MCRTP Program Manager. (See MCRTP Contact Information and Announcements Section)

Online References:

http://www.thoracic.org/women/careertalk/career0802.asp: Tips and tactics to maximize and promote a long-term, productive mentoring relationship:

http://nextwave.sciencemag.org/cgi/content/full/1998/04/23/5: Negotiating Beyond Conflict potential areas of conflict and preventive means of addressing it

http://www.training.nih.gov/handbook/mentor.html: section on mentoring from the NIH Fellows' Handbook. Extremely useful overview.

http://www1.od.nih.gov/oir/sourcebook/ethic-conduct/mentor-guide.htm: "A Guide to Training and Mentoring in the Intramural Research Program at the NIH." The NIH guide is divided into six sections:

- The **Supervisors, Mentors, and Trainees** section defines a mentor as "a person who has achieved career success and counsels and guides another for the purpose of helping her/him achieve like success."
- The **Training in Scientific Investigation** section addresses the importance of identifying a "first-rate" research project.
- **Training in Communication** emphasizes the importance of oral and written communication both within the scientific community and the institutional campus.
- **Training in Personal Interactions** discusses the need to learn negotiation, persuasion and diplomatic skills.
- **Career Planning** encourages fellows at NIH to consider career pathways almost as soon as arriving at the Institute and discusses how senior researchers can assist.
- The **Training in Scientific Responsibility** section commands all supervisors, mentors and training institutions to ensure that all trainees learn the "legal and ethical aspects of conducting research" and develop a "sense of responsibility for the use of public resources available to them."

http://faculty.washington.edu/olmstd/research/Mentoring.html: Useful article entitled; "Mentoring New Faculty: Advice to Department Chairs" was published in the CSWP Gazette, 13(1), 1 (August, 1993). The Gazette is the Newsletter of the Committee on the Status of Women in Physics of The American Physical Society.

http://www.awis.org/mentoring.html: Mentoring site for the Association of Women in Science.

http://www.nap.edu/readingroom/books/mentor: online version of Advisor, Teacher, Role Model, Friend (see below).

http://nextwave.sciencemag.org/cgi/content/full/1999/12/09/14: Armando Rodriguez, a Presidential Awardee of mentoring excellence gives a few of his insights to the requirements and responsibilities of mentoring, also links to related mentoring articles in science next wave website.

http://www.rackham.umich.edu/StudentInfo/Publications/StudentMentoring/contents.html: "How to Get the Mentoring You Want." Graduate student guide with many good ideas for mentors/mentees at all levels of training.

http://www-med.stanford.edu/school/facultymentoring/index.html: Stanford University School of Medicine link to their faculty mentoring program.

Publications:

Advisor, Teacher, Role Model, Friend: On Being a Mentor to Students in Science and Engineering. National Academy of Sciences, National Academy of Engineering and Institute of Medicine. National Academy Press, Washington D.C., 1997.

Faculty Mentoring Guide, School of Medicine, Virginia Commonwealth.

The Mentor's Mentor: The Mentoring Handbook. A Guide to Mentoring. Women's Faculty Development Caucus, College of Medicine, University of Arkansas for Medical Sciences, 1997.

Morzinski JA, DE Simpson, DJ Bower and S Diehr . Faculty development through formal mentoring. Academic Medicine 1994, 69:267-269.

Palepu A, RH Friedman, RC Barnett, PL Carr, AS Ash, L Szalacha and MA Moskowitz. Junior faculty members' mentoring relationships and their professional development in U.S. medical schools. Academic Medicine 1998, 73:318-323.

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