Weill Cornell Medicine

Enhancing the Mentoring Experience For Faculty at Weill Cornell Medicine
2022 ELAM Leadership Forum

ELAM

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Background

- Mentoring is a well evidenced method to improve faculty vitality and advancement.
- Mentoring is a strategic priority at Weill Cornell Medicine (WCM).
- Mentoring efforts to date at WCM have focused on education and awareness but have not systematically impacted the mentoring experience of the individual faculty.

Objective

- To better understand the mentoring needs of the WCM faculty and offer more targeted support for mentoring efforts in the individual departments.

Methods: AFR

- Leveraged existing data about mentoring in the 2020 Annual Faculty Review (AFR) and analyzed the prevalence of mentoring, association with academic activity and relationship concordance.

Faculty mentee specifies a mentor   Faculty mentor specifies a mentee   Concordance exists when both claim the relationship
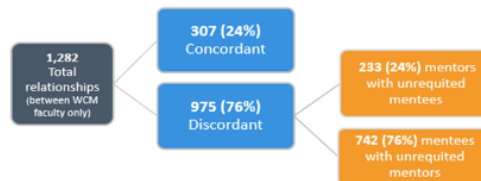
Methods: MAC

- Interviewed senior faculty on the Mentoring Academy Council (MAC) from the 26 depts at WCM for information about mentoring priorities in their depts.

Results: AFR

- 1,254 (71%) of the faculty were engaged in mentoring.

Mentor Only 311 + 906 (54%)   Both 649   Mentee Only + 294 943 (53%)
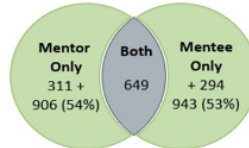
- Almost half (47%) of the faculty did not have a mentor, including 55% of the junior faculty.
- 76% of faculty were in discordant mentoring relationships, i.e., less formal than desired.

1,282 Total relationships (between WCM faculty only) — 307 (24%) Concordant — 975 (76%) Discordant — 233 (24%) mentors with unrequited mentees — 742 (76%) mentees with unrequited mentors

- Receiving mentorship was significantly associated with more grants (25% vs. 10%), publications (59% vs. 39%) and teaching (88% vs. 59%).

Results: MAC

- All faculty should be offered mentorship.
- Mentorship is needed across all activities: clinical, teaching, research.
- Mentoring goals should include a variety of professional domains: academic productivity, well-being, leadership, etc.

Well-Being, Professional Skills, Academic Productivity, Clinical, Leadership, Research, Education, Reputation

- Mentoring efforts should be based on needs assessments and include outcomes and evaluation.
- Mentors need training and recognition.
- The MAC and the Office of Faculty should tailor assistance for individual departments and their faculty.

Conclusion

- A strategic approach to address the mentoring needs of individual departments can increase mentoring prevalence and enhance the mentorship structures and experience for our faulty.

ABSTRACT: 2022 ELAM Institutional Action Project

Project Title: Enhancing the Mentoring Experience for Faculty at Weill Cornell Medicine

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Topic Category: Faculty Development

Background and Significance: Mentoring is a strategic priority at Weill Cornell Medicine (WCM) and recognized as a well evidenced method to improve faculty vitality and career advancement. Efforts to date at WCM have focused on sharpening its characterization, e.g., distinguishing it from coaching, sponsoring, etc. and raising awareness of its value. While such efforts are important, they have yet to systematically impact the mentoring experience of the individual faculty. Institutional programs to address mentoring have also been challenged by the breadth of faculty activity and the diversity of mentorship needs.

Purpose/Objective: The goal of this project was to better understand the mentoring needs of our faculty to improve support to our departments in their mentoring efforts. We sought to achieve this by analyzing existing information about mentoring in the WCM online Annual Faculty Review (AFR) and by canvasing the mentoring needs and priorities in each of the 26 WCM departments. Information collected will be used to inform resources offered by the Office of Faculty.

Methods/Approach/Evaluation:
1. We abstracted information about mentoring from the 2020 AFR and analyzed mentorship prevalence, association with academic activity and relationship concordance.
2. We leveraged the Mentoring Academy Council (MAC), consisting of senior faculty from the 26 departments at WCM, to solicit information about the mentoring needs, efforts and priorities in each department.
3. With the above data, we will focus the efforts of the MAC and the Office of Faculty on the strategic creation of mentoring recommendations and resources.
4. We will evaluate our project by reviewing the AFR in subsequent years as well as by seeking updates from the departments on their mentorship structures.

Outcomes/Results: The majority (71%) of our faculty indicated some activity as a mentor and/or mentee on the 2020 AFR. However, less than half (47%) indicated they had a mentor, including 58% of our junior faculty, which provides the starting point for our institutional response. Receiving mentorship at WCM was associated with increased grant submissions and awards, publications, and teaching engagements consistent with prior studies. 76% of our faculty reported a mentoring relationship that was not reciprocated, i.e., discordant; suggesting that most mentoring relationships are less formal or structured than desirable. Interviews with MAC members revealed a diverse set of mentorship needs across all faculty activities: clinical, teaching, research, etc. There was unanimous agreement that all faculty should be offered mentorship, that mentoring goals should include multiple domains of professional life (academic productivity, well-being, leadership, etc.) and that mentors would benefit from training and recognition. MAC suggested expanding centralized resources to better assist departments with a) assessing faculty needs, b) training and recognizing mentors, and c) structuring and evaluating mentoring efforts.

Discussion/Conclusion/Statement of Impact: This strategic approach supports tailored mentoring programs within the individual departments targeted to their specific needs to more effectively enhance faculty mentorship at Weill Cornell Medicine.