**COACHING** 

# **How Doctors Can Be Better Mentors**

by Sanjay Saint, MD and Vineet Chopra, MD

October 04, 2018



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Being a good doctor is a lot like being a good mentor. Just as clinicians have an ethical duty to act in the best interest of their patients, mentors have a similar duty towards their mentees. In our clinical and academic lives (where we've treated countless patients and mentored hundreds of doctors-in-training) we strive to do both as well as we can. Along the way, we've found that practicing mindfulness — being patient, focused on the moment, and accepting of events as they unfold — is important.

Consider, first, how similar doctoring and mentoring can be. In both, the relationship is asymmetric: the doctor holds the power or authority, and has most of the expertise, while the patient or mentee seeks guidance and advice. The doctor has — or should have — only the patient's or mentee's interests and well-being in mind. And when true malpractice occurs — either by a physician or mentor — the aggrieved party has much more to lose.

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We have had the good fortune to have many mentees come to us for advice. And just as we have honed our clinical skills by reflecting on patient outcomes, we have evolved a similar studied approach for

mentoring. In both, we have learned how to incorporate mindfulness to focus on what's best for the mentee and his or her career. Here are the guiding principles we try to follow.

### #1: Be available

People in healthcare — and especially good mentors — are busy. Many find themselves engulfed by meetings, speaking engagements, and travel. Being attentive to a mentee in the midst of these engagements is challenging but critical. We suggest the following approaches:

- Appreciate that some is better than none. As schedules fill, we recommend shorter meetings over no meetings. There is great utility in a 30-minute even 15-minute meeting if a traditional 60-minute mentoring meeting isn't possible. Shorter meetings will also force your mentee to get to the point and will require you to be less long-winded.
- *Find alternatives to the face-to-face meeting.* A brief after hours call, text message, or email can help your mentee stay on track and prevent you from being the rate-limiting step in their productivity. Take advantage of video conferencing and smart

- phones when you are away on travel (we've done FaceTime with mentees from the road). And if that doesn't work, resort to good old-fashioned email.
- *Be fully present.* Just because you can speak with your mentee in person, by phone or by video does not mean that you are truly communicating. This also holds during routine meetings in your office. Being a mindful mentor means demonstrating to your mentee that for the next X minutes, they are all that matters. And when we find ourselves distracted during the discussion by thoughts about other tasks or the meeting we need to go to next, we silently remind ourselves: Be here, now.

# **#2: Know your role**

Ask yourself, "What role does my mentee need me to play?" Your relationship need not only take the form of a traditional and general mentoring role involving a seasoned expert who provides guidance and wisdom to a junior person. There are other three other key archetypes to consider: coach, sponsor, and connector. The "coach" teaches the junior person how to improve in a particular skill, such as finding a job or performing a particular medical procedure. The "sponsor" helps boost mentees by promoting them for specific awards or positions, honorific societies, or other high-profile positions. Sponsors risk their own reputations when vouching for mentees — thus, they look for highly successful individuals. The "connector" serves as a master networker who pairs mentors, coaches, and sponsors with mentees.

Malcolm Gladwell in *The Tipping Point* aptly describes connectors as multipliers that link us up with the world.

Ideal mentors are mindful about their role and how they should play it. They also anticipate what the mentee needs even before the he or she is aware of such a need. For example, a year — or more — before the junior person is going up for promotion, the mentor begins to reach out to national colleagues recommending the mentee for talks at peer institutions, thereby acting in the role of sponsor. Whether you are mentoring, coaching, sponsoring, or connecting, pausing to reflect on the job is good for both you and the person you are helping.

# # 3: Try to be objective

Mindfulness is not just about being fully present. It also requires being non-judgmental and supportive. For example, we have both been disappointed by mentees who show up late for meetings; annoyed by those who over promise but underdeliver; and even sad when mentees have told us that they were hoping for a different mentor or experience.

However, rather than react reflexively, we try to distance ourselves from our emotions and instead observe them as an onlooker. We focus on remaining objective during the interaction. Just as clinicians work to prevent emotions in the moment from getting in the way of patient care, mindful mentors resist allowing emotions to influence their real-time interactions with mentees. Sometimes mentees really do repeatedly drop the ball and thoughtful course corrections don't work; in those cases, more drastic measures may be called for. But often a mentee is late for a good reason, one they can't control – like staying to hold a family meeting or to be at a dying patient's bedside. Or a mentee fails to deliver because they simply have way too much on their plate — after all, there are just 24 hours in a day. Or maybe the mentee realizes that you aren't the best match — and that's okay. The point is, mindfully withholding immediately judgement and emotions is best for all involved.

# #4: Put yourself in their shoes

In the classic leadership book *The One Minute Manager*, Blanchard and Spencer use a symbol — the face of a digital watch — to remind us to regularly look into the faces of the people sitting across from us and realize they are important. This is as true for mentors guiding mentees as it is for clinicians treating patients.

We have consciously worked on being fully engaged when helping others in the clinical and mentoring domains. As clinicians we do this by performing a grounding exercise before seeing a patient. Before entering the patient's hospital room, for

example, we pause to use the hand sanitizer outside each door. The twist? We use the moment to be mindful — to consider that this could be our family member's room, and we are the onlookers rather than the doctor. Or what if we were the patient and our doctor strolled in? As we pay attention to the feel of the alcohol gel, its odor, and the cold sensation as it evaporates, we envision what will happen once we step in the room and how we should comport ourselves. This 10-second ritual before seeing a patient is our personal reminder of the duty we have to those who depend on us for their medical care — a reminder that this is someone's mother, father, sibling, child. And it helps us focus before we see each patient, every time.

Likewise, before meetings with mentees (especially ones where difficult feedback or conversations may happen), we consciously try to put ourselves in their shoes before and during the conversation. This has made us more empathetic and compassionate in our roles as mentors. Making it as a junior physician or budding academician is hard. Established leaders lose sight of this and forget the struggles that their mentees face. By putting ourselves in the role of the mentees — and doing so purposefully several times during our interactions — we have learned to take the edge off the sometimes difficult advice we provide. When critiquing our student's suboptimal case presentation, for example, we think to ourselves "they are doing the best they can" and provide feedback accordingly. In fact, the realization that *most* of us are doing the best we can given the circumstances reminds us that criticism without kindness can seem cruel to the recipient.

Being a mindful clinician or mentor is not easy. It takes time, patience, and perseverance. But it also takes practice. Start by being fully present — all in, if you will — during interactions with your mentees, as we see this practice as foundational. This first step can help unlock the others. Your patients would expect nothing else. So why should your mentees?



Sanjay Saint, MD, MPH is the George Dock Professor of Internal Medicine at the University of Michigan, the Director of the VA/University of Michigan Patient Safety Enhancement Program and the Chief of Medicine at the VA Ann Arbor Healthcare System. Follow him on Twitter @sanjaysaint.



Vineet Chopra, MD, MSc is an Associate Professor of Medicine and Chief of the Division of Hospital Medicine at Michigan Medicine. He co-directs The Patient Safety Enhancement Program at the Ann Arbor VA Medical Center. Follow him on Twitter @vineet\_chopra

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