



THE  
SOUTH LONDON  
PEER MENTORING  
NETWORK

PEER MENTORING  
HANDBOOK

2016

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## INTRODUCTION

Peer mentoring is widely recognised as beneficial for both mentors and mentees. It enables the acquisition of new and transferrable skills, has a positive impact on professional development and generates high satisfaction rates amongst participants.

In recent years several pilot mentoring schemes have been developed in various UK medical specialty training programmes, including obstetrics & gynaecology, medicine, paediatrics, surgery and psychiatry. The longest running peer mentoring scheme was established at South London and Maudsley NHS Foundation Trust (SLaM) in 2004.

This handbook and the accompanying website and its resources are here to give practical guidance on starting up and running a peer mentoring scheme. We (The SLaM scheme leaders) share our experiences of running a peer, and more recently a near-peer, mentoring scheme. Suggested timelines for 4- and 6-months long (foundation doctors / core trainees) programmes can be found in the Resources section.

The South London Peers website also provides links to resources freely available on the internet. Before wider distribution and use, copyright agreements will need to be considered.

## CONSIDERATIONS BEFORE THE START OF THE PROGRAMME

### **Identify leads/champions and resources:**

In general, the scheme could be run by anyone with an interest in mentoring. We recommend that the leads should have had mentoring training (but formal accreditation is not necessary) in order to provide teaching sessions as well as supervision and support for mentors.

An example course is: <http://mentoring.londondeanery.ac.uk/training>

The administrative load is considerable and includes database management and regular e-mails supporting mentoring pairs during their relationship.

Schemes run solely by enthusiastic trainees have been successful, but, particularly in smaller rotations, this poses challenges in sustaining them long-term.

To run a peer mentoring scheme successfully, we recommend both time and modest financial budget for administration, participation, training and supervision/support

### **Identify target participants:**

In Peer Mentoring, the mentor and mentee are relatively close in terms of age, experience and rank. This allows empathy to develop more readily and enable mutual support and collaboration. It also has the potential for social interaction within the mentoring relationship which may increase the sense of community.

Potential participants could come from a singular medical specialty, or mentoring could be provided across several specialties. Foundation doctors are a particularly interesting mentee group as they rotate through specialties and are at a crucial stage in their career.

There doesn't seem to be a clear difference in rate of uptake depending on whether the scheme is run as an opt-in or opt-out model. That is to say, if mentees have to sign-up (opt-in) or are automatically enrolled, but can indicate if they don't want to take part (opt-out).

Regardless of the model used we observed in our schemes that in about 1/3 of the matched pairs a sustained mentoring relationship develops. As this might yield greater satisfaction for the mentors involved we are currently using an opt-in model.

### **Training for mentors:**

Although training for mentors is crucial for success, arranging external or in-house training by external experts can be very costly. In our experience a peer mentoring

scheme can work well without relying on costly systematic external training or supervision.

The system we employ is that the Mentoring Leads receive funding to attend formal training available at the London Deanery. The Mentoring Leads then provide in-house training and workshops to the peer mentors.

We found that about 2 hours, possibly split in 2 sessions, can be sufficient to teach basic principles. A number of mentoring models are available to be presented and practiced. However, we are mindful that some of the mentoring techniques are similar to the techniques used in psychiatric practice and therefore are more familiar to the peer mentors in our scheme. Peer mentors from other specialties may or may not require more training/support.

Continuous supervision and support during the mentoring relationship are important. Nevertheless, uptake of high intensity supervision is relatively low in our experience. The offer of a supervision/workshop once in 4-6 months, plus regular e-mails offering ad hoc support appears to be efficient.

### **Mentoring Models:**

Although it is not necessary to follow any specific mentoring models for the relationship to be effective, many mentors may find having a model in mind helpful in structuring their sessions.

Basic information on most many models is freely available on the internet. A person professionally trained in one of the models should be able to adapt their skills and use and teach the other models.

### Examples of models and links

The OSCAR Coaching Model:

<http://www.worthlearning.co.uk/oscar-coaching-model/>

The GROW Model: <https://www.southampton.ac.uk/> -> GROW Model

The Skilled Helper Model: <http://www.northerndeanery.nhs.uk/> -> Egan Skilled Helper Model

### **Recognition:**

Many trainees are enthusiastic about being mentors and established relationships lead to high rates of satisfaction. To recognise mentors' contribution, we award a certificate of completion of the programme.

To achieve this, mentors need to prove:

- a) Attendance at as a minimum one formal mentoring teaching session
- b) At least 3 sessions with the mentee
- c) Complete an evaluation form (ideally at beginning and end of the programme)

Mentoring experiences outside the scheme can also be recognised. An Activity Log document can be found in the Resources section.

### **Evaluation:**

Ongoing evaluation using feedback and readiness to adapt the programme to local needs is important. Tools such as Survey Monkey can be used to make the administration and recording of feedback cost effective. An example of feedback forms sent to mentors and mentees can be found in the Resources section.

## STEP-BY-STEP GUIDE

### Step 1: Recruitment of mentors

If you are just about to start a new scheme, the best way to recruit mentors is to speak to the potential group directly. You may want to organise a special event or simply get a slot during a local teaching day or other meetings where most of your potential mentors attend and talk to them about the scheme. Once the scheme has been established, you can rely mainly on emails to recruit mentors.

#### Suggested e-mail:

Dear all,

From (date) we will have (x) new foundation doctors working in the trust, some straight out of medical school, and an even larger number of new core trainees. Following on from our pilot Near/Peer Mentoring Scheme for Foundation Doctors in (Specialty) and the established Core Trainee Mentoring Scheme, we need core and higher trainees to act as mentors on both schemes starting from (x).

Mentoring gives you a fantastic opportunity to be involved in medical education and develop your supervision skills. You will also ensure that the foundation doctors and core trainees have a great training experience at (trust).

If you participate in this 2015/2016 scheme you will receive a certificate of participation if you provide three sessions of mentoring, attend at least 1 supervision group and complete an evaluation form. Supervision groups will be held throughout the year and we will inform you of the dates of these in due course. We will also provide refresher courses for your mentoring skills.

If interested, please answer the questions below in a return email:

Year of Training from august 2015:

Location Aug 15- Feb 16:

Job:

Interests (Research/Audit/ Teaching etc):

Hobbies:

Experience as a mentor (if any, not required):

Experience as a mentee (if any not required):

Commitment to meeting your mentee (foundation doctor or core trainee) at last three times:

Happy to be contacted to fill out evaluation form at end of scheme:

Preference: Foundation Doctor or Core Trainee?

Any other information you would like us to consider for matching purposes? (e.g. interest in mentoring IMG, flexi trainee, etc)

Thank you so much for helping us with these questions so we will be able to match the most suitable mentee/mentor pairs.

## **Step 2: Training of mentors**

We found that about 2 hours, possibly split in 2 sessions, can be sufficient to convey basic principles. A number of mentoring models are available which should be taught and practiced. Links to various models can be found above under Considerations > Mentoring Models.

### Suggested e-mail:

I just want to remind you about the Basic Mentoring Skills workshop happening (date), (location), which will offer you an introduction to the (model) of mentoring.

This will be an interactive workshop and we ask you to bring a work-related dilemma, problem or issue to the workshop that can be 'mentored' through.

The Advanced Mentoring Skills Workshop will be taking place on (date), (location) and will aim to consolidate your mentoring skills and review the challenges of mentorship.

These workshops are primarily aimed at Core Trainees, however they are open to any trainee who wants to refresh their mentoring skills or any trainee who wants to take part in the mentoring scheme for foundation doctors or new core trainees from August (if you haven't previously had any mentor training).

Please do email (organisers) a CT1/CT2 and wish to attend.

Possible set-up of a 1-hour training session:

5 minutes	Introductions & filling of Pre learning questionnaire
10 minutes	Feedback & What is Mentoring, and what not?
10 minutes	Introduction to stage 1 of skilled helper model (Telling the story, developing new perspectives, choosing where to focus) & demonstration
10 minutes	Practise in pairs of stage 1
10 minutes	Introduction to stage 2 of skilled helper model (Imagining possibilities, shaping a change agenda, testing commitment) & demonstration
10 minutes	Practise in pairs of stage 2 – hopefully they'll come up with a goal they could achieve until next session?
10 minutes	Feedback & summary of last session
10 minutes	Introduction to stage 3 of skilled helper model (Possible strategies, Best Strategies, Plan) & demonstration
10 minutes	Practise in pairs of stage 3
10 minutes	Practicalities of how to start a mentoring relationship, including discussion about confidentiality
10 minutes	Discussion about possible challenges of being a mentor and where can mentors can help & support
10 minutes	Q&A

**Step 3: Recruitment of mentees**

Induction (via a slot in the programme of the day, plus road-show stand) or local academic programme are the natural points of face-to-face recruitment. We suggest an opt-in model, and most people fill in the form at the event. A follow-up e-mail will encourage undecided trainees to join. Alternatively, recruitment solely via e-mail has also proven to have good uptake rates.

Example flyers for the SLaM Core Trainee and Foundation Doctor mentoring scheme can be found in the Resources section.

### Suggested sign-up form:

Request to join the scheme as a Mentee

Name:

Year of training (e.g. F1/2, CT1/2/3):

Email:

Mobile:

Placement in April 2016 (location, ward/team):

Area of London in which you live:

Special Interests (Psychiatry/outside Psychiatry):

Is there anything else you would like us to consider for matching purposes, e.g. ACF, IMG, flexi-trainee, specific area you would like to use mentoring for, etc.

We will do our best to match Mentors to Mentees based on geography and special interests, but of course there will be an element of chance.

Thank you.

### **Step 4: Matching**

Although mutual interests and special considerations (e.g. ACF, IMG) are important, we found that the main factor influencing success at matching stage is location. We avoid matching trainees working for the same teams, but try to achieve closeness in terms of either work or home location.

### **Step 5: Informing mentoring pairs about their match**

E-mails with the matches should be sent out relatively quickly.

Suggested e-mail for mentors:

Dear (mentor),

Thank you for volunteering as a mentor for our scheme.

We have now matched you to the following mentee:

Name:

Grade:

Placement:

Contact:

Please try and contact your mentee as soon as possible to arrange your first meeting. We recommend at least 3 meetings during their placement. In the first session please go through issues such as confidentiality, etc (as outlined in the flyer) with your mentee.

We believe that ongoing training and support for mentors are important aspects in ensuring the success of a mentoring scheme. We are planning to arrange a mentoring workshop for our mentors in (2-3 months) and hope to see you there.

However, in the meantime, if you have any questions or issues please do not hesitate to contact me. I can also offer face-to-face supervision, or via phone or email.

We will issue a certificate of recognition at the end of your mentoring, on receipt of a logbook confirming that at least 3 sessions of mentoring have taken place and you have attended at least 1 mentoring skills/supervision workshop.

Once again, thank you for taking part in our scheme. Best of luck in your mentoring relationship.

Suggested e-mail to mentee:

Welcome to trust/scheme:

Thank you for taking part in our Peer Mentoring Scheme.

Your allocated mentor is:

Name:

Email:

Grade:

Current Placement:

Location:

Professional Interests:

You have been matched, as best we could, on the basis of geographical locations of your work and your interests within and outside psychiatry. Please get in touch with each other, say hello, exchange contact details and organise your first meeting.

I have used the email addresses provided on the sign-up forms, but if these aren't working, or aren't convenient, do use alternatives. If you have trouble contacting each other, let me know as soon as possible

If you have any questions about the scheme, please do not hesitate to contact me.

Once again, thank you for taking part in our scheme. Best of luck in your mentoring relationship.

### **Step 6: Pre-evaluation for mentors**

In order to evaluate if the training for mentors you provide is effective, you may wish to send out a survey pre- and post-mentoring. You can find an example of a questionnaire in the Resource Section.

### **Step 7: Reminders**

Commitment and availability to attend formal workshops is , in our experience, variable and we therefore offer one workshop per rotation, plus ad-hoc supervision when required. To stay aware of any problems potentially arising during the mentoring relationships, it is important that the organisers are seen as

approachable and accessible. We send regular (every 6-12 weeks) 'how-is-it-going?' e-mails, so that participants feel heard and can report any concerns.

#### Suggested e-mails:

Dear mentor,

It's now 2 months into the mentoring programme. As your supervisor, I'd like to check in to see if you have managed to form a mentoring relationship and if there are any issues that you may wish to discuss. I would also like to remind you that there is a Peer Mentoring Workshop on (time / location). This would be an opportunity to consolidate your mentoring skills and for group supervision.

Dear mentee,

It's now 2 months into the mentoring programme. I'd like to check in to see if you have managed to form a mentoring relationship and if there are any issues that you may wish to highlight in the meantime. We hope you have found this mentoring programme helpful in your training. However, if there are anything you have comments or ideas of how we can improve our programme, please do let us know. We will be sending out formal evaluation form at the end of this programme.

#### **Step 8: Workshop**

A workshop can be held once every 4-6 months, for mentors to receive structured support and a general rehearsal of mentoring techniques, either a specific model or more specific techniques, e.g. Force Field Analysis (<http://www.change-management-coach.com/> -> Force Field Analysis) or Personality Style Inventory (<https://www.sage.edu/> -> Personal Style Inventory).

### Suggested e-mail:

We are inviting you to attend a Peer Mentoring Workshop on (date) from 5:30 – 7:30pm in (location). This will be run by the mentoring leads and cover training in the (chosen mentoring model) and group supervision to discuss any challenges, queries or themes that have come up in your mentoring sessions.

Although this session is aimed primarily at current mentors even if you have not yet been able to have a first meeting with your mentee(s), please do attend if you are thinking of joining the scheme as a mentor (at a later date) as this workshop will act as refresher course in terms of your mentoring skills and will induct you to the programme.

For those of you who are mentors -thank you for volunteering your time and experience to the Peer Mentoring Programme – we hope you have had a positive experience so far!

Please confirm whether you can attend by emailing (organisers) for catering and planning purposes. Participating in a work shop is required to receive the Peer Mentor certificate at the end of the scheme.

### **Step 9: Finish + end evaluation**

As discussed above, ongoing evaluation is extremely important to ensure the scheme is fit for purpose and the quality is ensured. You can find an example of the evaluation surveys for mentors and mentees in the Resource Section. Our experience tells us that unfortunately the return rate of the survey tends to be poor. This is why when we recruit mentors, we specify that they must return the end of mentoring survey in order to receive a certificate. Mentors are also reminded to encourage their mentee to give them feedback and also to return the anonymous mentee survey.

We hope you find this manual helpful and we wish you all the best in setting up your successful peer mentoring scheme.

# EXAMPLE TIMELINES

Timeline – Peer Mentoring Scheme for 6-months rotations (Core Trainees / GP-GPVTs)

Generic timeline	Rotation months	Tasks	Evaluation (Mentors)	Evaluation (Mentees)	
- 1 month	July/January	E-mail to Mentors (CTs/ SpRs) to invite to for training	Before: Mentoring Learning Questionnaire (Application 1)		
		One hours session on basic mentoring skills – Skilled Helper Model Stage 1+2; mandatory for new mentors			
		One hours session on advanced mentoring – Skilled Helper Model Stage 3; practicalities of the programme; mentors sign up for scheme; mandatory for new mentors			
0 (induction)	August/February	Session during induction and stall - new starter sign up to be mentees		Pre-mentoring Questionnaire	
		E-mail to all new trainees, allowing to sign up if they haven't yet – up into 2 weeks into rotation			
		3 <sup>rd</sup> week: Matching of mentors and mentees			
		E-mail to mentors and mentees introducing each other Attached: information sheet; contract? Mentors encouraged to contact mentees to arrange first session			
+ 1 month	September/March		3 mentoring sessions	Mentors Learning Questionnaire (Application 2)	Post-mentoring questionnaire & feedback form
+ 2 months	October/April	Reminder e-mail 1			
+ 3 months	November/May	Supervision / workshop			
+ 4 months	December/June	Reminder e-mail 2			
+ 5 months	January/July	(if second round of scheme, recruit mentors)			
+ 6 months	February/August	Thank you e-mails and certificates mentors and mentees completing the course			

Timeline - Peer Mentoring Scheme for 4-months rotations (FYs)

Generic timeline	Rotation months	Tasks	Evaluation (Mentors)	Evaluation (Mentees)
<b>- 1 month</b>	July	E-mail to Mentors (CTs/ SpRs) to invite to for training		Before: Mentoring Learning Questionnaire (Application 1)
		One hours session on basic mentoring skills - Skilled Helper Model Stage 1+2; mandatory for new mentors		
		One hours session on advanced mentoring - Skilled Helper Model Stage 3; practicalities of the programme; mentors sign up for scheme; mandatory for new mentors		
<b>0 (induction)</b>	August	Session during induction and stall - new starter sign up to be mentees		Pre-mentoring Questionnaire
		E-mail to all new trainees, allowing to sign up if they haven't yet - up into 2 weeks into rotation		
		3 <sup>rd</sup> week: Matching of mentors and mentees		
		E-mail to mentors and mentees introducing each other Attached: information sheet; contract? Mentors encouraged to contact mentees to arrange first session		
<b>+ 1 month</b>	September	Reminder e-mail 1	3 mentoring sessions	Mentors Learning Questionnaire (Application 2)  Post-mentoring questionnaire & feedback form  Pre-mentoring Questionnaire
<b>+ 2 months</b>	October	Supervision / workshop		
<b>+ 3 months</b>	November	Reminder e-mail 2 Retain mentors for 2 <sup>nd</sup> round		
<b>+ 4 months / 0 (induction)</b>	December	Thank you e-mails and certificates mentors and mentees completing the course  Recruitment of 2 <sup>nd</sup> round of mentees (as in August)		
<b>+ 1 month</b>	January	Reminder e-mail 1	3 mentoring sessions	Mentors Learning Questionnaire (Application 3)  Post-mentoring questionnaire & feedback form  Pre-mentoring Questionnaire
<b>+ 2 months</b>	February	Supervision / workshop		
<b>+ 3 months</b>	March	Reminder e-mail 2 Recruit mentors for 3 <sup>rd</sup> round		
<b>+ 4 months / 0 (induction)</b>	April	Thank you e-mails and certificates mentors and mentees completing the course  Recruitment of 3 <sup>rd</sup> round of mentees (as in August)		
<b>+ 1 month</b>	May	Reminder e-mail 1	3 mentoring sessions	Mentors Learning Questionnaire (Application 4)  Post-mentoring questionnaire & feedback form
<b>+ 2 months</b>	June	Supervision / workshop		
<b>+ 3 months</b>	July	Reminder e-mail 2 Start from beginning / Recruit new mentors		
<b>+ 4 months</b>	August	Thank you e-mails and certificates mentors and mentees completing the course		

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