

The Two-Way Street: How to Mentor Effectively and Get the Most out of Mentorship

Case Vignettes

Part 1: The First Meeting

Setting: Dr. Taylor is a junior faculty member six months into their first position after residency. They have been assigned a senior faculty mentor, Dr. Reeves, with the expectation that they will develop a longitudinal mentoring relationship. Today is their first meeting.

It's been a busy day, and they glance at the clock — the meeting is in 10 minutes. They take a few moments to collect their thoughts about what they want to make sure to discuss.

Your task: Take the perspective that is most applicable to your current career stage — either Dr. Taylor (the mentee) or Dr. Reeves (the mentor).

1. **On your own (1 minute):** Jot down a list of things you might want to discuss or address in this first meeting.

2. **With your partner (3 minutes):** Share your lists. What themes emerge? What did others think of that you didn't?

Part 2: Mentorship Challenges and Opportunities

Dr. Reeves (mentor) and Dr. Taylor (mentee) have been meeting regularly. The relationship has been going reasonably well — until now.

Scenario A: The Overwhelmed Mentee

Dr. Taylor has been open about feeling stretched thin. They describe struggling to keep up with their clinical workload, feeling inefficient compared to colleagues, and worrying about the quality of their supervision of trainees. They mention staying late most days and feeling guilty about time away from family. At one point Dr. Taylor says, "Sometimes I wonder if I'm really the right fit for this job."

Discussion prompts:

1. What might be going on for Dr. Taylor? What different issues might be tangled together here?
2. What role might Dr. Reeves play in addressing these concerns? What is within the scope of a mentor, and where might Dr. Reeves need to connect Dr. Taylor with other resources?

Scenario B: Feedback That Didn't Land

Dr. Reeves and Dr. Taylor both serve on a departmental committee. During a recent committee meeting, Dr. Reeves observed Dr. Taylor interrupt several colleagues and push back on others' ideas in a way that seemed to shut down discussion. At their next mentoring meeting, Dr. Reeves raised this observation and suggested that the approach may not have landed well with the group. Dr. Taylor was quieter than usual for the rest of the meeting. The following week, Dr. Taylor cancelled their next scheduled mentoring meeting, citing a conflict.

Discussion prompts:

1. What might have happened here? What could be contributing to Dr. Taylor's response?
2. How might Dr. Reeves handle this going forward? Is there anything Dr. Reeves might consider doing differently when offering this kind of feedback in the future?

Scenario C: The Stalled Promotion Packet

Dr. Taylor has expressed a clear intention to go up for promotion and seems genuinely motivated. But over the last several meetings, the concrete steps they agreed to take — updating their CV, identifying letter writers, drafting a personal statement — haven't happened. Each time, Dr. Taylor acknowledges the plan but arrives having made no progress. They don't offer much explanation, and the conversation moves on to other topics.

Discussion prompts:

1. What might be going on here? What could be contributing to Dr. Taylor's pattern of not following through despite stated motivation?
2. How might Dr. Reeves approach this effectively — without nagging, but without continuing to let it slide?

Part 3: Your Commitment

What is ONE best practice from today you will incorporate into your mentoring relationships?

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