California’s Professional Mentoring Program: How to develop a statewide mentoring program

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ABSTRACT

Trends in downsizing, restructuring, increased diversity, and individual responsibility for career development have sparked a renewed interest in mentoring. Technology is changing the way professionals practice, including dieticians. This is reflected in the strategic goals for the American Dietetic Association (ADA). In 1999, with the aid of an ADA Affiliate/Dietetic Practice Group (DPG) Collaborative Strategic Initiatives Grant, a Mid-Career Mentoring Program (MCMP) was developed in California. This program provided an opportunity for dietitians with advanced skills (mentors) to be matched with those desiring to develop new skills (mentees). A six-step process was used to develop the program. The six steps include: appoint a coordinator; identify prospective mentors; locate resources; define tasks and establish procedures; identify mentees; and begin the program. A final product of the grant was the development of the handbook The Helping Hand. This handbook can be used by other affiliates or practice groups that may wish to develop a mentoring program. Mentoring programs can assist registered dietitians and DTRs (dietetic technicians, registered) in developing their educational plans for the new Professional Development 2001 certification process. J Am Diet Assoc. 2003;103:73-76.
the District Executive Board. Primary responsibilities are to match, train, and support mentors and mentees as well as to maintain open communication among all of these groups.

Coordinator positions require the ability to help individuals develop their utmost potential. Coordinators must possess maturity, experience, a grasp of the mentoring process, understanding of career development, and the ability to assume a leadership role in the implementation of a mentoring program. Maintaining high standards and enthusiasm at this level is vital for the success of the program.

Step Two: Identify Prospective Mentors
District Mentor candidates were found via news bulletins, the CDA Web site, meeting announcements, word of mouth, and telephone calls. These candidates were interviewed by the District Mentoring Coordinators. We adopted a mentoring model developed by Phillips-Jones (1), in which she identified specific and core skills required of both mentor and mentee. Core abilities include identifying goals and current reality, building trust, encouraging, and most importantly, active listening. Active listening is a key communication skill for maintaining an effective mentoring relationship.

The critical skills Phillips-Jones identified for mentors are: inspiring, providing corrective feedback, managing risks, opening doors, and instructing/developing capabilities (1). One of the greatest gifts a mentor can give is constructive guidance in making changes. Such an invitation challenges the mentor to act as model, counselor, confidante, teacher, advocate, and advisor. Another vital quality is knowing oneself. To be of value to another, the mentor must understand the feelings and fears encountered by their mentees. Mentors provide continuity and help mentees bridge the gap between past and future (2-5).

Step Three: Locate Resources
The next challenge we faced was identifying resources. It was suggested that the coordinators and mentors decide together what resources they would need and how to obtain them. Resources included the ADA practice groups’ dietic mentoring programs; dietitians working in unique areas such as performance improvement, private practice, and research; classes offered at local colleges and universities; conferences; books, magazines and professional journals; the media; and the Internet.

Several sources provided funding for the project. In addition to the ADA grant funds, the CDA budgeted additional funds for the MCMIP in the fiscal year 2000-2001. A generous donation from the CDA Clinical Nutrition Managers Practice Group supported the first training session and enabled the purchase of three copies of Mentoring That Makes a Difference (6), the video used in the district training. A primary defined outcome for this grant was to develop a procedural manual for the districts, other affiliates, and practice groups. The project advisor used approximately 70% of the ADA grant to develop the manual The Helping Hand (7) and a Power Point presentation of Lesson Plan developed by Teresa Bush-Zurn for this program provided District Mentoring Coordinators with guides and references. In addition to forms and procedures, the Helping Hand (7) contains sections on activities, case studies of mentoring situations, mentoring resources, and a glossary and appendix with job descriptions of coordinator, mentor, and mentee positions.

Issues addressed in the development procedures were: (a) Who will conduct interviews? (b) What forms will be needed? (c) Who will maintain written records? (d) How is a mentoring match made? (e) How long should a mentoring match continue? (f) How often should mentors and mentees meet, and are alternative forms of communication such as e-mail, telephone or fax acceptable? (g) What evaluations are needed, and how are the interviews to be conducted? (h) What policies and guidelines will be created for maintaining confidentiality?

Step Five: Identify Mentees
The grant proposal specified that mentors be members of the CDA with emphasis on recruitment of dietitians who have been in practice for at least 3 years. The same promotional strategies for mentors were used to recruit mentees. The District Mentoring Coordinators matched mentors and mentees. Phillips-Jones (1) identified additional mentee-specific skills as acquiring mentors, learning quickly, showing initiative, following through, and managing the relationship.

Roles of mentees may differ with each individual and each situation or setting. For some, especially those in midcareer, being a mentee may involve role reversal. In this technological age, the more experienced person may very well be the younger individual. Some mentees accept this and recognize the need to be open to new ideas and practices. Others may find the adjustment difficult and experience anxiety; they may feel that the pressures of such change are too great and may decide not to seek mentoring at all. Those who are ready for change bring an enthusiasm and freshness to the relationship that is stimulating for both mentor and mentee (2).

Step Six: Begin the Program
For the success of the mentoring program, training, especially that of the mentors, is essential (1,8,9). In September 1999, the CDA annual business meeting provided an opportunity for training prospective District Mentoring Coordinators and mentors. The session included an overview and discussion of a variety of topics: the importance of mentoring, the Power Point presentation of the Lesson Plan for mentor-mentee training, the video Mentoring That Makes a Difference (6), and an explanation of a number of handouts useful for mentors and mentees alike. These handouts eventually became part of The Helping Hand (7) manual. The training session attempted to clarify expectations that mentors and mentees may have of each other. The video provided information about the general role and function of the mentor and mentee and about their specific responsibilities. Other relevant topics were the purpose of the statewide mentoring program, logistics of the program, time management, stress management, communication skills, and values clarification. The importance of providing op-

1To obtain a copy of Lesson Plan, send an e-mail to Teresa.Bush-Zurn@med.va.gov
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IMPLEMENTATION OF PROGRAM

Promotion
Once the basic strategies of the mentoring program were established, attention was turned to promoting it. The target audience consisted of dietitians considering a career change, those eager to upgrade skills and enhance their potential, those re-entering the field of dietetics, and those who simply wished to evaluate their career status in the field. The promotional message was designed to inform this audience about the program—the who, what, when, where, and why. Promotional techniques varied. One district simply listed the qualifications of mentors. Listing the qualifications and skills of mentors gives insight into the type of help available through this program. Another strategy used was a testimonial such as a former mentee who became a Certified Diabetes Educator (CDE) through the mentoring program (10). Promotional tactics also included spreading the word via dietetic news bulletins, flyers, announcements, telephone calls, dietetic web sites, articles, and testimonials, poster boards, and presentations at state and district meetings.

Training within the Districts
As stated earlier, during the course of this project, a Power Point Lesson Plan was developed and adapted for the districts. The Lesson Plan included the following.

Introduction The introduction is a review of the program’s objectives for the mentor and mentee.

Why a Mentoring Program? The discussion focused on how this mentoring program supported the ADA vision and strategic goals, and how this mentoring program could be used as a part of one’s learning plan in the new Professional Development Portfolio 2001.

Video Viewing This is a presentation of the video Mentoring Makes a Difference (6). After viewing, there was discussion of the critical core and mentor-mentee-specific skills. The participants assessed their skills and identified their strengths and areas for improvement. These were considered in planning their mentoring activities and goals at the conclusion of the training session.

Reflection of Mentoring Experiences Participants were asked to recall two mentors from their past, and to describe how they met and what the mentor and mentee gained from their relationship.

Evaluation Strategies This was a discussion of survey tools to be used by the mentors and mentees. These tools are described in The Helping Hand (7).

Mentor and Mentee Exchange This exchange was a discussion of how the mentor and mentee develop and identify objectives, measures, developmental activities, resource/support, and timelines.

After the discussion, the mentor-mentee pairs meet to discuss their plans. This district training takes approximately 2 hours to complete.

RESULTS
As mentioned earlier, two significant outcomes of this project were the development of the manual The Helping Hand (7) and the Power Point presentation Lesson Plan. Other outcomes were documented in progress surveys that were conducted May 2000 and May 2001. As of May 2000, nine of the 11 districts were participating in the mentoring program. The two districts that did not participate were smaller districts and did not have the needed personnel. By May 2001, the number of participating districts had decreased to seven. The time, interest, and energy a coordinator and mentor must invest plus the money available for expenses in the program are determinants for success, and in some districts the needs proved to be greater than resources available. Consequently, some districts chose to limit their participation or to drop out of the program entirely. During spring 2002, in an attempt to alleviate this problem, the CDA Education Council proposed that those districts wishing to appoint a coordinator should be encouraged to do so. For those districts unable to appoint a coordinator, the State Professional Mentoring Coordinator will make the mentoring assignments, taking into consideration the workload and geographic proximity of the districts.

Between June 1999 and May 2001, approximately 60 registered dietitians (RDs) participated as mentors in the program. Forty-eight RDs and DTRs sought information about the program, and 15 of these actively engaged in a mentoring relationship. Additionally, 32 dietitians were known to have established informal contacts with mentors. Questionnaires were mailed to each District Mentoring Coordinator in May 2001. When asked about the most meaningful aspects of this program, the comments were:

- Getting positive feedback from mentees
- Helping to change the direction of another person’s career
- Networking and finding mentors through interaction
- The opportunity to provide support to RDs at a career crossroad
- Connection of RDs with skills and those who desire them
- Open options that RDs may not otherwise have available
- The informal contacts made with students interested in the profession
- The potential for this program to assist RDs in developing their education plans for the Professional Development 2001 certification process
- The great resources available to those interested in the mentoring process.

The successful outcomes of the mentoring program are illustrated by the following accounts from two former mentees. In a short article in the San Jose District Bulletin, News and Views, Mitani (11) described her experience with the MCMP. After working for 10 years in the high-tech industry, she decided to upgrade her knowledge of dietetics—specifically in the area of diabetes. Her mentor was Pat Schaaf, research dietitian at Stanford Hospital, who arranged for her to experience some of the newer practices in the field of dietetics. The impact of her experiences inspired Mitani to become a CDE.

Milliken (10) wrote, “I entered the Mid-Career Mentoring
Traditionally, mentoring has been the process by which the wisdom of one generation is passed to the next (13-15). Today organizational trends such as downsizing, restructuring, teamwork, increased diversity, and individual responsibility for career development have created a renewed need for mentoring (16). This comes at a time when the information age is demanding a wider range of cognitive, interpersonal, and technical skills (17-20). A mentoring program can:

- Assist the RD and DTR in completing a sponsored independent learning contract as part of the new CDR Professional Development Portfolio (12)
- Help to bring about positive career changes by providing opportunities for becoming acquainted with new developments in the field of dietetics
- Provide opportunities for the more skilled and knowledgeable dietitians to be matched with those wanting to further develop their own skills
- Provide opportunities and limited experiences for students wishing to enter the profession of dietetics under the guidance of experienced RDs

**Applications**

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**References**