



Singapore Healthcare
Management 2019



Both Individuals and SGH Win in Mutually Beneficial Mentoring Partnerships

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Background

In vocational psychology, mentoring has been found to benefit both mentees and mentors in job satisfaction, self-esteem, and organizational commitment (Gill & Roulet, 2019; Underhill, 2006). In healthcare, multiple studies have shown that mentoring significantly benefits healthcare professionals across specialties in career planning, professional connectedness, self-reflection and research skills (Efsthathiou et al., 2018; Nagarur, O'Neill, Lawton, & Greenwald, 2018). With evidence that mentoring adds value to staff and the organization, we launched the SGH Mentoring Programme in 2018 together with all SingHealth institutions, starting by targeting the middle management.

Aims

- 1 Create, design and sustain a scalable mentoring programme through **collaborative partnerships** within 12 months.
- 2 Develop **holistic resources** that will provide end-to-end support for our mentees and mentors from training, matching, networking, and reflecting.

Problems

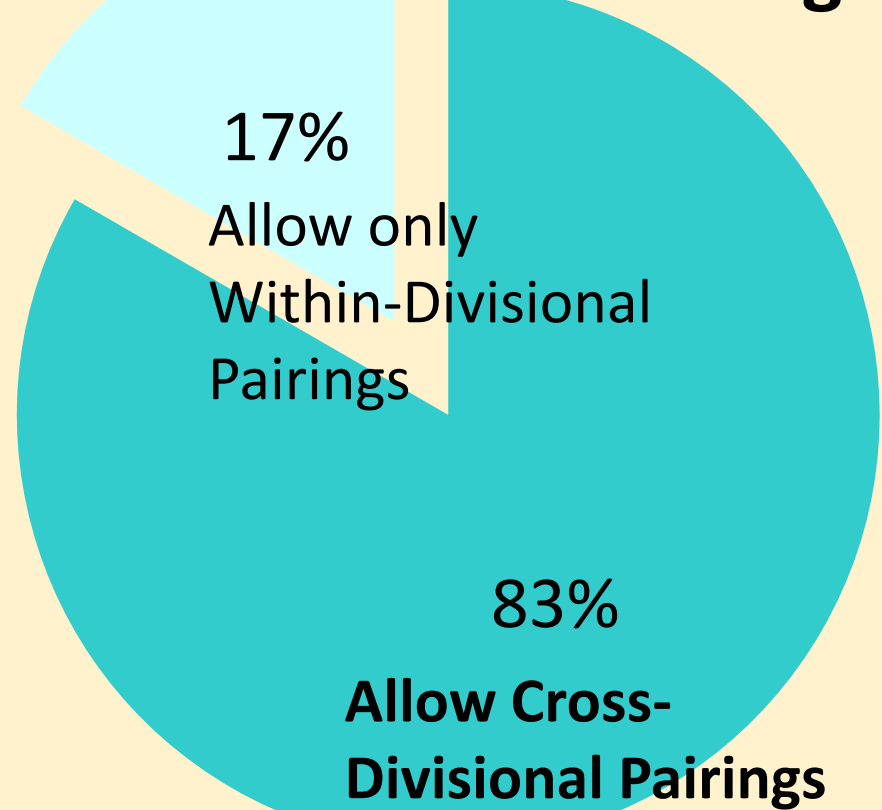
There was no existing mentoring framework to take reference from for the scale of programme faced by SGH, which will involve more than 400 mentees and mentors.

Existing mentoring platforms were smaller in scale and provided either no training and resources, or conducted them in silo.

Results

Collaborative Partnerships are Enhanced

Divisions that Allow Cross-Divisional Pairings

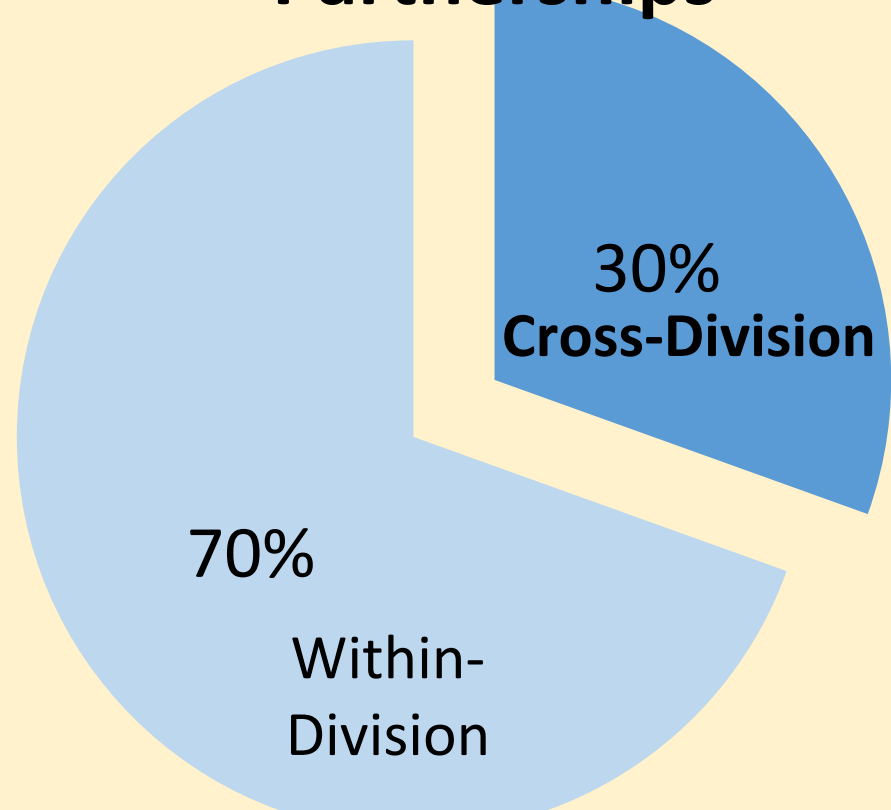


83%

of SGH Divisions allowed mentees* to choose mentors from other divisions.

* Refers to mentees in the target Mentee Pool designated by SingHealth, based on FY18 records.

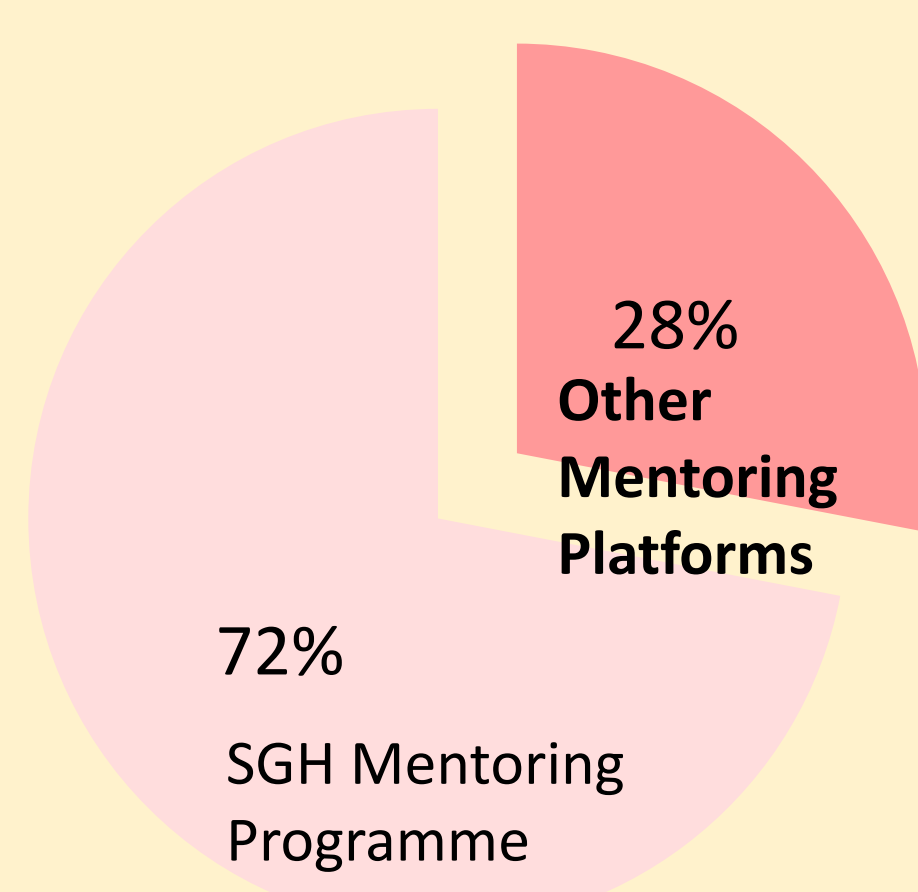
Mentoring Partnerships



30%

of SGH mentees* had mentors from a different division.

Mentoring Platforms

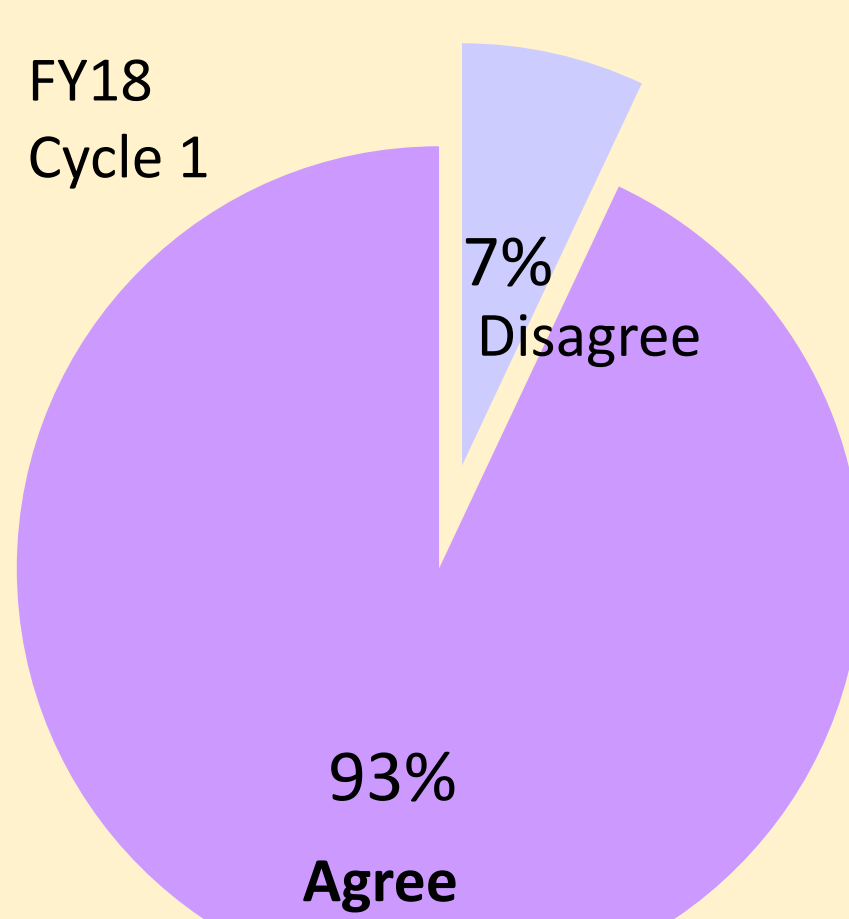


28%

of SGH mentees* are from mentoring platforms other than the SGH Mentoring Programme.

Usefulness of Holistic Resources

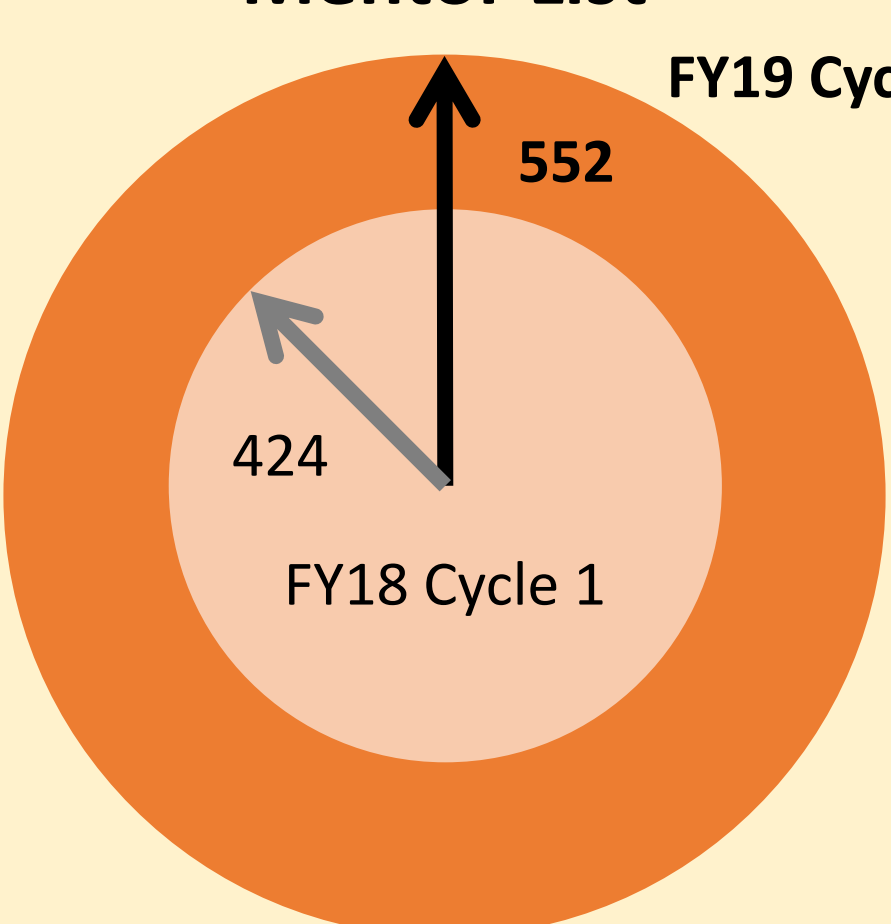
Training Effectiveness



93%

of participants agree that training provided the required competencies and relevant tools that they can apply in mentoring.

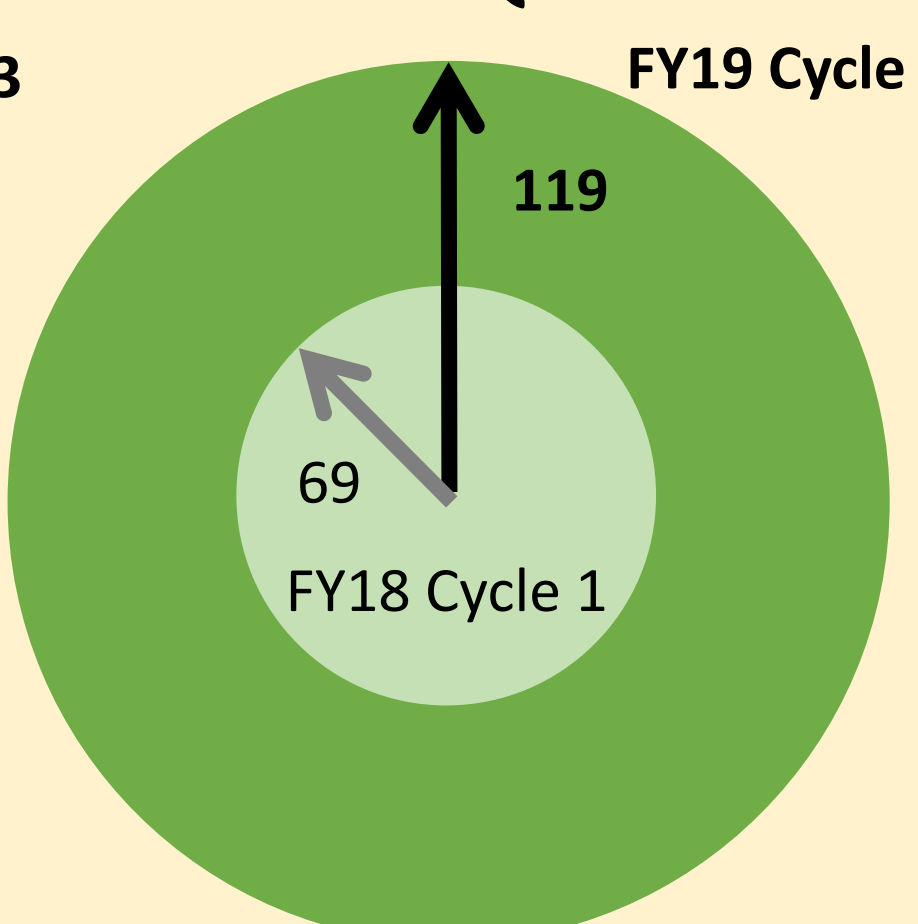
Number of Views for Mentor List



30%

Increase in views# of SGH's full mentor list from FY18 Cycle 1 to FY19 Cycle 3.

Number of Views for FAQs



72%

Increase in views# of the FAQs from FY18 Cycle 1 to FY19 Cycle 3.

Views are tracked 3 months before Cycle begins (Cycle 1: June – August 2018; Cycle 3: Apr – May 2019). Includes views by the Mentoring team.

Conclusion

In 12 months, our approach enabled us to :

- Build and reinforce mentoring skillsets, toolsets, and shift mindsets
- Enhance collaboration - one of SGH's core values - across divisions and mentoring platforms, resulting in greater synergy across specialties
- Develop useful, holistic resources for mentees and mentors
- Lay the foundation for a mentoring culture in SGH
- Achieve 324 mentoring matches* in FY18

* Based on mentees in the target Mentee Pool designated by SingHealth.

Methods

To address the first aim:

- Encouraged all division heads to allow:
- Mentee choices
 - Cross-divisional matches

Collaborated with existing mentoring platforms in SGH and SingHealth:

- Allied Health Division
- ACP Radiological Sciences
- Emergency Medicine
- Group Allied Health
- Research Mentoring

Created an internal workgroup with members representing all staff categories to define how mentoring can be meaningful for our staff:

- Administration
- Medical
- Nursing
- Allied Health



Internal Mentoring Workgroup

Division Heads

Collaborative Partnerships

Research

Other Mentoring Platforms

Structured framework and execution by thorough research from organizational psychology and other corporate programmes:

- Journal of Vocational Behaviour
- Journal of Hospital Medicine
- Massachusetts General Hospital
- Chronus

To address the second aim:

Resources and materials were developed and made accessible on Infopedia:

- Mentor Profiles
- Mentee Profiles
- Infographics
- FAQs
- Learning Plan
- Insights Journal

6 MENTORING MYTHS DEBUNKED

MYTH FACT

1. Mentoring is only for senior staff and those with additional experience.

2. Mentoring is only for those who are not confident in their own abilities.

3. Mentoring is only for those who are not confident in their own abilities.

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30. Mentoring is only for those who are not confident in their own abilities.

Contextualized Training Open to All Mentoring Platforms

To align with SingHealth's learning objectives for mentees and mentors, we

- Worked closely with an external consultant to contextualise training for healthcare
- Made training available to staff in other mentoring platforms in SGH.



Diverse Training Options

To cater to mentors with tight schedules, we co-designed a 2-hour Power-Packed Refresher of mentoring skills with our trainer, which is offered only by SGH. Staff may also choose to attend full-day Mentor Training or half-day Mentee Training.

Extensive Support

Holistic Resources

Mid-way Mentor Coaching

Mentor coaching was offered to mentors mid-way of their mentoring.

Mentors exchange tips and receive coaching in a 1-hour Booster session.

CEO, CFO, Prof Chow, Prof Ruban & Prof Tan Bien Soo at February 2019's Networking Session



References:

- Efsthathiou, J.A., Drumm, M.R., Paly, J.P., Lawton, D.M., O'Neill, R.M., Niemierko, A., et al. (2018). Long-term impact of faculty mentoring program in academic medicine. *PLoS ONE* 13(11): e0207634.
- Gill, M. & Roulet, T. (2019). Stressed at work? Mentoring a colleague could help. *Harvard Business Review*.
- Nagarur, A., O'Neill, R.M., Lawton, D., & Greenwald, J.L. (2018). Supporting faculty development in hospital medicine: Design and implementation of a personalized structured mentoring program. *Journal of Hospital Medicine*, 13(2), 96 - 99.
- Underhill, C. M. (2006). The effectiveness of mentoring programs in corporate settings: A meta-analytical review of the literature. *Journal of Vocational Behaviour*, 68, 292-307.