



Burke PM&R Residency Mentorship Improvement Project



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Context

When Burke's rehabilitation PM&R program began in 2016, they had assigned new residents with an advisor at random, and then re-assigned those residents based on how their interests changed thereafter during their residency, which caused inconsistencies and disruption of advisement. When the program director left abruptly in March of 2019, the mentorship program denigrated and was not reinstated with the start of the new resident cycle. There was no formal monitoring of the mentorship program when I became program director in September 2019.

Mentorship is an important aspect of PM&R training, and one that the ACGME affirms is a critical part of all specialty training. Residents need guidance to help them along their career path, and although many faculty provide intermittent mentorship- there needs to be a formalized process in place to make sure that no one slips through the cracks, and those with particular expertise in areas of interest for the resident are paired appropriately.

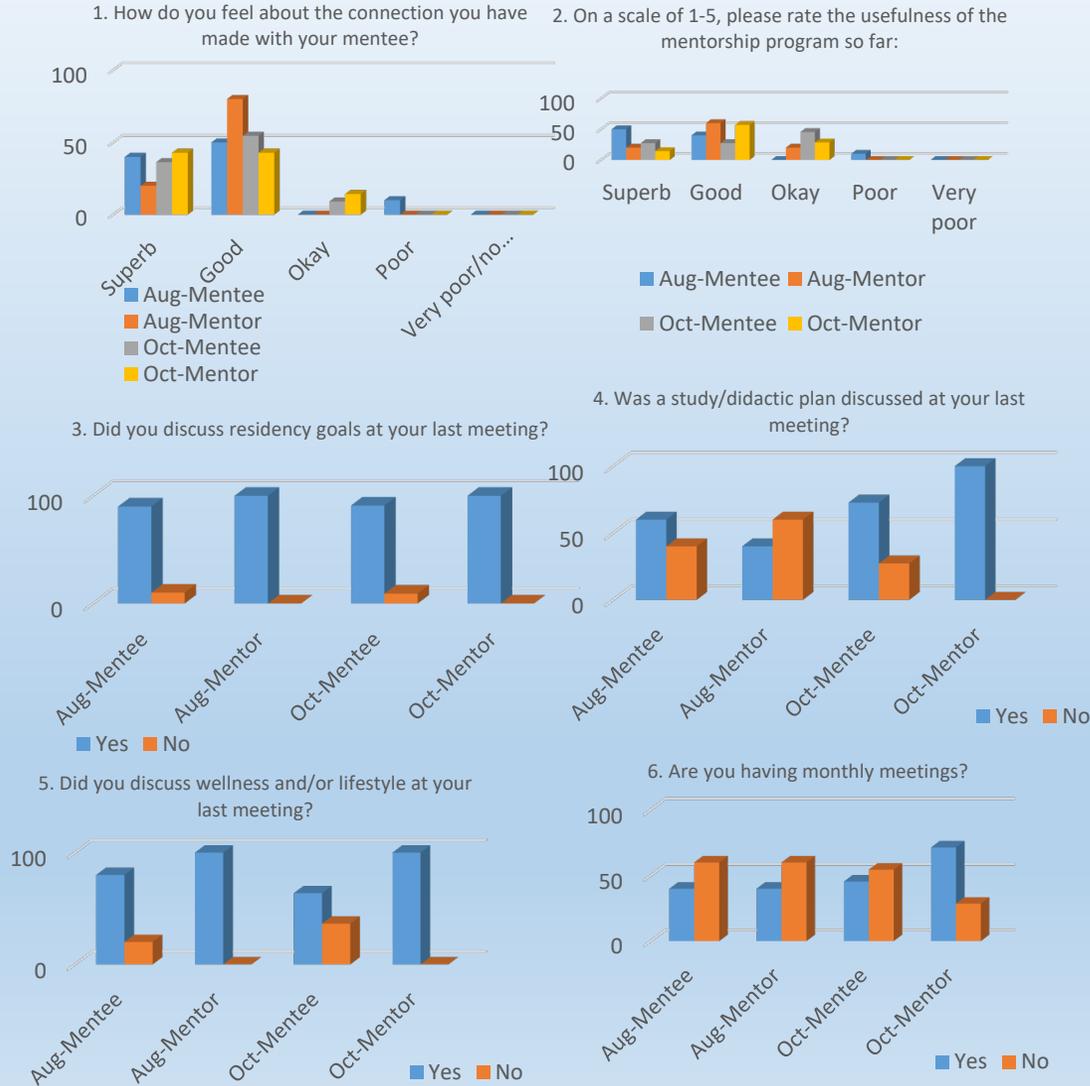
The goal was to reinstitute a mentorship program that was mutualistic and synergistic, and one that not only met the requirements of the ACGME, but also helped to guide residents to achieve success.

Study Design

An inquiry was sent to incoming residents asking them their levels of interest in various aspects of PM&R (General, SCI, Brain Injury, Sports, Pain, etc.). We also attempted to glean other aspects of resident interest such as anticipated geographic locale (mid-West, East Coast, etc.), practice type (inpatient, outpatient, academic, private practice, etc.), and interests outside of residency (such as cooking, running, travel, etc.). Once this was ascertained, they were paired with a mentor who appeared compatible with as many elements of their interest questionnaire as possible.

The program coordinator disseminated pairings to the residents. We used a randomized electronic platform (through SurveyMonkey) for measurement of data, and to protect resident confidentiality.

Outcomes



Study Design (cont)

We created individualized surveys for both the resident and mentor. Their feedback was traced through a Likert scale- to have quantifiable data to monitor. 2 surveys were performed to monitor progress. The content of the surveys encompassed their compatibility, goals, relationship, and usefulness of the program.

Results

All residents (including PGY-4 residents) completed the survey. The PGY-4 residents all had mentors, with whom they kept. All others (PGY-3 and incoming PGY-2 residents) were assigned to mentors as described in the study design.

The results of the 2 questionnaires sent both to mentor and mentee revealed that most parties felt that they made "superb" or "good" connections, and felt the mentorship program had either "superb" or "good" utility. Almost all parties felt that residency goals were addressed, as well as wellness and/or lifestyle at meetings. The outcomes were mixed in terms of reports regarding study/didactic plan discussions, with most mentors and mentees beginning to discuss this metric by the October questionnaire. Only about 50% of subjects were having monthly meetings, although most reported having "regular" meetings.

Conclusions

My ultimate goal was to establish a formalized mentorship program, as this is a necessary part of PM&R residency. Beyond the requirements of the program, however, I hoped to achieve improvements in both resident and faculty interaction. I believe that based on the survey data, that both the resident and faculty felt that the mentorship program was useful (see analysis of data), and the primary objectives were achieved.

The primary objective moving forward is to sustain the connections that these pairs have made, and facilitate resident matriculation into jobs, fellowships, and achieve success in their residency program. Some additional considerations that might facilitate the process might include sending the survey out earlier in the process (during their intern year), as well as rotating faculty to prevent faculty mentor fatigue. Finally, having regular (e.g. quarterly) check-ins with residents/faculty might be beneficial from the program director's standpoint to ensure adherence to regular meetings and optimizing the experience for all.