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Covid-19 Insights



Virtual speed mentoring in challenging times

Harish Kumar Thampy¹, Subha Ramani^{2,3}, Judy McKimm⁴, and Vishna Devi Nadarajah⁵

¹Division of Medical Education, The University of Manchester, Manchester, UK
²Department of Medicine, Brigham and Women's Hospital, Boston, Massachusetts, USA
³Harvard Medical School, Boston, Massachusetts, USA
⁴College of Medicine, Swansea University, Swansea, UK
⁵School of Medicine, International Medical University, Kuala Lumpur, Wilayah Persekutuan, Malaysia

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entoring relationships should provide a safe and supportive environment for mentees to openly discuss and reflect on their strengths and limitations and formulate professional development plans, facilitated by mentors. Whereas traditional mentoring models emphasise dyadic long-term relationships between junior mentees and senior mentors, newer models accept single focused interactions, short-term relationships, peer and group mentoring, and mentor networks that offer varying perspectives and goal-directed advice. Virtual mentoring has the added benefit

of connecting geographically distant mentors and mentees.^{2,3} Regardless of the format, mentee-driven agendas and goals should form the core of mentoring interactions.⁴

Speed mentoring, based on speed dating, allows mentees to interact with multiple mentors in a time-focused session, and is increasingly offered at institutions and at national and international conferences.⁵ This format allows individuals to obtain a variety of expert insights on specific professional and career-related questions, offering possible longer-term relationships

and access to an incredible breadth and depth of collective wisdom. The attendance and chat comments during the Association for Medical Education in Europe (AMEE) coronavirus disease 2019 (COVID-19) webinar series led us to believe that clinical educators were eager for insights on implementing creative educational strategies for their institutions and health care settings, as well as for their own career development. Based on our previous experience in delivering in-person speed-mentoring workshops, we concluded that this format could be effective as a virtual workshop. Our tripartite aim to

support a global community of health care professions educators (HPEs) and clinical teachers in navigating challenging circumstances, such as the COVID-19 pandemic, focused on building opportunities, skills and community (Figure 1). The authors are clinical and non-clinical educationalists from three countries, with a shared interest in mentoring, building communities of practice, and experience in speed mentoring and virtual presentations. Building on previous connections, we used multiple e-mails and video conferences to finalise the workshop details and to share post-session insights from the experience.

The COVID-19 pandemic mandated an abrupt transition from live to virtual education. With restricted face to face opportunities, we therefore adapted our previous speed-mentoring workshop for virtual delivery as an AMEE webinar.⁵ The 1-hour session offered participant educators the opportunity to engage in

- Use online platforms that allow interactive discussions
- Adapt format and content to align with target audience
- Obtain diverse perspectives from multiple mentors
- Assure privacy and confidentiality
- Consider international regions and time zones

Building opportunities



conversations with international educational leaders and peer educators to discuss teaching and learning opportunities, and challenges, across the educational continuum, and to share tips for professional development. A total of 12 mentors were selected for geographic, cultural and career diversity, broadening the range of perspectives and expertise. A total of 40 HPEs and clinical teachers joined the session, representing several countries from Asia, Africa, Europe, and North and South America. Mimicking face to face workshops, the Zoom[™] (Zoom Video Communications Inc., San Jose, CA, USA) workshop used audience polls and breakout small group discussions moderated by two mentors, large group reports, and a question and answer session. Depending on the workshop aims and format, an online platform should be selected for its capabilities with regard to data protection and privacy.

Our virtual speed-mentoring workshop brought together a community of academic and

- Share challenges, stories and insights in a safe space
- Develop a mindset of innovation and change
- Faciltate discussions to collaboratively learn from collective experiences
- Manage expectations own and others'

Building skills and knowledge



- Support virtual global communities
- Support global (and glocal) communities to facilitate global solutions for local actions
- Connect mentor and mentee groups
- Adopt and adapt format to other settings – local, regional and international

Building community



Figure 1. Three core principles of a virtual speed mentoring workshop.

clinical teachers, to reflect on their educational and clinical contexts and professional advancement in challenging circumstances. Strategies used to create a safe 'learning' space, a top priority for this workshop, included: an icebreaker in the form of the question, 'What is one thing you tried recently that you are proud of?'; polls and chat questions; and small group conversations and group reports. Moderators and mentors empowered participants to share success stories, offer solutions to each other's challenges and reflect on continuing professional growth.

The 'chats' were transcribed, producing a 'key tips' post-session handout generated from the collective wisdom of both participants and mentors. Despite significant challenges and burdens created by the COVID-19 pandemic, many participants emphasised the opportunities for creative thinking, reflection, educational innovation, guiding and mentoring learners, and personal development and growth.

Bringing together international mentors and participants for an interactive virtual session requires considerable planning to avert potential challenges. Ideally, the small group size should be less than 10 to allow engagement with peers and well-known experts, especially if the presentation is not conducted in their first language. Back-up contingencies are needed in the event of technological malfunction. We organised a mock rehearsal in advance, in order to familiarise mentors with the technical functionality of the platform and to finalise the session content. Although we experienced connectivity issues for some lead presenters, other mentors quickly took on the presenter roles, seamlessly continuing the delivery of the sessions. Pre-assigning roles amongst mentors also helped to ensure that the verbal and

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chat-based discussions were efficiently facilitated for breakout groups.

Despite transient technology issues, we presented a highly interactive virtual workshop anchored by small group discussions. Perceived markers of success included: circular conversations, with participants responding to peers with suggestions; the sharing of personal stories during breakout discussions; and participant chat comments requesting further workshops using this format.

Chats with participants affirmed the value of the mentoring conversations with multiple educational leaders and peers in generating new and creative ideas to implement at their institutions and clinical workplaces, as well as continuing to focus on professional growth. Based on their feedback, regional virtual speed-mentoring sessions are being planned using moderators from various time zones, further supporting academic and clinical teachers as they navigate through challenging circumstances.

REFERENCES

- 1. Disch J. Rethinking mentoring. *Crit Care Med* 2018:**46**(3):437–441.
- Schichtel M. A conceptual description of potential scenarios of e-mentoring in GP specialist training. Educ Prim Care 2009;20(5):360–364.

- Stormann S, von der Borch P, Dimitriadis K. Online matchmaking enables large-scale individual mentoring. Med Educ 2010;44(5):492–493.
- Thisthwaite J. Mentoring: what's in it for both of us? Clin Teach 2016:13(5):323-324.
- Cook DA, Bahn RS, Menaker R. Speed mentoring: an innovative method to facilitate mentoring relationships. Med Teach 2010;32(8):692-694.
- Ramani S, Thampy H, McKimm J, et al. Twelve tips for organising speed mentoring events for healthcare professionals at small or large-scale venues. *Med Teach* 2020. https://doi.org/10.1080/01421 59X.2020.1737323

Corresponding author's contact details: Harish Kumar Thampy, Division of Medical Education, The University of Manchester, Oxford Road, Manchester, M13 9PL, UK. E-mail: harish.thampy@manchester.ac.uk

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