Could you be a mentor?

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Fiona Ellwood* has recently completed the FGDP(UK)'s first mentoring course. In this article she reports on her experiences and encourages other DCPs to follow suit.

Mentoring is a learning relationship which helps people take responsibility for their own development, to realise their potential and achieve their goals. Have you ever thought about developing your mentoring skills?

Since 2006 the roles and responsibilities of dental care professionals (DCPs) have undergone some dramatic changes. Whatever your role in dentistry, you will have been affected in some way by these changes. The new world for DCPs has created a host of opportunities and challenges that didn't exist before. How will we cope with this? Having a good chat with a friend or colleague is often enough. However, what if the issue is more complex or more significant? We may need a chance to talk a difficult problem over; others may want to look at career pathways, manage job transitions or discuss organisational politics. Whatever the issue, having some mentoring could make a really positive difference.

The Faculty of General Dental Practice (UK) or FGDP(UK) has recognised the need to develop and train more mentors. Vernon Holt, the Vice Dean, believes that mentoring has an important part to play in the future of all dental professionals at all levels and is the leader of the FGDP(UK)'s Mentoring Development Group.

So what is a mentor?

A mentor is someone who asks appropriate questions and doesn't offer solutions; someone who is a good listener, supportive but challenging, and has the ability to empower the mentee to reach their own solutions and conclusions.

A mentor:

- Can pick out key words and emotionally loaded statements from the mentee through active listening (allowing the mentee to expand their knowledge of the situation), as opposed to diagnostic listening (listening to the facts, filtering out relevant information and attempting to solve the problem). Many dental professionals are unaware that they are diagnostic listeners, perhaps because our roles are based on diagnosis
- Has the ability to use self-reflection on their practice and learn from their experience
- Understands their own inner strengths and mentoring styles
- Facilitates the mentee to challenge themselves and their self-imposed limitations
- Is able to stay mentee-focused and facilitate the journey between the various stages of the base model, or even revisit previous stages if necessary.

One of the most important factors is that both the mentor and the mentee establishes a trustful working relationship. Mentors have different working styles and qualities, many of which can be identified by using a professionally-administered Myers-Briggs Type Indicator (MBTI). Recognising your own style and qualities will help you decide how you work best with others and will support mentees when choosing the right mentor.

The programme

I recently attended the FGDP(UK)'s mentoring programme. It consisted of five study days held over a three month period. In between the study days we were all expected to undertake case studies, practise our new found skills and carry out further reading. The highly experienced programme tutors were Dr Mary Connor and Julia Pokora. They have co-authored the excellent book, *Coaching and mentoring at work: developing effective practice*.¹

The programme was based on the Egan Skilled Helper Model, which is divided into three stages:

Stage 1 - Allows the mentee to tell their story; this looks at the current issue or opportunity. Once the story has been told, there is opportunity to revisit anything that's been overlooked and eventually a 'leverage point' is reached and taken forward.

Stage 2 - Asks the mentee to look at what they really want and to come up with a number of possibilities to get there. At this point the mentee is supported in identifying a **SMART** goal, ensuring the mentee produces a timeframe and explains having reached this position, how they will be feeling, so looking into the future. The commitment is then tested; during this point the and the costs and negatives are discussed, not only to themselves, but to others too.

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Stage 3 - This looks at the possible strategies that could be explored to achieve the **SMART** goal. Quite often thought showers/mind maps are utilised in this process, to establish 'best fit' for the individual and what may help or hinder the mentee.

SMART = Specific, Measureable, Appropriate, Relevant and in a Timeframe

Each stage was discussed at length and practised in group work throughout the day. Some aspects of the model proved to be challenging, but actually made many of us look at things from a different perspective. At the end of each day there was an opportunity to give feedback and ask questions to the programme tutors.

How did I benefit from this training?

As the only DCP on the course I was worried that I wouldn't have much to contribute. However, it soon became apparent that what your job role entails has little impact on how effective you are as a mentor. As a dental nurse tutor, I did not find myself short of opportunities to practise my enhanced skills. Student dental nurses are often seeking one-to-one help about some problem or other. Some examples are:

- Not been taken seriously by either employers or colleagues – causing ill feeling and concern

- Not feeling valued - feelings of worthlessness
- Career direction and pathway issues - wanting to upskill, but knowing how to go about it
- Unhappy within the working environment
- Feeling of 'stuckness' - not knowing where or what to do next
- Loss of work/life balance
- Peer pressure to achieve set goals made by others, therefore a lack of control
- Professionalism of colleagues - identifying things are not quite right, not knowing who to turn to, or even if they are brave enough to take the issue further, because they may well lose their job
- Fear of failure - scared to look silly, or have others knowing that they have failed
- Coping with studies and work, pressures and commitment becoming too much, feeling alone and unsupported
- Dealing with expectations of others - 'what if I can't pass the course, where will this leave me?'
- Professional development planning - not sure what this is about, needing the process, but unable to implement it
- Struggling to manage the team effectively – lack of vision and skill. Team taking no or little notice, finding it difficult to manage a team who won't be managed
- High sickness/absence incidence in the workplace; lack of commitment to the practice and patients; a feeling of despair.

This course has completely changed my approach to this sort of situation and I believe for the better. I now feel more able to discuss an issue in depth and guide the mentee to work out their own solution, rather than having to find an answer myself. This means the mentee feels more confident in themselves and the chances of making a positive difference are much greater. A weight has been lifted from my shoulders as I no longer feel the need to find the solutions to mentees' problems or to own their issues; instead I empower them to do so. It's a win-win situation!

If you find yourselves in a position whereby others seek you out for support, guidance or advice, I would encourage you to consider a structured mentoring course. Perhaps you're a tutor, practice manager or senior dental nurse? In these exciting times of change for DCPs, you could make a really important contribution to someone's career. Contact the FGDP or your local postgraduate dental deanery for details of their next mentoring course.

www.fgdp.org.uk

1. Connor M, Pokora J. *Coaching and mentoring at work: developing effective practice*. Open University Press, 2007.