

## **SHINE**

### **Preliminary outline re mentoring**

As a personal and professional development tool, mentoring is used extensively, within organisations and professional communities of practice.

#### ***Key points***

##### **1. The purpose of a mentoring scheme should be clearly defined**

organisations use “mentoring” to mean a variety of interventions eg

- induction into the informal reality of an organisation
- coaching of a junior/less-experienced member of staff by a manager in order to pass on practical skills/expertise
- supporting professional growth where an experienced individual acts as guide/sounding-board for a mentee to explore their development

*What would SHINE want a scheme to do for members?*

##### **2. The relationship between mentor and mentee is key**

This relationship will vary with the purpose of the scheme

- where there is a formal relationship between mentor and mentee (eg where the mentor is also the line-manager of the mentee) there is less likely to be a forum for open discussion, and a narrower scope
- where the purpose of the scheme is professional development across a wide range of topics, there is more need for a relationship of open discussion and trust for the full exploration of issues

*What would be the expectations/responsibilities of mentors/mentees?*

##### **3. A quality assured scheme is likely to require more formal administration**

- an informal scheme could be very effective if aimed primarily at shared problem-solving and support
- a scheme which might also serve as accreditation (eg providing a local scheme which would also meet the mentoring requirement of the CILIP Charter) would probably require to be more formal
- monitoring and evaluation of any scheme would be necessary if it is to have credibility for mentees and mentors (and the organisations in which they work).

*How would the scheme be run?*

##### **4. The pool of healthcare information workers in Scotland is comparatively small**

- There may be opportunities to link up with other networks, where there may already be overlap within SHINE membership, to share training, costs, administration etc.(eg CILIP HLG, NHSScotland, HE, voluntary sector)

*Is there opportunity for joint working?*

Mentor options : possible formats

**Informal scheme**

Mentors	Mentees	Administration	Strengths & opportunities	Weaknesses & threats
Volunteer Receive generic training Name placed on list	Self-refer Access list Contact mentor	Minimal Training (via pack?) Maintain database	Open to everyone Mentors get a development opportunity Informal – build on relationships	No quality assurance of mentors- may not get “best” No monitoring or evaluation Hard to sell to employers “It happens anyway”

**Formal scheme**

Mentors	Mentees	Administration/requirements	Strengths & opportunities	Weaknesses & threats
Volunteer Go through approval process Receive training Matched with mentee/choice? Contract	Self-refer or referred by manager Receive training Matched with mentor/choice? Contract	Maintaining database Approval of mentor Training event mentor Training pack mentee Copy of contract	Quality assurance of mentor Matching ensures focus and manageability Mentors get a development opportunity Shared control	Too formal Too centralised

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