Advisor Role and Responsibilities Oct 2019. New Policy

Scope: Applies to all teaching faculty and residents at the HCMC Family Medicine residency program.

Background : Advisors play an important role in the development of Family Medicine physicians. They are key to assessing and monitoring resident progress through residency training. Their role includes advocating for residents, as well as being a connection between the program and the resident. Advisors teach, listen, and counsel. They may also be mentors to their advisees, or may assist the resident in seeking out and developing a separate mentor relationship.

Policy: Definitions:

<u>Advisee</u>. Resident assigned to advisor by the residency program.

<u>Advisor</u>. Faculty member assigned to resident advisee. Completes required duties as outlined by the residency program and delineated in this policy. May or may not also be a mentor.

<u>Mentor</u>. A person sought out by a mentee (in this setting a resident). Recommend a discussion by the mentee and mentor about needs and expectations, and that the two individuals develop an agreement about how formal the relationship will be. Mentors generally help advance the resident's career, and provide targeted guidance as requested by the mentee.

<u>Resident Evaluation meetings</u>. Monthly faculty meetings in which advisors present progress of the resident and seek input from others (faculty, RNs and program coordinators).

Advisor Responsibilities

1) Oversee Resident progress during training

- a) Complete Interim Evaluation forms before and during Resident Evaluation meetings.
 - i) Gather/collate/analyze data from various parts of the evaluation system to inform the evaluation
 - ii) Provide feedback to the resident related to the resident evaluation faculty meeting discussion
- b) Be aware of resident's upcoming rotations and associated learning goals, competencies and expectations. Assist in finding answers to questions about rotation schedules, requirements, etc. if resident need assistance.
- c) Review resident **self-assessments** (SASE forms) biannually and use this to guide and update Learning Pathways. Encourage self reflection about advisee growth.
- d) Guide and assist with elective choice (Choice of electives will generally be based on resident interest, resident knowledge gaps, and/or anticipated needs for transition to post residency practice.)
- e) Assist with career planning and development as requested by the advisee. Advisors may suggest that advisees seek out others to serve as mentors when appropriate.
- f) Encourage progressive leadership development during residency training

- g) Monitor clinical and non-clinical administrative work, including chart completion, in-box management, responses to program administration.
- h) Review In Training Exam (ITE) scores
- i) Monitor at least quarterly the completion of Lifelong learning assignments: ABFM CKSA questions(to be completed quarterly) and AFP quizzes(to be completed monthly).
- j) Review graduation targets (patient numbers, procedures)
- 2) Collaboratively work with the CCC and resident to complete Milestone ratings of advisees biannually.
- *3)* Provide advice, support and collaborative problem solving as necessary (resident-resident interactions, faculty-resident interactions, system issues, program concerns).
- 4) Serve as an advocate for the resident within the residency.
- *5)* Inquire about resident's self-care and overall wellness. Help with wellness plan if needed.
- 6) Participate in academic correction as needed in partnership with the CCC. This may include the development and completion of learning plans, and/or attending CCC meetings as requested.
- 7) Monitor progress in research and scholarly activities. Assist and advise as needed.
- *8)* Attach to and attend to the advisee's inbox after graduation.

Advisee Responsibilities

- Meet with advisor at least quarterly. Bring to those meetings: updates to lifelong learning progress (CKSA questions, AFP quizzes), elective choices and any concerns or questions.
- 2) Complete self assessments (SASEs) biannually, in a timely manner.
- 3) Keep advisor informed of any issues or concerns that may affect professional development in the residency training
- 4) Seek out mentorship from advisor and/ or reach out to another faculty/mentor as desired.

Procedures

- All residents are assigned to an advisor at the start of residency. This choice may be related to clinic anchor days/precepting days, common interests, or other factors and is completed by the residency program leadership.
- Advisors are expected to meet with their advisees at least quarterly. Time will be made available most months during Wednesday core conference time. If either the advisor or advisee is not available during this time, the dyad is responsible for finding an alternate time to meet.
- These meetings are documented on the Advisor/Advisee checklists which are available at the start of the year and then scanned into RMS. See appendix for an updated version.
- Residents may meet with their advisors in addition to the quarterly meetings as needed or as desired by the resident, advisor or program leadership.
- Changing advisors is expected to be rare and will be done at the discretion of the program leadership.