

Becoming a good leader — the role of mentoring

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Mentoring is a recognised way of developing leadership skills, but its full potential has not been realised in pharmacy. This article examines the attitudes of pharmacist mentors and mentees and describes a mentorship database developed in response



Mentoring is widely regarded as an important way of developing leadership skills, both in oneself and in others. Despite this, there has traditionally been no formal mentoring programme in pharmacy. Instead, informal networks and relationships are relied on as a proxy for mentoring — most pharmacists know a role model who they will go to for advice, reassurance or for an idea of how to deal with a challenge or difficult situation.

The Leadership Development Group, a joint group of the UK Clinical Pharmacy Association and the Guild of Healthcare Pharmacists, set about developing a

mentoring database, to build on the NHS leadership qualities framework. To do this, they decided first to evaluate the skills and attributes of a good mentor from the perspectives of mentors and mentees. Each member of the Leadership Development Group was asked to interview a pharmacist mentee and a mentor in their practice setting (in London, Wirral, Leeds, Leicester and Bristol). This article examines the responses given in the interviews and describes the database developed with these in mind. It follows on from an article about leadership by the same authors published in the June issue *Hospital Pharmacist*.¹

Mentor responses

The group of mentors interviewed shared some key characteristics. They all regarded themselves as having been informal mentors, differentiating this role from more formal mentorship, which they perceived to relate to being a tutor on an academic course. The time spent being a mentor was wide-ranging — from six months to more than 15 years.

All respondents indicated that they would be happy to be a mentor again and all viewed the activity as an integral part of their working life. One respondent said: "I am always mentoring — it's a part of my role. I've been doing it for 15 years. Some people ask for mentoring or coaching for a

new job. Others develop a natural mentorship relationship with you."

When asked about the key skills and qualities required to be an effective mentor, various themes emerged (see Panel 1, p228). These seem to correlate with the qualities of a good leader previously identified by the Leadership Development Group.¹

Specific comments about the attributes needed include: "A good mentor is someone with initiative . . . and experiences that they can draw upon in new and emerging situations" and: "A good mentor is someone who listens to the issues, then draws on their own experience and tries to produce a supportive framework for progress. They need to have had experience in a similar environment and encountered problems and their solutions." Another said: "You have to be able to mentor someone. But that doesn't mean that you yourself have to be complete — you don't have to be expert at everything." Another added: "You need good self-awareness and self perceptions — otherwise you just regurgitate books and theory, which is not very useful in practice."

When asked how they went about mentoring, responses varied. Most advocated an informal approach. For example: "I use regular informal telephone conversations to keep up to date with a mentee, as well as more formal meetings, and try to lead by example." Another said: "I advise going for a coffee! I am an informal

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mentor and find it easiest to chat things over. There are differences between mentoring and coaching (that require different skills) but generally you need to have an agreement to work towards career development in general or development within a specific post."

Responses reflected the fact that there is no single approach to fit all situations. For example: "It depends on why you are mentoring — mentoring someone within their current job or mentoring them for a new position. You have to adapt your style and approach to what the mentee needs and wants."

Some mentors reflected on the resources that they would have found useful when they began to mentor and also on what experience brings to the mentoring process. One said: "I found it hard at first to know what you need to be effective as a mentor. Some guidance would have helped." Another said: "For a long time, I didn't know what enabled me to mentor but then I found I was doing it naturally."

When asked what they had gained from being a mentor, some key themes emerged. These include a sense of satisfaction at seeing people develop, the feeling of "doing the right thing" and opportunities to reflect on their own practice and to develop transferable skills. One mentor was not as positive as the others and said: "You don't gain a lot really — you gain networking skills and a network of colleagues".

Given that the pathway to becoming a mentor has been informal until now, mentors were asked why they thought they had been chosen for the role. One said: "People ask me to mentor them because they want or need inspiration, not because they want to be managed with a tick box system." Another commented: "How do people choose a mentor? It is generally down to self selection, which is a good thing really — in order to pick the right person you have to know yourself well."

— Mentee responses

The need for a formalised mentoring process in pharmacy was further highlighted when none of the mentees said that they had had a formal mentor in their career. They had all benefited from informal arrangements. For example, one mentee said: "I guess it depends on how you define mentors, as some of my friends are mentors, as well as friends. Including friends, I would say I have maybe three to five, mainly because I am an open person and it's important to me to get advice and feedback — I'm probably more 'needy' than most." Another said: "In total, I have had three informal mentors: two have been previous line managers plus my current manager. They seem to be a logical choice for mentoring me."

Panel 1: Attributes required to be an effective mentor

Attributes, as identified by mentors

- Having good communication skills
- Having the capacity to listen and question
- Being able to understand a mentee's needs
- Having time to devote to a mentee
- Being interested in developing people (not just "spoon-feeding" them)
- Being approachable and a good listener
- Having an understanding of the NHS and the organisation at which the mentee works
- Having good self-awareness and a wider perspective than the mentee
- Having an open mind and being non-judgemental
- Having a positive outlook
- Being able to give constructive feedback
- Being a reflective listener
- Being able to motivate and encourage
- Being able to give people a "bit of a buzz"

Attributes, as identified by mentees

- Being supportive
- Being a good role model
- Being senior
- Being sincere
- Being friendly
- Being a good listener
- Being trustworthy
- Being experienced
- Being non-judgemental
- Being someone to respect and from whom to learn
- Being someone trusted not to ridicule or judge your comments and actions, even when you are wrong or lack knowledge
- Having the ability to give constructive advice and to listen
- Being able to direct an individual unobtrusively

Interviewees were asked how they had identified their mentors. This tended to be based on an existing relationship, rather than looking for someone distinct from their daily work. This is not surprising, given that there has not previously been a formal system for matching people with appropriate mentors, potentially working for different organisations.

Mentees were also asked why they felt the need for a mentor. Responses differed, but key themes include needing a mentor for support, advice and reassurance that the mentee is "doing the right thing", to offer a positive outlook, and to provide an opportunity to question ideas.

Each mentee was asked what qualities and skills they required their mentor to have. (included in Panel 1). These generally matched those identified by mentors. Mentees were equivocal in their need for a mentor at all stages in their career. They agreed that no time scale should be set — the relationship may come to a natural end or continue for some time.

— Mentoring programme

The responses of pharmacist mentors and mentees were taken into account by the Leadership Development Group when developing their leadership and development framework and associated mentorship database. Mentoring arrangements in other professions, such as medicine and dentistry, were also reviewed. In these professions, a significant degree of personal mastery is necessary for the key skills and concepts to be passed from one person (the master) to another (the apprentice).

The mentorship database, launched at the 2006 UKCPA autumn symposium, is

designed to help people find a mentor or register as a mentor for others. There are hints on establishing ground rules for the mentoring arrangement and information about what mentors and mentees can expect and the responsibilities of both parties.

To date, there are 39 mentors who have registered on the database. Further evaluation of the database, including the number of matches made, is to take place over this summer.

— Conclusion

The sample of interviewees is in no way generalisable (nor was it meant to be), but the responses provided give some useful insights into the role of mentorship.

Despite a previous lack of formal mentoring schemes, there seems to be a clear understanding of the skills a good mentor needs to have, as well as their role and duties. The Leadership Development Group has built upon these perceptions in developing a leadership qualities framework and a mentorship database.

— References

1. Duggan C, Mooney C, Roberts P, Green C, Hall G, Howard P et al. Becoming a good leader — developing the skills required. *Hospital Pharmacist* 2007;14:193-4.

Further information

- Leadership qualities framework, available at www.nhsleadershipqualities.nhs.uk
- Mentor database, available at www.pharmentor.nhs.uk