



# A QUICK GUIDE TO A MENTOR/MENTEE PARTNERSHIP FOR CREDENTIALLING

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Your trusted partner in diabetes care

## Introduction

An ADEA mentoring partnership for the credentialling program is a formal professional relationship between a CDE (mentor) and a diabetes educator (mentee) to promote learning and development and to assist the diabetes educator through the credentialling process. The mentoring partnership must be active for a minimum of six months.

The mentor/mentee relationship is reciprocal relationship between both parties, with each partner bringing knowledge and skills that can be utilised to enhance the CDE role.

The most important part of the mentor/mentee role is building a mutually respectful relationship that promotes communication and works towards the achievement of common goals that have been set and agreed upon by both parties. ADEA recommends 1 hour per month to be the minimum time spent working together. This time should be recorded in a schedule and uploaded by the mentee to the initial credentialling application once the agreement has been completed. This can all be achieved through any of the methods below:

- face to face meetings
- emails
- phone calls and/or
- skype or other videoconferencing

Mentors and Mentees do not need to be working in the same workplace, town, city or state and do not need to be from the same primary health discipline. The primary health discipline of each person in the mentoring partnership is irrelevant in terms of the partnership being a reciprocal means of professional growth and development for both mentor and mentee.

The most important aspect of the mentoring partnership is that both parties work together to achieve the goals of the partnership. Both the mentor and mentee must be willing to build rapport, be active listeners, be willing to ask and answer questions, and provide and take feedback.

Both parties should come to the relationship with a clear understanding of their own scope of practice.

To be a **mentor**, you must:

- have been credentialled for at least 12 months;
- maintain your recredentialling status by submitting your yearly recredentialling portfolio;
- be registered with ADEA as a mentor; and
- have completed, or be working toward completion of, the ADEA e-learning mentoring course for mentors

To be a **mentee** you must:

- be a member of ADEA;
- be currently undertaking or have completed an ADEA accredited graduate certificate course in diabetes education and management;
- have completed, or be working toward completion of, the ADEA e-learning mentoring course for mentees

## Starting your agreement (Mentee)

- Seek a CDE willing to be your mentor (either by referring to the mentor list on the ADEA website or by finding someone within your known networks)
- Meet with your mentor either face to face or by phone (the use of Skype can support the development of your relationship with your mentor) to establish a mutually agreed communication plan and goals
- Goals should be beneficial to both parties and state how they relate to your scope of practice. Discuss activities with your mentor to achieve the goals that have been agreed upon
- Fill in and sign the mentoring agreement
- Lodge the mentoring agreement with ADEA National Office within 2 weeks of signing the agreement
- Keep a running record of meeting times, items discussed and email correspondence with your mentor

## How to set Learning Goals

ADEA encourages the use of the SMART strategy to set learning goals. This strategy ensures that the learning goals set are:

**S** – Specific

**M** – Measurable

**A** – Achievable

**R** – Realistic

**T** – Time framed

In setting your goal ask yourself is this goal specific? Am I able to measure that I have achieved the goal? Is it able to be achieved within a realistic time-frame?

## A note about the Referees Report for the credentialling

A mentor can also be a referee for the mentee, however the mentor and referee roles are distinctly different and it is not required that the same person fulfils both roles.

Neither party in the mentoring partnership should expect that these roles are fulfilled by the same person. Mentees who are working towards credentialling and their mentors should establish and confirm such expectations at the start of their mentoring partnership. Mentors may assist mentees identify an appropriate alternative referee.

A mentor, if willing, can be a referee if mentoring from a distance. This can be achieved through obtaining a clear understanding of the mentee's work situation and practices while undertaking the mentor/mentee partnership.

Writing a referee report is all about having an understanding of the mentee's current work situation and practices and how they work within the National Core Competencies for Credentialed Diabetes Educators. The template for the referees report should be obtained at the earliest possible time to ensure the expectations of the referees report are well understood by the referee and the credentialling applicant.