



Completing an internship will translate into a higher starting salary in private practice and offer additional mentoring you might not have received in veterinary school

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Elephant MythBusting 101 – Truth??? or Rumor???

**"To Be Successful Economically In Private Practice You Must First Do An Internship"
Myth?? Fact?? Rumor??**

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January 18, 2009

If you want to become a specialist or join academia, you need to complete an internship as part of that process

Myth?? Fact?? or Rumor??

Do you believe that it is a myth that graduating veterinarians need to do an internship prior to entering private practice?

- Why do you believe this?
- Why do you NOT believe it?

Do all internships offer good mentoring?

- Mentoring is the most important thing to consider in your first year in practice.
- Compare the differences between:
 - University Internships
 - Private Practice Internships

How do new graduates determine if they are going into practices or internships that offers good mentoring?

Are You Aware of Available Resources

The American Animal Hospital Association
Mentoring Guidelines

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Recognize the Impact and Value of Mentoring

Mentoring is a method to improve hospital culture, productivity and efficiency. It has been shown to improve communication, promote long-term job satisfaction, and facilitate adoption of new practices. Ultimately, mentoring relationships can lead to improved patient care and overall hospital performance.¹

Much of the literature about mentoring has focused on the academic or corporate environment. As such, there is often confusion about how to proceed with mentoring and starting a mentoring relationship in a veterinary setting.

These guidelines are designed to provide a resource for mentees and mentors alike, highlighting the impact that mentoring relationships bring to successful personal and professional development in the veterinary hospital.

Although the document also refers to the associate veterinarian, it is intended to serve as a framework for all veterinary professionals and practice team members, regardless of their stage of training and/or level of experience.

What is mentoring?

Mentoring is an ongoing relationship between two individuals who are committed to improving their professional environment. The mentor is typically a more senior or better colleague and the mentee is new or inexperienced. The mentor is not the same as a supervisor, although one person can serve both roles. Having a mentor is important at any career stage, but particularly during transition, relocation or any unforeseen change in career goals.

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Action Steps for the Mentoring Relationship

1. Initiate a mentoring relationship by mutual agreement.
2. Discuss roles and responsibilities.
3. Collaborate to identify the type of mentoring relationship that best fits your situation.
4. Get acquainted, preferably by meeting outside of the work environment. Build rapport by openly sharing and discussing issues.
5. Develop mutual expectations and boundaries. Discuss accountability of both parties at the beginning of the relationship. Discuss confidentiality.
6. Discuss ethics, including conflict of interest issues, and agree upon ethical boundaries. When applicable, discuss compliance with state, federal and practice laws.
7. Discuss a vision plan (i.e., overall purpose / long-term goal of the relationship).
8. Establish, clarify, and enter into a goal to achieve the vision.
 - a. Define and practice areas of general needs, with the mentee taking the lead rather than relying upon the mentor to define needs for them.
 - b. Use SMART goals ("Specific, Measurable, Attainable, Realistic, and Timely") for mentee and mentor, as well as shared and/or consistent hospital goals.
 - c. Create a process whereby mentees can ask for resources help as needed.
 - d. If food meetings are virtual, also schedule occasional face-to-face meetings.
9. Discuss and agree upon a schedule for meeting together.
 - a. Establish formal meeting times to discuss "new things going on".
 - b. Determine meeting frequency.
 - c. Plan for your discussion, with the mentee taking the lead in planning.
 - d. Create a process whereby mentees can ask for resources help as needed.
 - e. If food meetings are virtual, also schedule occasional face-to-face meetings.
10. Establish a process to help the mentee develop new skill sets in areas such as surgery, medical records, client communication, and other areas of interest.
11. Discuss expected outcomes and how those will be measured or rewarded. Set up an evaluation program including the time, plan, and personnel to evaluate the mentee's progression towards goals.
12. Discuss how to resolve conflicts.
13. Create a time frame for the relationship that is beneficial to both parties. Clarify a mutually agreeable endpoint or plan for renewal of the relationship.
14. Celebrate progress and accomplishments.

*Adapted from: Mentoring, A.A. & F. 1996. In: W. H. Morgan and J. L. Baruch, Mentoring: Lessons from 2000 Years. New York: John Wiley & Sons.

The American Animal Hospital Association Mentoring Guidelines

Items that may be included in a mentoring agreement

- Confidentiality agreement
- Conflict of interest disclosure
- Formal agreement on roles and responsibilities
- Any financial terms specifically related to the mentoring agreement
- Protected time for meetings (This should include amount of time and frequency)
- Agreement on other forms of communication in addition to face-to-face meetings
- Agreement on establishing a vision plan for the mentee (Consider attaching a time frame)
- Agreement on establishing a goal plan for the mentee (Consider attaching a time frame)
- The goal plan that will be broken down into action plans
- Based on these action plans, an associated plan for allocation of resources (training, techniques to help manage time, CE, and other helpful aids) will be created
- Establish formal review dates for the mentoring relationship
- A mutual agreement to end the formal relationship based on agreed upon criteria

The real value & cost of mentorship

Subsides are on the rise...
 Mentors from all over...
 Mentoring is a...
 Many new graduates are not ready or able to meet productivity that will make them profitable to employers.

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How could the National Veterinary Internship/Residency Matching Program (VIRMP) be improved?

Who could/would undertake making improvements?

Is the discrepancy between an average intern's salary justified when compared to the average first year salary of a new graduate?

- AVMA 2000 SA Intern salary : \$27,233
- AVMA 2007 SA New Graduate: \$61,322

**"To Be Successful
Economically In Private
Practice You Must First Do
An Internship"**

Myth?? Fact?? Rumor??

MAYBE



Contributions To Internship Data

- Dr. Anna Worth-AAHA President-Private Practice
- Dr. Paul Pion-CEO Veterinary Information Network
- Dr. Meghan Stalker-Past VBMA President-Internship
- Brandon Wilson-Senior Student-Internship on Graduation

- Dr. Andy Roark-Past VBMA President-Mentored First Year
- Dr. Don Klingborg-Associate Dean of Students-Former Intern
- Dr. Michael Moyer-Shelter Medicine Instructor-AAHA Vice President
- Dr. Link Welborn-Past AAHA President-Offers Private Practice Internships

- Dr. Mark Russak-25 years Private Practice-Clinician at Mississippi State
- Dr. Tom Carpenter-Chairman AAHA Mentoring Task Force 2007
- Dr. Kate Knutson-Private Practice Mentoring
- Dr. Brent Calhoun-Private Practice Internship Program Director

- Dr. John Albers-AAHA Executive Director
- Dr. Nicole Moulin-Private Practice Mentoring Contract
- Dr. Kent Talcott-Private Internship Program Director-Former Intern
- Dr. Paul Gambardella-Private Internship Program Director-Former Intern