USPHS HEALTH SERVICES OFFICER MENTORING PROGRAM

Revised by the USPHS Health Services Mentoring Subcommittee
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OPERATING GUIDELINE OF THE HEALTH SERVICES OFFICER CATEGORY
MENTORING PROGRAM

A. Purpose and General Information

The Health Services Officer (HSO) Mentor Program is designed to facilitate the transition of recently appointed Health Services Officers into the U.S. Public Health Service (PHS) and to promote the long-term career development of HSOs. The program is open to all qualified Commissioned Corps Officers appointed into the HSO Category.

The success of the various operating divisions of the U.S. Public Health Service is dependent on the development of competent and capable individuals both uniformed and civilian. Investing time in the personal and professional development of the Mentee will enhance the overall effectiveness of the HSO category and create stronger leaders for the future.

Mentoring is an active partnership between an experienced member of the HSO Category and a less experienced member, to foster professional growth and career development. The Mentor’s knowledge and insights gained over years of experience, serve as a valuable tool to facilitate the effective and efficient growth of the Mentee.

The Mentor serves as an initial contact person from whom information about the Commissioned Corps and the PHS may be readily obtained. Mentors should be knowledgeable about many subjects of interest to new members, including: health care and other benefits, uniforms and military courtesy, awards, mobility, career progression, the promotion process, PHS-wide and category-specific activities, and military and professional organizations. While an individual Mentor will probably not have all of the answers, he or she should be able to refer a Mentee to the right source for appropriate information.

In order for the Mentor program to be successful, both the Mentor and Mentee must be active and committed participants. The following guidelines are offered to ensure a successful relationship between Mentors and Mentee:

- Be proactive – if you’re a Mentee, don’t wait for your Mentor to make the first contact and vice versa.
- Negotiate a commitment - agree to have regular contact at pre-defined intervals.
- Establish rapport - learn as much as possible about the other person.
- Be confident - both the Mentor and Mentee have something important to offer the other.
- Be enthusiastic - demonstrate mutual interest in the mentoring relationship.
- Communicate - share knowledge and experience openly.
- Be a good listener - hear what the Mentor or Mentee is saying.
- Be responsive - act upon what has been learned.
- Be accessible - have an open door or open phone policy.
• Take responsibility - it takes two to have a successful mentoring relationship.

B. Goals of the Mentor Program

• Provide Mentee with timely, factual, and relevant information to encourage and support their professional growth as a Health Services Officer in the PHS.
• Instill in officers the importance of the PHS mission, officer responsibilities, and traditions of the Commissioned Corps.
• Provide sound advice and counsel to officers throughout their careers, balancing category-specific and Operating Division-specific needs and priorities.
• Promote career progression throughout the various employing PHS Operating Divisions.

C. Role of the Mentor

A Mentor is an experienced and trusted individual who serves in a number of capacities: teacher, guide, counselor, motivator, sponsor, coach, advisor, referral agent, role model, and door opener. The Mentor must be flexible to serve in the various capacities the Mentee has need of for a period of one year.

1. Responsibilities of the Mentor:

• Serve as a role model - share personal experiences, present a good example.
• Be prepared and responsive to the requests and needs of the Mentee.
• Be a resource person - provide information on the organization, category, personnel system, training opportunities, networking contacts, etc.
• Listen - be open and understanding.
• Counsel - help identify options for promoting goals and solving specific problems; offer specific and practical suggestions.
• Offer insight - orient the Mentee to the spoken and unspoken rules of the organization.
• Guide - offer guidance but allow the Mentee to make final decisions.
• Validate - be an advocate and acknowledge achievements.
• Motivate - help set realistic goals and provide encouragement to achieve them.
• Give feedback - share positive reactions and offer constructive criticism.
• Provide perspective - help the Mentee see the big picture, protect by putting things into proper perspective.
• Be knowledgeable - learn what you don’t know, be able to refer to those who know best.
2. Benefits to Mentors:

- The satisfaction of helping a junior HSO define and attain goals by identifying options and planning strategies.
- The satisfaction in having a positive long-term impact, both on the individual and on the category.
- Improvement in interpersonal communication, motivation, coaching, counseling, and other management skills.
- An opportunity to gain perspective about comparable individuals supervised on a regular basis.
- Impetus to reflect on one’s own goals and performance.

D. Role of the Mentee

A Mentee is a committed and motivated individual who is willing to work and take responsibility for their career development and professional growth. A Mentee must be honest, open, and receptive to the guidance their Mentor has to offer.

1. Responsibilities of the Mentee

- Discuss with your supervisor your interest in participating in the program.
- Initiate - schedule discussions, actively seek out the Mentor’s advice.
- Be honest - be open, frank, share your self-assessment of career development needs and personal career goals.
- Listen - consider all suggestions without being defensive.
- Participate - take full advantage of the services and assistance offered, make decisions based on all information gathered, and follow through on suggestions that make sense.

2. Benefits to Mentee

- Connecting interpersonally with a caring, encouraging advisor.
- Obtaining guidance in defining and achieving goals.
- Gaining information to plan a clear and defined career track.
- Gaining an appreciation for the corporate culture of the PHS.
- Receiving constructive feedback.
- Acquiring an objective and credible source of information.
- Improvement in overall job performance.

E. Qualifications to be a Mentor

- Currently in good standing with the U.S. Public Health Service with no adverse personnel actions filed.
• At least one rank or grade above his/her assigned Mentee.
• Preferably, same discipline as the Mentee.
• Show strong interest in mentoring individuals through periodic phone calls, e-mail, and/or person-to-person contact.
• Preferably, either currently or previously assigned to the Mentees agency.
• Submit completed Mentor Nomination Form on the HS-PAC Mentoring Subcommittee Web Page (http://usphs-hso.org).

F. Qualifications to be a Mentee

• Currently in good standing with the PHS with no adverse actions filed.
• At least one rank or grade below their designated Mentor.
• Desires to have a Mentor assigned to assist in his/her professional development.
• Submit completed Mentee Nomination Form.

G. Implementation and Management

1. Mentor Nomination

• Mentor volunteers must submit a completed Mentor Nomination Form. The Mentor Nomination Form can be obtained on the HS-PAC Mentoring Subcommittee Web Page (http://usphs-hso.org).
• Upon receipt of the Mentor Nomination Form, the prospective Mentor will be contacted by the Chair of the Mentoring Subcommittee to discuss responsibilities and expectations.
• Mentoring Training and Resources can be found on the HS-PAC Mentoring Subcommittee Web Page (http://usphs-hso.org).

2. Mentee Notification

• Mentor subcommittee Chair will contact the Mentee and Mentor informing them of the pairing.
• The Mentor subcommittee Chair will update the Mentor/Mentee roster.

3. Matching Mentors and Mentee

• To ensure potential Mentors are able to optimally relate to the Mentee, an effort will be made to pair up a Mentor who has current or past experience in the Operating Division (OPDIV) and/or geographic location to which the Mentee is assigned.
• The HSO Mentoring Subcommittee Chair will be responsible for the final match recommendations for Mentors and Mentees.
• Mentors and Mentees will be notified once an assignment has been made.
• The mentoring program is a one year program, however the relationship may continue for an indefinite period by notifying the Mentoring Subcommittee by either the Mentor or Mentee.
• The Mentees may opt to continue the relationship with the current mentor, terminate the relationship with the current mentor and request a new mentor, or terminate their participation in the mentor program.

H. Program Evaluation

Program evaluation is critical to the constant improvement of the Mentor Program. Part of the commitment to function as a Mentor and to participate as a Mentees, includes the responsibility to provide a constructive critique of the experience. The Mentoring Subcommittee is responsible for evaluating the feedback received from participants and incorporating necessary changes into the operating guideline.

• Mentors and Mentees should fill out and submit progress report forms within six months of the initial Mentor-Mentee match.
• Mentors and Mentees should fill out and submit program evaluation forms at the 1-year completion of the Mentor-Mentee match.
• The completed progress report and evaluation forms will be returned to the Mentor Subcommittee Chair.
• The Mentoring Subcommittee Chair will collate information from the progress report and evaluation forms into a status report to the HS-PAC. Information provided by these status reports will be used by the HS-PAC to evaluate the effectiveness of the program and make modifications as necessary.

And don’t forget to visit the mentoring webpages on the HS-PAC web site at http://usphs-hso.org.