

GUIDING THE FUTURE: IDENTIFYING EARLY-CAREER FAMILY PHYSICIANS' MENTORSHIP NEEDS



Shalomi Premkumar¹; Susan Hum, MSc²; Viola Antao, MD, CCFP, MHSc, FCFP^{2,3}

¹Royal College of Surgeons in Ireland, Dublin; ²Women's College Hospital Family Practice Health Centre; ³Department of Family and Community Medicine, University of Toronto

BACKGROUND

- Retaining early-career family physicians (ECFPs) in comprehensive primary care is challenging
- Currently 2.5 million Ontarians lack a family practitioner, a figure expected to rise to 4 million by 2026 (Ontario College of Family Physicians, 2024)
- Rapid intervention is required to address the family physician shortage crisis
- Mentorship is one proposed strategy to help ECFPs successfully transition into independent practice
- Hernandez-Lee et. al, 2018: In a "First Five Years in Family Practice" survey conducted in 2016, 56% of new graduates did not have a mentor, and 77% would have participated in a mentorship program, if available

PURPOSE: What are the needs and impact of mentorship for earlycareer family physicians?

OBJECTIVES

- Identify the personal, professional and healthcare system challenges faced by ECFPs
- Identify ECFPs' mentorship needs
- Describe ECFPs' preferred qualities in a mentor
- Describe the practice needs and demographics of ECFPs

METHODS

- Literature reviewed to summarize the impact and needs of mentorship for ECFPs
- Search: Ovid MEDLINE (mentors or mentorship or mentoring) and (primary care physician or family physician), filtered by English language and 2018 – 2024: 53 articles were identified

29 articles included:

 Inclusion criteria: discussion relevant to mentorship or coaching and needs or challenges of family physicians

24 articles excluded:

- Exclusion criteria: not in English, published before the year 2018, not directly relevant to mentorship or challenges in family medicine
- · Articles were organized into an annotated bibliography



Figure 1: Methodology of qualitative data collection and analysis

- Qualitative study using one-on-one key informant interviews held over Zoom (30 mins.)
- Development of an interview guide and demographic questionnaire of questions to prompt discussion with each participant
- · Participants: early-career family physicians from DCFM at UofT
- Data analysis: de-identified transcripts subjected to thematic content
 analysis

RESULTS

 Prominent themes and codes from the key informant interview outlined in Figure 2

Figure 2: Thematic content analysis of key informant pilot interview (n=1)

Theme 1: Facilitators of Comprehensive Care	Theme 2: Challenges faced by ECFPs
 Shorter duration of training Ability to gain more skills in focused practise and maintain skills from residency Mentor's influence/ role model Financial reasoning 	 Professional challenges: Administrative burden (Electronic Medical Record/EMR messages, following lab results, billing) Lack of knowledge of practise management Personal challenges: Work-life balance Time management Lack of compensation
Theme 3: Preferred mentor qualities	Theme 4: Desired structure of mentorship
 Knowledgeable in specified areas No preference for socio-demographics Shared values Few years more of practice experience Similar practise style and life stage 	 Administration related mentorship preferred earlier in career (practise and time management) Leadership and career advancement related mentorship preferred later (2-3 years from graduation)
Theme 5: Perceived impact of mentorship	

- Encourages ECFPs to persevere through challenges
- Create positive health systems changes
- Draw in more comprehensive family physicians
- Increase job satisfaction

DISCUSSION

 The literature shows that the benefits of mentorship are multifactorial and evidently that there is a need for mentoring in ECFPs

- The choice of comprehensive practice is multifaceted, which includes the influence of mentorship
- ECFPs face professional and personal challenges in their transition to independent practice, with an emphasis on administrative burden
- Mentors are preferred to exhibit similarities in lifestyle and values, and to have recent experience in selected areas
- ECFPs opt for administrative mentorship at the earliest possibility
- A positive impact on retention rates and job satisfaction is perceived on account of mentorship

Figure 3: Three kinds of mentorship needs interpreted from the pilot key informant interview



NEXT STEPS

• This pilot interview will be used to conduct further key informant interviews; 4 more prospective participants have been contacted to continue the study

Next steps:

- Triangulate results with an ongoing quality improvement needs assessment survey conducted by UofT's DFCM
- · Scale up to focus groups using preliminary findings from pilot
- Integrate results to inform the development of policy, advocacy (CFPC, OCFP) and medical education initiatives

ACKNOWLEDGEMENTS

 Special thanks to Dr. Viola Antao and Susan Hum for their guidance and support on this project