



Mentoring Toolkit Step 3

Mentor-Mentee Matching & Program Management

Mentoring Toolkit Step 3

Intent & Outcomes

Step Intent:

Match Mentees with Mentors and implement, monitor, and manage the program.

Step Outcomes:

- 1) Mentees/Mentors are matched.
- 2) Understanding of the relationship mechanics of matching Mentees with suitable Mentors.
- 3) Effective use of tools to monitor and manage the program.
- 4) Healthy and robust Total Worker Health Mentoring Program.

Section 1

Mentor-Mentee Matching

What makes a good match?

- A similar value and belief structure between Mentor/Mentee
- Similar learning styles
- Rapid development of trust and rapport
- Self-disclosure
- Clear objectives
- Prioritize life and work experience of Mentor over years on the job
- Enough difference between Mentee and Mentor to avoid over-identification

How to match Mentor/Mentees

It is the role of the Shift Coordinator to match and monitor the Mentor/Mentee

- 1.** Review applications of Mentor and Mentee to find suitable matches
- 2.** Ensure shift alignment: Mentor and Mentee should work same shift and same rotation if possible
- 3.** Setup meetings with Mentor/Mentee
 - Make Introductions
 - Complete Mentor/Mentee Agreement (each person gets a copy)
 - Review Mentee Goals (set beginning goals)
 - Review Mentor Self-Assessment Quarterly
 - Review Mentor Note
 - Review Mentee Tracking Form
 - Set schedule for Mentor/Mentee to meet at least once a week
 - Describe steps to be followed if Mentor-Mentee relationship does not seem to be working for either party after a fixed trial period or number of meetings

Section 2

Program Management

It is the role of the Shift Coordinator to manage and monitor the program on their shift.

- Create a list of the Mentors and Mentees assignments. Post it in the Captains' and Lieutenants' offices.
- Inform the other supervisors on the shift about the mentoring program and share the Mentor/Mentee list with them.
- Recruit and train new Mentors as needed.
- Update the Mentor/Mentee list as needed.
- Maintain the Mentoring Resources station which includes health resources.
- Regularly attend Steering Committee meetings.
- Meet with Mentors monthly to check progress.
- Consider rotation of Mentors where needed (if signs of overload, burnout, mismatch with Mentee, etc.).
- Conduct and review quarterly Mentor Self-Assessment Evaluations.
- Conduct and review Mentor Self-Assessment Final Review.
- Conduct and review Mentee Self-Assessment Final Review.
- Conduct and review Mentee Assessment of Mentor Program.

Mentor/Mentee Agreement

General Expectations

As a Mentee, what do you expect to gain from the mentoring relationship?

How could this be accomplished?

In order for this to be accomplished, as a Mentee, I agree to:

☐ *I agree to participate in this mentoring program for one year.*

As a Mentor, I will agree to:

☐ *I agree to participate in this mentoring program for one year.*

Mentee_____

Mentor_____

Date:_____

Mentee Goals

Today's Date: _____

At the beginning: Mentee's Career/Job-Related Goals *(Maximum 2)*

1. _____

How close do you feel to achieving this goal at the present time?

0 = Have not begun to achieve this goal 3 = About halfway 6 = Have achieved this goal

0 1 2 3 4 5 6

2. _____

How close do you feel to achieving this goal at the present time?

0 = Have not begun to achieve this goal 3 = About halfway 6 = Have achieved this goal

0 1 2 3 4 5 6

After probation: Mentee's Personal Development Goals *(Maximum 2)*

1. _____

How close do you feel to achieving this goal at the present time?

0 = Have not begun to achieve this goal 3 = About halfway 6 = Have achieved this goal

0 1 2 3 4 5 6

2. _____

How close do you feel to achieving this goal at the present time?

0 = Have not begun to achieve this goal 3 = About halfway 6 = Have achieved this goal

0 1 2 3 4 5 6

After probation: Mentee's Health & Wellness Goals *(Maximum 2 - Note: this can include family)*

1. _____

How close do you feel to achieving this goal at the present time?

0 = Have not begun to achieve this goal 3 = About halfway 6 = Have achieved this goal

0 1 2 3 4 5 6

2. _____

How close do you feel to achieving this goal at the present time?

0 = Have not begun to achieve this goal 3 = About halfway 6 = Have achieved this goal

0 1 2 3 4 5 6

Mentor Self-Assessment of the Mentoring Relationship: Quarterly Review

Mentee ID#: _____

Mentor ID#: _____

Date: _____

<i>Relationship Quality</i>	Strongly Agree	Mostly Agree	Neither Agree nor Disagree	Mostly Disagree	Strongly Disagree
The mentoring relationship between my mentee and me is very effective					
I am very satisfied with the mentoring relationship that my mentee and I have developed					
I am effectively utilized by my mentee					
My mentee and I enjoy a high-quality relationship					
Both my mentee and I benefit from the mentoring relationship					

<i>Relationship Learning</i>	Strongly Agree	Mostly Agree	Neither Agree nor Disagree	Mostly Disagree	Strongly Disagree
I am learning a lot from my mentee					
My mentee gives me a new perspective on many things					
My mentee and I are "co-learners" in the mentoring relationship					
There is a reciprocal learning that takes place between my mentee and me					
My mentee has shared a lot of information with me that helps my own professional development.					

Additional Comments: _____

Adapted from: Allen & Eby (2003). Relationship Effectiveness for Mentors: Factors Associated with Learning and Quality. *J of Management*, 29; 469-488

Mentor Note

Date: _____

Meeting Length: _____

☐ In Person ☐ Email ☐ Phone

Topics Discussed:

- ☐ A problem(s) at work
- ☐ Policy or procedure
- ☐ Superior(s)
- ☐ Coworker(s)
- ☐ Inmate(s)
- ☐ Stress
- ☐ Safety
- ☐ Work/life balance
- ☐ Family
- ☐ Personal development
- ☐ Personal life/problems
- ☐ Career goals
- ☐ Health and wellness
- ☐ Other: _____

Date: _____

Meeting Length: _____

☐ In Person ☐ Email ☐ Phone

Topics Discussed:

- ☐ A problem(s) at work
- ☐ Policy or procedure
- ☐ Superior(s)
- ☐ Coworker(s)
- ☐ Inmate(s)
- ☐ Stress
- ☐ Safety
- ☐ Work/life balance
- ☐ Family
- ☐ Personal development
- ☐ Personal life/problems
- ☐ Career goals
- ☐ Health and wellness
- ☐ Other: _____

Weekly Mentee Tracking Form

Mentees: Please fill out a Weekly Mentor Program Rating Form at the end of every 5-day work cycle. forms will be collected by Shift Coordinator.

Name: _____

Date: _____

1. In the past week, how many SHIFTS did you work with your Mentor?
(Worked on the same post, or in close enough proximity to sometimes see/talk to one another)

_____ shifts

2. Approximately how many TIMES in the last week did you communicate with your mentor?

In Person _____ times

Phone _____ times

Email _____ times

Mentor Self-Assessment of the Mentoring Relationship: Final Review

Mentee ID#: _____

Mentor ID#: _____

Date: _____

<i>Relationship Quality</i>	Strongly Agree	Mostly Agree	Neither Agree nor Disagree	Mostly Disagree	Strongly Disagree
The mentoring relationship between my mentee and me was very effective					
I am very satisfied with the mentoring relationship that my mentee and I developed					
I was effectively utilized by my mentee, as a mentor should be					
My mentee and I enjoyed a high-quality relationship					
Both my mentee and I benefited from the mentoring relationship					

<i>Relationship Learning</i>	Strongly Agree	Mostly Agree	Neither Agree nor Disagree	Mostly Disagree	Strongly Disagree
I learned some new things from my mentee					
My mentee gave me a new perspective on many things					
My mentee and I were "co-learners" in the mentoring relationship					
There was reciprocal learning that took place between my mentee and me					
My mentee shared a lot of information with me that helped my own professional development					

Long-term Effects of Mentoring

	Strongly Agree	Mostly Agree	Neither Agree nor Disagree	Mostly Disagree	Strongly Disagree
Successful mentees are likely to improve the health and safety climate within DOC					
The experience of mentoring is likely to improve the health and safety climate within DOC					
Mentoring improves a mentor's overall well-being					
Mentors and mentees are likely to take part in other health and safety interventions					
My mentee shared a lot of information with me that helped my own professional development					

The following items are more personal. Any item can be skipped if you are uncomfortable responding to it. All answers are considered confidential and de-identified

	Strongly Agree	Mostly Agree	Neither Agree nor Disagree	Mostly Disagree	Strongly Disagree
As a result of mentoring, my personal health has benefited					
Mentoring has had a positive effect on my well-being at work					
Mentoring has had a positive effect on my well-being outside of work					
There was sufficient CO involvement and control of the mentoring program					
Additional training to identify mental health problems and severe strain in co-workers would be desirable					

Additional Comments: _____

Adapted from: Allen & Eby (2003). Relationship Effectiveness for Mentors: Factors Associated with Learning and Quality. *J of Management*, 29, 469-488

Mentee Self-Assessment of the Mentoring Relationship: Final Review

Mentee ID#: _____

Date: _____

<i>Relationship Quality</i>	Strongly Agree	Mostly Agree	Neither Agree nor Disagree	Mostly Disagree	Strongly Disagree
The mentoring relationship between my mentor and me was very effective.					
I am very satisfied with the mentoring relationship that my mentor and I developed					
I utilized my mentor effectively					
My mentor and I enjoyed a high-quality relationship					
Both my mentor and I benefited from the mentoring relationship					

<i>Relationship Learning</i>	Strongly Agree	Mostly Agree	Neither Agree nor Disagree	Mostly Disagree	Strongly Disagree
I learned a lot from my mentor					
My mentor gave me a new perspective on many things					
My mentor and I were "co-learners" in the mentoring relationship					
There was reciprocal learning that took place between my mentor and me					
My mentor helped me to work toward my health goals and to stay healthy					
My mentor helped me to manage stress effectively					
My mentor shared a lot of information that helped my own professional development					

Additional Comments: _____

Mentee's Assessment of the Mentoring Program

Looking back on your experience with the mentoring program, please indicate how much you agree with the following statements:

	Strongly Agree	Mostly Agree	Neither Agree nor Disagree OR Don't Know	Mostly Disagree	Strongly Disagree
My mentor was adaptable and responsive to my needs as a new officer.					
My mentor shared helpful job-related information with me.					
By example of demonstration, my mentor helped me to learn new skills on the job.					
My mentor provided me with emotional support.					
Peer mentoring is a good way to address the learning needs of new corrections officers.					
Peer mentoring is a good way to address the emotional and/or physical health needs of new corrections officers.					
I would like to become a mentor to someone else when this mentoring cycle ends.					
My experience of being mentored has contributed to my motivation to become a mentor to someone else.					
The new mentoring program has been effective in meeting the needs of new officers.					
I support the continuation of a peer mentoring program at my facility.					

Further Comments: _____

