

## Tulane Physician Scientist Pipeline Program (PSPP) Evaluation of Mentor

Please complete the following report and return to the Director of Faculty Affairs, Wendy Stark (wstark@tulane.edu). This report is not shown to your Mentors, but will form part of the report the Director makes to the Tulane Physician Scientist Pipeline Program (PSPP) Advisory Committee. Expand the space given below as necessary to allow full answers to each section

Scholar's name:

Date:

### 1. Lead Mentor

Mentor's Name:

Degree/Department/School:

A. How often have you met with your Lead Mentor in the past six months?

<2 meetings

2-4 meetings

5-6 meetings

>7 meetings

B. How satisfied are you with the frequency of these meetings?

|                      |                    |                                    |           |                |
|----------------------|--------------------|------------------------------------|-----------|----------------|
| 1                    | 2                  | 3                                  | 4         | 5              |
| Not at all Satisfied | Somewhat Satisfied | Neither Satisfied nor Dissatisfied | Satisfied | Very Satisfied |

C. How satisfied are you with the quality of these meetings?

|                      |                    |                                    |           |                |
|----------------------|--------------------|------------------------------------|-----------|----------------|
| 1                    | 2                  | 3                                  | 4         | 5              |
| Not at all Satisfied | Somewhat Satisfied | Neither Satisfied nor Dissatisfied | Satisfied | Very Satisfied |

D. Please rate the performance of your Lead Mentor in the following areas:

a. Provides laboratory or other space/resources as needed for Scholar to conduct research

Poor 1 2 3 4 5 6 7 8 9 10 Outstanding

b. Meets with Scholar on a regular basis and provides ongoing feedback

Poor 1 2 3 4 5 6 7 8 9 10 Outstanding

c. Enables Scholar development of realistic career development plan including timeline and

milestones to research independence

Poor 1 2 3 4 5 6 7 8 9 10 Outstanding

d. Facilitates effective interactions of Scholar's interdisciplinary mentor team

Poor 1 2 3 4 5 6 7 8 9 10 Outstanding

e. Promotes collaborations nationally and internationally

Poor 1 2 3 4 5 6 7 8 9 10 Outstanding

f. Guides Scholar's professional development including progress towards promotion and tenure

Poor 1 2 3 4 5 6 7 8 9 10 Outstanding

g. Assists Scholar in preparing and critiquing scientific abstracts and manuscripts and identifying funding opportunities

Poor 1 2 3 4 5 6 7 8 9 10 Outstanding

h. Attends seminars and research forums at which Scholar presents research

Poor 1 2 3 4 5 6 7 8 9 10 Outstanding

E. My Lead Mentor has assisted me in developing the following needs identified in my PSPP self-efficacy survey (check box for all that apply):

Skills related to reading and critically evaluating research articles

Skills related to writing research articles

Skills related to developing grant Proposals

Skills and knowledge related to CVD and associated risk factors

Skills related to project management

Skills related to communication

Skills related to career development

Skills related to research methods and study conduct

Skills related to interdisciplinary collaboration

## Skills related to mentor skills

F. Do you feel you are receiving the guidance you need (circle one)?

YES                      NO

If no, please explain:

G. What do you like most about your Lead Mentor?

H. What do you like least about your Lead Mentor?

## 2. Mentor Team

**Co-Mentor #1 Name:**

Degree/Department/School:

A. How often have you met with your mentor in the past six months?

Not at all

At least once

More than one time

B. How satisfied are you with the frequency of these meetings?

|                         |                    |                                       |           |                   |
|-------------------------|--------------------|---------------------------------------|-----------|-------------------|
| 1                       | 2                  | 3                                     | 4         | 5                 |
| Not at all<br>Satisfied | Somewhat Satisfied | Neither Satisfied nor<br>Dissatisfied | Satisfied | Very<br>Satisfied |

C. How satisfied are you with the quality of these meetings?

|                         |                    |                                       |           |                   |
|-------------------------|--------------------|---------------------------------------|-----------|-------------------|
| 1                       | 2                  | 3                                     | 4         | 5                 |
| Not at all<br>Satisfied | Somewhat Satisfied | Neither Satisfied nor<br>Dissatisfied | Satisfied | Very<br>Satisfied |

**Co-Mentor #2 Name:**

Degree/Department/School:

A. How often have you met with your mentor in the past six months?

Not at all

At least once

More than one time

B. How satisfied are you with the frequency of these meetings?

|                         |                    |                                       |           |                   |
|-------------------------|--------------------|---------------------------------------|-----------|-------------------|
| 1                       | 2                  | 3                                     | 4         | 5                 |
| Not at all<br>Satisfied | Somewhat Satisfied | Neither Satisfied nor<br>Dissatisfied | Satisfied | Very<br>Satisfied |

C. How satisfied are you with the quality of these meetings?

|                         |                    |                                       |           |                   |
|-------------------------|--------------------|---------------------------------------|-----------|-------------------|
| 1                       | 2                  | 3                                     | 4         | 5                 |
| Not at all<br>Satisfied | Somewhat Satisfied | Neither Satisfied nor<br>Dissatisfied | Satisfied | Very<br>Satisfied |

**Co-Mentor #3 Name:**

Degree/Department/School:

A. How often have you met with your mentor in the past six months?

Not at all

At least once

More than one time

B. How satisfied are you with the frequency of these meetings?

|                         |                    |                                       |           |                   |
|-------------------------|--------------------|---------------------------------------|-----------|-------------------|
| 1                       | 2                  | 3                                     | 4         | 5                 |
| Not at all<br>Satisfied | Somewhat Satisfied | Neither Satisfied nor<br>Dissatisfied | Satisfied | Very<br>Satisfied |

C. How satisfied are you with the quality of these meetings?

|                         |                    |                                       |           |                   |
|-------------------------|--------------------|---------------------------------------|-----------|-------------------|
| 1                       | 2                  | 3                                     | 4         | 5                 |
| Not at all<br>Satisfied | Somewhat Satisfied | Neither Satisfied nor<br>Dissatisfied | Satisfied | Very<br>Satisfied |

**Please complete the following table:**

| My mentor team...   | Agree | Disagree | N/A |
|---|-------|----------|-----|
| a. Encourages strategic thinking                                    |       |          |     |
| b. Encourages creativity  |       |          |     |
| c. Is thoughtful and asks probing questions                         |       |          |     |
| d. Allows me to work through problems independently                 |       |          |     |
| e. Encourages good time management techniques                       |       |          |     |
| f. Clearly states expectations                                      |       |          |     |
| g. Offers constructive criticism                                    |       |          |     |
| h. Demonstrates effective time management skills                    |       |          |     |
| i. Imparts technical skills   |       |          |     |
| j. Involves me in scientific publishing and grant writing processes |       |          |     |
| k. Teaches lab management   |       |          |     |
| l. Provides guidance on work-life balance                           |       |          |     |

**My mentor team has assisted me in developing the following needs identified in my PSPP self-efficacy survey (check box for all that apply):**

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Skills related to writing research articles

Skills related to developing grant Proposals

Skills and knowledge related to CVD and associated risk factors

Skills related to project management

Skills related to communication

Skills related to career development

Skills related to research methods and study conduct

Skills related to interdisciplinary collaboration

Skills related to mentor skills

**Do you feel you are receiving the guidance you need from your mentor?**

YES

NO

If no, please explain:

**What do you like most about your mentor team?**

**What do you like least about your mentor team?**

**3. Additional Comments/ Concerns:**

*Thank you for taking the time to complete this evaluation form. Your feedback is extremely valuable as we continually seek to improve and strengthen our program!*