

# The Younger Fellows mentoring program

The Younger Fellows mentoring program, which takes place each year, has been running since 2017. It pairs up Royal Australasian College of Surgeons Younger Fellows (Fellows in their first 10 years of service) with more experienced surgeons so they can share their ideas, expertise and advice. The mentor-mentee relationship more often than not evolves into a reciprocal relationship of mutual sharing and support – a space to share immediate challenges and ideas for the future. We asked a number of Fellows who have taken part in the program to share their experiences.

**Mentor Mr Darren Katz and mentee Mr Kenneth Buxey**



*Mr Katz is a urologist from Melbourne.*

I have always enjoyed the mentorship and teaching aspect of surgery, and so I was eager to be a Royal Australasian College of Surgeons (RACS) mentor to a surgical colleague. I started mentoring RACS Fellow Ken Buxey in 2018. Having gone through the stages of building a large private practice from scratch, the mentoring program facilitated sharing this experience, including the aspects that have gone both right and wrong. By

imparting my knowledge, I hoped to help Ken grow his private practice in a more expeditious way. It informed my practice as a surgeon too. As we talked through the various aspects of private practice, it re-emphasised to me the importance of ensuring good and timely communication with not only patients, but with staff, referrers and colleagues.



*Mr Buxey is a general surgeon from Melbourne.*

I was initially made aware of the mentoring program via email contact from the College. I indicated I would be interested in participating and was paired up with Darren. The best part of the program is having the opportunity to get advice from someone who has been in specialist practice for about five years prior to you becoming a consultant yourself. You don't get any formal training or advice on how to establish practice or work as a consultant, and so it is invaluable to have a resource to discuss these things with you. Someone who has a better idea of what some of the challenges are and how best to overcome them. It has been particularly helpful since Darren has a well-established practice in the same hospital that I am now practising in, which means I feel very supported there. Although I am specialised in colorectal surgery and

Darren is a urologist, these two specialties actually intersect often and are quite complementary – even to the point where one day we may work on a case together!

**Professor Peter Anderson**



*Professor Anderson is a plastic and reconstructive surgeon from Adelaide.*

A fantastic part of the RACS mentoring program was realising that the process could be mutually beneficial. As a mentor, I have learnt to appreciate that, while some training issues remain the same, other issues facing surgical Trainees are different to my own experience. I discovered that mentees are very appreciative of the opportunity to discuss sensitive workplace issues with an outside trusted adviser, who is independent of both the training unit and the local processes of job progression, but who can facilitate a considered review of their options in relation to the big picture and their long-term goals. Although mentoring with an interstate colleague undoubtedly had geographical challenges, mutual goodwill was supplemented with demonstrated reliability, and the use

of regular emails and teleconferencing helped to overcome them.

#### Dr Edwina Moore



*Dr Moore is a general surgeon from Melbourne.*

While I had already finished training and was about to embark on an overseas Fellowship, I was still eager to participate in the RACS mentoring program with a view to making a new friend, gaining perspective on surgical practice post-training and advice on how to juggle an academic career with motherhood. I was also keen to experience being the mentee, as I was already involved as a mentor with a (medical student) career mentoring program through the University of Tasmania. I think most Fellows would benefit from having a confidante who is attuned to the health system and has some past experience to draw from. Mentoring is not just about fixing problems, but rather offering perspective, helping to make professional introductions and broadening your exposure outside the microcosm of the training network.

#### Professor David Fletcher



*Professor Fletcher is a general surgeon from Fremantle.*

As a College Councillor, I was given the opportunity to participate in the mentoring program. I have had two mentees: one was a Fellow who was recently appointed to a head of department role and was looking for advice and strategies on how to take up the role; the other was a Fellow returning from overseas to an academic appointment looking for advice on how to develop research and involvement in surgical academia. I have always seen mentoring as an increasingly required function of a surgeon as they mature and have life experiences that they can impart to others. It is something I have done for students for over 40 years and to Trainees and Fellows as a head of department for 25 years. It is great to be working in a department surrounded by colleagues who you have advised and supported, and many of whom surpass you.

#### Mr Ming Ho



*Mr Ming is a general surgeon from Central Queensland.*

Throughout the program I got good advice from my mentor and I think the advice added another aspect to the virtual experience when I was in difficult situations – surprisingly not clinical, but interpersonal challenges. Keeping in contact was not easy since we both had busy schedules, but emails and quick chats helped! That might be the way to go in the current COVID-19 situation.

#### Dr Sanjay Adusumilli

*Dr Adusumilli is a general surgeon from Sydney.*

The best part of the RACS mentoring program was being able to assist the younger generation of surgeons in pursuing their career aspirations. The

younger Fellows are grateful for the advice given and that sense of gratitude provides you with the feeling that you are making a difference.

In our catch-ups we spoke about exams, developing a practice, how to obtain a job in the future, research and managing difficult working relationships. Taking part in the program made me feel that the difficulties I faced as a surgeon are experienced by others. It gave me the confidence that many of the challenges we face are shared in common and with support we can all get through them. ■



*Applications to become a mentor are open to all RACS Fellows. To apply to be a mentee you must be a RACS Fellow in your first 10 years of practice. For more information about the 2021 program please contact Molly Mckew at [molly.mckew@surgeons.org](mailto:molly.mckew@surgeons.org)*