An introduction to clinical mentoring

What is clinical mentoring?

Clinical mentoring is a well-established method for supporting the scale-up of HIV clinical services in resource-constrained settings. It has been used extensively to support HIV clinical care in several African countries and, since 2003, by ASHM in Papua New Guinea. The World Health Organization (WHO) describes mentoring as “a system of practical training and consultation that fosters ongoing professional development to yield sustainable high-quality clinical care outcomes.” Clinical mentoring is an important and valuable tool that helps address knowledge gaps, build clinical capacity, and achieve better public health outcomes in countries where expertise and resources are limited.

For small Pacific countries with low HIV caseloads, clinical mentoring programs are being developed to help maintain up-to-date knowledge in HIV clinical care, assist local healthcare workers manage more complex cases, and build valuable professional relationships between mentors and mentees as well as between mentees and fellow health professionals in other Pacific countries. In combination with traditional technical training and capacity development workshops, clinical mentoring programs provide an efficient, flexible way to support locally-developed service delivery models while retaining the autonomy of health professionals in each country.

A key concern identified in the in-country assessments undertaken as part of the Pacific Mentors program is the difficulty of maintaining clinical expertise in HIV care when the HIV caseload in the country is small: ie where clinicians see only a few patients at scattered intervals. Clinical mentors provide a point of reference for local health care workers to seek advice and assistance from designated experienced HIV professionals. For each country participating in the program, there are two mentors – one based in Fiji and one based in either Australia or PNG.

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What do clinical mentors do?

Within the Pacific Mentors program, the role of the designated mentors for each country is to:

- Conduct the in-country assessment for the country, identifying local successes, capacity development or training needs, and areas where support may be needed.
- Establish and maintain good working relationships with key health care workers in each country (the mentees).
- Provide a point of contact for mentees requiring information or resources to support clinical decision-making.
- Assist directly in the management of complex or challenging HIV cases, on request.
- Link mentees to training and other capacity development activities.

Mentors do not supervise or oversee HIV clinical care in the participating countries – the existing service delivery arrangements for each country remain intact. The mentors’ role is intended to complement the existing health service structure in each country.

Mentors should be competent, relevantly experienced and committed to building a strong working relationship with mentees. They should provide advice, support and feedback in a responsive and constructive way. The support of the mentor should enable the mentee to deliver higher quality HIV care to the full spectrum of patients including more challenging cases.

Mentees should strive to build strong working relationship with mentors, seek advice when needed, regularly review their HIV practice with the mentors. Where gaps in knowledge require technical training, mentees should work with the mentors to identify appropriate training opportunities, which could include in-country training workshops delivered by the mentors or other OSSHHM personnel, or formal training conducted elsewhere in the region.

Evaluation of the success of clinical mentoring programs

While clinical mentoring is widely claimed to offer considerable potential for capacity building among health care professionals in developing countries, rigorous evidence of the success of these programs is somewhat hard to come by. Ultimately, the aim of any mentoring program is to improve clinical outcomes for patients.

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4 Worth, op cit.
The International Center for Equal Healthcare Access (ICEHA) <www.iceha.org> has argued that clinical mentoring programs that are focused on healthcare capacity-building contribute positively to curbing the HIV epidemic when implemented on a national level in a developing country, in conjunction with strong government support and leadership, when there is a national continuum-of-care strategy, successful HIV-prevention programs, availability of antiretroviral medication, and strong involvement of civil society. The ICEHA mentoring program is probably the best evaluated program worldwide.\(^5\)

Evaluation of the ASHM/OSSHHM Pacific Mentors program includes regular reporting on the number and nature of mentor-mentee interactions, improvements in mentees’ knowledge and pre- and post-workshop test scores.

**About the ASHM/OSSHHM Pacific Mentors program**

The Pacific Mentors program is a joint ASHM/OSSHHM initiative, funded by UNDP, to build health care worker capacity in the delivery of sexual health services with a focus on HIV, STIs, HIV/TB coinfection and key populations, in 11 Pacific countries. The major arms of the program are:

- Establishing a pool of clinical mentors and building their capacity to support and deliver training to key health personnel in each country.
- Investigate the use of different methods of delivering support and information to health care workers in the Pacific, such as through direct communication, online forums and webinars.
- Support the delivery of quality HIV, STI and sexual health care through updating and development of resources such as guidelines, flow charts and training materials.

Find out more here:  

Download our informational brochure [PDF]:  

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\(^5\) Ibid.