

RACGP–AIDA Mentoring program

Mentee handbook



RACGP–AIDA Mentoring program – Mentee handbook

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The Royal Australian College of General Practitioners
100 Wellington Parade
East Melbourne Victoria 3002 Australia
Tel 03 8699 0510
Fax 03 9696 7511
www.racgp.org.au

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We recognise the traditional custodians of the land and sea on which we work and live

Welcome

The Royal Australian College of General Practitioners (RACGP) and the Australian Indigenous Doctors' Association (AIDA) are proud to launch the RACGP–AIDA Mentoring program. This partnership has been driven by a shared recognition of the importance of mentoring across the continuum of medical education, training and professional development for general practitioners (GPs).

Our two organisations recognise the importance of delivering culturally safe primary healthcare. We are committed to working together to Close the Gap and achieve equity of health status and life expectancy between Aboriginal and Torres Strait Islander peoples and non-Indigenous Australians by 2030.

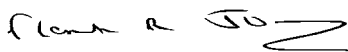
We want to do everything we can to support the growth of the next generation of Indigenous doctors.

In developing this mentoring program and through all our shared work, AIDA and RACGP are committed to working within the following principles:

- acknowledgement of the sovereignty of Aboriginal and Torres Strait Islander peoples and their self-determination, ongoing relationship with land and cultural continuity
- mutual regard and respect
- inclusive consultation and decision making processes
- valuing each other's unique contributions
- cultural safety for all people in all spheres with an understanding of the issues for Aboriginal and Torres Strait Islander peoples.

Mentors and mentees participating in the mentoring program will get the opportunity to share experiences, address professional and clinical issues and create a mentoring relationship that is right for them.

We hope this experience allows all participants to learn from one another in a culturally safe environment and that we continue to see a rise in the number of Aboriginal and Torres Strait Islander GPs delivering much needed primary healthcare in communities across Australia.



Associate Professor Frank R Jones
President, RACGP



Dr Tammy Kimpton
President, AIDA





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About us

The Royal Australian College of General Practitioners' National Faculty of Aboriginal and Torres Strait Islander Health

The Royal Australian College of General Practitioners (RACGP) is the largest professional general practice organisation and represents urban and rural general practitioners (GPs) throughout Australia. The RACGP's mission is to improve the health and wellbeing of all people in Australia by supporting GPs, general practice registrars and medical students through its principle activities of education, training and research, and by assessing doctors' skills and knowledge.

The RACGP provides ongoing professional development activities, developing resources and guidelines, helping GPs with issues that affect their practice, and developing standards that general practices use to ensure high-quality healthcare. The Australian Indigenous Doctors' Association (AIDA) will be liaising directly with the RACGP's National Faculty of Aboriginal and Torres Strait Islander Health in relation to this mentoring program. Visit www.racgp.org.au/yourracgp/faculties/aboriginal for more information.

The Australian Indigenous Doctors' Association

AIDA is a not-for-profit professional association contributing to equitable health and life outcomes, and the cultural wellbeing of Aboriginal and Torres Strait Islander people. AIDA's ultimate goal is to reach population parity of Indigenous doctors, and to inform and support a culturally safe healthcare system. In this context, AIDA's work provides the government and other national bodies with key outcomes and deliverables that contribute to high level public policy including the Close the Gap campaign and the National Aboriginal and Torres Strait Islander Health Plan, and its implementation plan. AIDA is an active partner in the National Health Leadership Forum and engages with a range of stakeholders across the medical continuum, including through collaboration agreements. AIDA supports our members through mentoring, advocacy, representation, collegiate support, and professional networking opportunities.



About the RACGP–AIDA Mentoring program

The RACGP and AIDA have enjoyed a collaborative relationship for more than 10 years. In 2014, AIDA members identified the need for GP mentors to support medical students, general practice registrars and existing Aboriginal and Torres Strait Islander Fellows of the RACGP.

The RACGP and AIDA have worked to address this need. Guided by the AIDA Mentoring program and AIDA Mentoring framework, the RACGP has developed a mentoring program in partnership with AIDA, specifically designed to support Aboriginal and Torres Strait Islander RACGP registrars and Fellows, and students with an interest in general practice.

Through the RACGP-AIDA Mentoring program, we aim to:

- increase the number of Aboriginal and Torres Strait Islander medical students who take up general practice pathways by providing students interested in a general practice career with access to mentoring opportunities
- increase and retain Aboriginal and Torres Strait Islander general practice registrars in the RACGP training program by providing all registrars and interested junior doctors with access to a mentor
- retain Aboriginal and Torres Strait Islander and non-Indigenous Fellows by providing access to mentoring opportunities on professional development and career progression.

What is mentoring?

Mentoring is defined as a dynamic and mutually beneficial engagement between an advanced incumbent (mentor) and a less experienced person (mentee), to facilitate professional growth by sharing knowledge and skills in a confidential, non-judgmental and culturally safe environment.¹

In this program, the mentoring relationship is a formal arrangement where the mentor assists the mentee's growth within the specific context of general practice.

It is important to note that a mentor is not a:

- peer support or pastoral care role
- clinical supervisor
- medical educator.

View *Glossary and definitions* on page 12 for the definition of these roles.



How does the program work?

Identifying mentees

AIDA will be responsible for identifying members who are interested in gaining a mentor.

Mentee selection criteria includes:

- being a member of AIDA or the RACGP
- commitment to regular contact with the mentor
- commitment to the process of cultural knowledge exchange
- openness to advice and constructive feedback
- acceptance of responsibility for own personal and professional development
- ability to maintain confidentiality.

Pairing the mentee with a mentor

The RACGP will be responsible for sourcing suitable mentors to participate in this program from its existing membership base.

Pairing protocols have been developed in order to ensure a successful and culturally safe relationship for both parties. Expertise, learning styles, accessibility, interest area, cultural safety, background and experience are all considered when attempting to match a mentor and a mentee.

Mentor selection criteria includes:

- being a member of AIDA or RACGP
- demonstrated experience working with Aboriginal and/or Torres Strait Islander peoples
- sound understanding of the principles of cultural safety
- willingness to undertake further cultural awareness training if required
- commitment to regular contact with the mentee
- understanding of cultural knowledge bases and cross-cultural communication
- maturity to encourage the mentee's growth and development without judgment
- ability to maintain confidentiality.



The mentoring agreement

Once the mentee and mentor have been paired, they will enter into a mentoring agreement.

The mentoring relationship will essentially begin from the first meeting between you and the mentor, and upon completion of the mentoring agreement.

The mentoring agreement will help to form the basis of the mentoring relationship and will assist in identifying the expectations between the mentor and the mentee. A draft mentoring agreement can be found on page 13. It includes:

- goals of the mentoring relationship
- preferred means of communication between the mentor and the mentee
- schedule of meetings – date, time, how you will make contact and who will initiate the contact
- discussion topics
- date the mentoring relationship will begin
- confidentiality agreement.

Connections

Together with the mentor, you will need to agree on a schedule of how and when you will connect. Connections can commonly take place via phone, email or Skype; however, there are no set methods of contact.

We encourage the below connection frequency:

- at least every 4 weeks
- a minimum of 6 hours for the duration of the program (12 months).

A face-to-face meeting may help strengthen the relationship, however, it is not always possible due to time and location constraints. Should you and the mentor be available to meet, be sure to arrange a professional and neutral environment such as a café or workplace, rather than at your home.

You or the mentor may unexpectedly require a leave of absence from the relationship to attend personal circumstances. If you have been unable to contact the mentor for a period of time, please make the RACGP or AIDA aware of the situation.



Evaluations and ongoing relationships

Each participant will receive an online evaluation survey at the 3- and 6-month marks of the program in order to provide feedback on the mentoring relationship and the program itself.

Evaluations will be adapted to measure how effective the mentoring program has been in comparison to the original objectives of the mentor and the mentee. Participants will be asked to evaluate how the program has met their expectations, what is working well, and what needs to be improved.

There is no obligation to continue once the mentoring relationship has concluded (after 12 months), unless both you and the mentor agree to do so.

If you are experiencing difficulties

As in all relationships, not every mentor–mentee match will be perfect. Relationships may fail due to lack of clarity about the program, uncertain expectations, differences in values and personal styles, or difficulties in managing time.

If, for any reason, you feel your grievances cannot be resolved or you have been unable to contact the mentor for some time, please contact AIDA on 02 6273 5013.



Your role as a mentee

Mentoring relationships provide the opportunity for the mentor to share their knowledge, experience and wisdom to support and encourage the growth of the mentee.


Mentees participating in the program can look forward to:

- developing new skills
- identifying areas for professional growth
- access to new networks and contacts
- finding new ways to approach old problems
- increased confidence in abilities
- increased job satisfaction
- enhanced career opportunities.

Mentors are responsible for nurturing and managing the mentor–mentee relationship in a way that facilitates feedback, mutual respect and confidence, so the mentee may feel challenged, supported and enabled to develop specific skills and knowledge.

A mentor will:

- assist the mentee in identifying needs, issues, concerns and aspirations
- share knowledge and wisdom
- facilitate growth and development
- be trustworthy, non-judgmental, ethical and a good listener
- be a role model and an advisor
- respect and appreciate differences
- build confidence through teaching and feedback
- provide an open and supportive environment.



Mentees achieve more when they are willing to accept challenges and are positive about change and growth



A successful mentoring relationship is a two-way street. Mentoring requires collaboration from both parties in order to be as effective as possible. Mentees achieve more when they are willing to accept challenges and are positive about change and growth.

Mentees will be encouraged to:

- identify the needs, issues, concerns and aspirations relevant to their career goals
- be open to advice and constructive feedback
- accept accountability for development
- set goals and work towards them
- be willing to accept challenges.

It is important to remember mentors are willingly supporting you and are genuinely interested in helping you achieve your goals. The relationship will be most effective if you are willing to listen, be open to new ideas and actively seek the mentor's feedback.

The first meeting

The first meeting is an important opportunity for you and the mentor to get to take some time to know one another and establish parameters for working together.

You and the mentor will need to share your expectations and goals within the program. Completion of a mentoring agreement can help develop and shape the relationship. Being familiar with the following principles of mentoring may help when forming the agreement:

- Mutual respect and understanding are essential to the mentoring relationship.
- Both parties should be genuinely committed to the mentoring relationship.
- The cultural needs of Aboriginal and Torres Strait Islander medical students and doctors are embedded within mentoring programs.

It is vital that both parties communicate openly and honestly, with expectations from you and the mentor clearly outlined to avoid any confusion in the future.

Developing the relationship

Mentees can develop and enhance the relationship in the following positive ways throughout the rest of the mentoring program:

- Discuss the culture of the organisation at which you work – Explain how congruent this is to your own world view and what challenges this may present, and invite a response from your mentor: Is this a shared experience?
- Discuss and agree on learning goals – Revisit goals and renegotiate if necessary, and utilise reflective practice techniques.
- Challenge each other's perceptions of cultural beliefs.
- Agree on what areas should be covered in each session with the mentor – Schedule meetings in advance and stick to the time and dates as much as you can, and provide as much notice as possible if you have to reschedule a meeting.



- Engage in conversation – Be interested in each other's opinion and ensure you and the mentor have equal time to share stories and discuss issues.
- Raise issues in a professional manner.
- Be yourself – Be mindful of how your own values, beliefs, attitudes and biases may be influencing your conversations.
- Keep a journal – Mentoring is a reflective practice and thinking about what you are doing helps you improve. Keeping a journal triggers insights and helps expedite your learning as a mentee, and provides a prompt to help you prepare between meetings.

Making the most of the mentoring relationship

Engaging in a mentoring program is highly beneficial to a mentee and allows for advice in career direction and professional development, as well as increased confidence and self-awareness.

In order to make the most of the mentoring relationship, it may help to remind yourself of the points below throughout the program:

- Make the time for mentoring to work. Be proactive in organising meetings and scheduling ahead of time.
- Don't be discouraged if you and the mentor occasionally have to reschedule a meeting or are unable to get together as often as you would like.
- Identify your weaknesses and consider how you may use the mentor's help to improve these areas.
- Check in every now and then. Do not think of the mentor as someone to be approached only when you need to discuss a problem.
- Set clear boundaries to avoid confusion. These are the rules for the relationship that each person has identified as important.
- Remember the mentor wants to support you. They are benefiting from the relationship too.

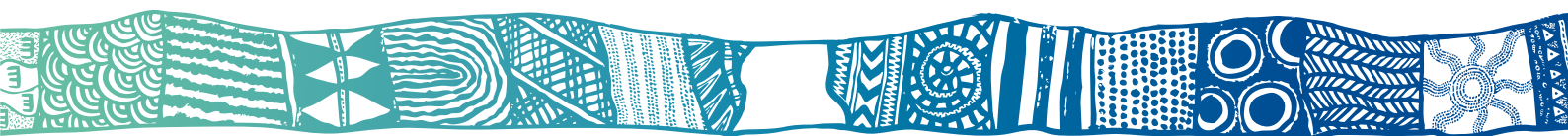
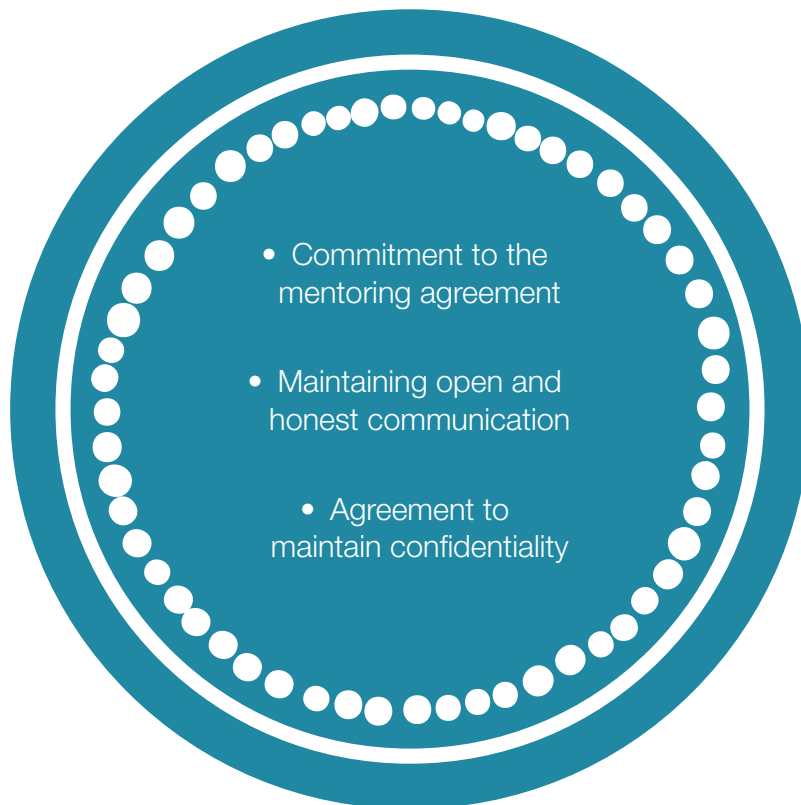
Boundaries and support

At times it may be tempting to contact the mentor about issues of a personal nature, however, it is important to be aware of boundaries within the relationship. When boundaries are not well defined they may be misinterpreted, while they may incapacitate the relationship if they are too rigid. It is recommended you take the time to discuss these boundaries at the beginning of your partnership in order to avoid confusion further down the track.

Should you feel the need for support of a personal nature, it may be helpful to be aware of the resources available to you. The RACGP–Indigenous General Practice Registrars Network (IGPRN) Registrar resources sheet² provides a list of relevant services, including educational support, library resources and personal counselling, for Aboriginal and Torres Strait Islander general practice registrars.



Mentor and mentee mutual responsibilities



Cultural context and the mentoring relationship

The RACGP and AIDA recognise that a strong culture is central to strong health and wellbeing among Aboriginal and Torres Strait Islander peoples. Both the RACGP and AIDA also recognise the longstanding consequences and impact of European settlements, and the difference between Aboriginal and Torres Strait Islander and non-Indigenous cultures that can create a breakdown in respect.

Mentors are selected based on their experience in working with Aboriginal and Torres Strait Islander peoples and a sound understanding of cultural safety. However, as a mentee it is important to recognise your mentor is also on a life-long learning journey of increasing cultural understanding.

The mentor will also bring their own cultural background to the mentoring relationship. Understanding and respecting cultures that are unfamiliar or may appear to reflect different beliefs can be difficult when viewed through your own cultural lens.³

Both the mentee and mentor should feel safe, supported and free to share these cultural learning journeys.

Different world views

‘World view’ is defined in the Oxford Dictionary as ‘a particular philosophy of life or conception of the world’. A broader definition in relation to culture is ‘the basic way of interpreting things and events that pervades a culture so thoroughly that it becomes a culture’s concept of reality – what is good, what is important, what is sacred, what is real. World view is more than culture, even though the distinction between the two can sometimes be subtle. It extends to perception of time and space, of happiness and wellbeing. The beliefs, values and behaviours of a culture stem directly from its world view’.⁴

You and the mentor may likely share different world views. Examine your own cultural identity and attitudes and consider how this may impact how you see the world.

Cultural safety and awareness

AIDA position on cultural safety

Aboriginal and Torres Strait Islander culture is a source of strength, resilience, happiness, identity and confidence. Each of these factors is inextricably linked to health and wellbeing, making the protection and promotion of culture critical to progressing improvements in Aboriginal and Torres Strait Islander health.

Cultural safety refers to the accumulation and application of knowledge of Aboriginal and Torres Strait Islander values, principles and norms. It is about overcoming the cultural power imbalances of places, people and policies to contribute to improvements in Aboriginal and Torres Strait Islander health.⁵

AIDA views cultural safety on a continuum of care. Cultural awareness is the first step in the learning process (understanding differences), followed by cultural sensitivity (self-exploration occurs) and cultural safety.

Visit www.aida.org.au/policypapers.aspx for more information.



Cultural awareness at RACGP

The RACGP's 'Introduction to Aboriginal and Torres Strait Islander cultural awareness in general practice' *gplearning* activity aims to improve the health of Aboriginal and Torres Strait Islander peoples by enhancing the cultural awareness of GPs, general practice staff, medical students, primary healthcare staff, and other healthcare providers.

This 6-hour activity aims to help participants extend their knowledge about Aboriginal and Torres Strait Islander history and culture; explore how attitudes and values can influence perceptions, assumptions and behaviours in a clinical setting; and discuss key ways the practice team can be more culturally aware.

Mentors undertake this activity if they have not already done so to increase their cultural awareness. Mentors are also encouraged to seek out face-to-face cultural awareness training to enhance skill development, confidence building, and allow practical application of material.

This training is available via the *gplearning* website at <http://gplearning.racgp.org.au>



Glossary and definitions

Aboriginal Community Controlled Health Services (ACCHS) – A primary healthcare service initiated and operated by the local Aboriginal community to deliver comprehensive, holistic and culturally appropriate healthcare to the community which controls it (through a locally-elected Board of Management).⁶

Cultural knowledge base – The core knowledge and information accepted as ‘true knowledge’ by the majority of people in a cultural group. The cultural knowledge base is what shapes the world view of the group.⁷

Cultural safety – Cultural safety refers to the accumulation and application of Aboriginal and Torres Strait Islander values, principles and norms. Cultural safety is about overcoming the cultural power imbalances of places, people and policies to contribute to improvements in Aboriginal and Torres Strait Islander health.⁵

GP Supervisor – GP with a minimum of 5 years’ experience who is responsible for the support and in-practice teaching of a general practice registrar. In previous terminology (which is occasionally still used), the GP Supervisor in the final year of training was called a mentor. The role was still supervisory, but with fewer teaching requirements as the registrar was considered to be more experienced. They are now officially called GP supervisors.

Medical educator – A qualified GP employed by a Regional Training Provider (RTP) to develop and provide education outside the practice setting, oversee and support GP supervisors in their teaching, and provide education guidance and support to general practice registrars on an individual basis. Each registrar will be allocated a specific medical educator at their RTP for the duration of their training. The medical educator may have to make decisions about the progress of the registrar.

Mentee – A less experienced person who is willing to share knowledge and experiences, be empowered to achieve goals and reach their potential in a relationship of mutual trust.⁸

Mentor – A person who has the ability to empower a less experienced person, helping them to achieve their own goals by sharing knowledge and experiences in a relationship of mutual trust.⁸

Mentoring – A dynamic and mutually-beneficial engagement between an advanced incumbent (mentor) and a less experienced person (mentee) to facilitate professional growth by sharing knowledge and skills in a confidential, non-judgmental, culturally safe environment.

Mentoring agreement – A document created to assist in defining the expectations and goals of a mentor and a mentee. It is signed by both parties and can be used to guide the development of the relationship.

Pastoral care support role – Focusing on non-workplace related issues that may affect the mentoring relationship. Support can include counselling, dispute resolution or assistance with life-skills such as budgeting, etc.⁹

Peer support – Peer support is frequent, ongoing, accessible and flexible. Peer support can take many forms – phone calls, text messaging, group meetings, home visits, going for walks together, and even grocery shopping. It complements and enhances other healthcare services by creating the emotional, social and practical assistance where necessary.¹⁰

Reflective practice – Used to examine the strengths and weaknesses of your own views and to better understand someone else’s. The aim is to learn something that changed how you understand an issue, recall (journal-keeping) how you have applied what you have discussed and learned and consider how you enjoy completing a task that required a significant amount of mental effort.

Registrar Liaison Officer – General practice registrar (or recent graduate of the GP Training program) who is employed on a part-time basis to be the official Registrar Representative in an RTP and to General Practice Registrars Australia (GPRA). They are often involved in helping to resolve disputes about employment or education, and in a pastoral care role for registrars.



Mentoring agreement

Mentor name: _____

Mentee name: _____

Our goals for this mentoring relationship are:

1. _____

2. _____

3. _____

Preferred method of contact (mentor):

Phone ☐

Email ☐

Skype ☐

In person ☐

Preferred method of contact (mentee):

Phone ☐

Email ☐

Skype ☐

In person ☐

Schedule of meetings

Date	Time	How will we connect?	Who will initiate contact?
Eg. 27.05.14	4:40pm AEST	Phone	Mentor



Discussion topics

1. _____
2. _____
3. _____
4. _____

By signing this agreement, we recognise that:

- mutual respect and understanding are essential to the mentoring relationship
- the mentor and the mentee are genuinely committed to the mentoring relationship
- the cultural needs of Aboriginal and Torres Strait Islander medical students and doctors are embedded within mentoring programs.

Our mentoring relationship will officially begin on ____ / ____ / ____ and will formally

conclude on ____ / ____ / ____ .

- Both parties have sighted and signed the confidentiality agreement.

Mentor signature: _____ Date: ____ / ____ / ____

Mentee signature: _____ Date: ____ / ____ / ____



Confidentiality agreement

I/we agree to enter into a mentoring relationship pursuant to terms listed in the mentoring agreement. For a mentoring relationship to develop, both the mentor and the mentee must feel that discussions of private issues or problems are being handled with discretion. The purpose of this agreement is to protect the mentor and mentee from a breach in confidentiality during the mentoring process.

By signing this document you are confirming you:

- understand any breach of this confidential communication will result in immediate removal from the mentoring relationship, and no further mentoring relationships will be initiated as part of this program
- agree to hold confidential conversations in confidence and to not violate the trust that is required for this relationship to be effective and powerful
- understand all information exchanged in this relationship is strictly confidential and not for external use
- understand information will be shared between AIDA and the RACGP
- have read and understood the confidentiality agreement.

Mentor (print name): _____ Date: ____/____/____

Mentor (signature): _____ Date: ____/____/____

Mentee (print name): _____ Date: ____/____/____

Mentee (signature): _____ Date: ____/____/____



Frequently asked questions

1. How long does the program run for?

The program is scheduled to run for 12 months.

2. Can the mentor have more than one mentee?

The mentor can consider taking on another mentee if they feel the relationship is going well and they have more time to commit.

3. What if I cannot contact the mentor?

If you have made a reasonable effort to contact the mentor, please call AIDA on 02 6273 5013.

4. What happens if there is an issue with the mentor?

It is recommended you try to resolve your initial conflict with the mentor by talking about any issues in an open and honest manner. If you do not feel this is appropriate, or such attempts have failed to resolve the situation, please call AIDA on 02 6273 5013.

5. Do we have to have a face-to-face meeting?

No. A face-to-face meeting is often not suitable due to time and/or location constraints. A face-to-face meeting can occur where it is convenient and if both parties are happy to do so, although it is not an official requirement of the program.

6. How do we end the mentoring relationship?

Both parties will be encouraged to reassess the relationship once the 12-month mentoring duration has passed. There is no obligation to continue the relationship past this point unless you and the mentor agree to do so.



Further information

RACGP

- The Royal Australian College of General Practitioners – www.racgp.org.au
- The RACGP National Faculty of Aboriginal and Torres Strait Islander Health – www.racgp.org.au/yourracgp/faculties/aboriginal
- Introduction to Aboriginal and Torres Strait Islander cultural awareness online training – www.gplearning.racgp.org.au
- An introduction to Aboriginal and Torres Strait Islander health cultural protocols and perspectives – www.racgp.org.au/download/Documents/AHU/2012culturalprotocols.pdf
- RACGP–IGPRN registrar resources sheet – www.racgp.org.au/becomingagp/aboriginalgps

AIDA

- Australian Indigenous Doctors' Association (AIDA) – www.aida.org.au
- Cultural safety for Aboriginal and Torres Strait Islander doctors, medical students and patients (2013 AIDA position paper) – www.aida.org.au/downloadfile.aspx?id=culturalsafety
- AIDA Mentoring framework – www.aida.org.au/downloadfile.aspx?id=mentoringframework
- Collaboration Agreement with the Committee of Presidents of Medical Colleges
<http://www.aida.org.au/cpmc.aspx>

Other

- Indigenous General Practice Registrars Network – www.gpra.org.au/igprn



Contact information

The Royal Australian College of General Practitioners (RACGP)

The National Faculty of Aboriginal and Torres Strait Islander Health

Ph: 1800 000 251

Fax: 03 8699 0400

Email: aboriginalhealth@racgp.org.au

The Australian Indigenous Doctors' Association (AIDA)

Project Officer

Ph: 02 6273 5013

Fax: 02 6273 5014

Email: aida@aida.org.au



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Notes

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