



MENTORING PROGRAM PARTICIPATION AGREEMENT AND CODE OF CONDUCT

The Massachusetts Medical Society (MMS) Mentoring Program supports members throughout their medical careers. The goal of the mentoring program is to aid MMS members with professional and personal development, overcoming obstacles, and finding satisfaction and success in their careers. Members who participate in the MMS Mentoring Program are matched with a colleague who has experience or is seeking experience in participant-defined areas of interest.

Participation Agreement

By participating in the program, I agree to the following terms and conditions:

- * I understand that I am voluntarily entering into a mutually beneficial professional relationship. I agree to meet with my mentoring partner as needed over a designated program period.
- * I understand that the general time commitment for the mentoring program is three to five hours per month for the designated program period, which may include meetings and interaction with my mentoring partner, learning assignments, and other activities.
- * I understand that the majority of the time needed to meet the goals of the program will be spent in meetings (in person/phone/video conferencing), rather than emails or text messages. The objective of the program is for mentoring partners to have meaningful conversations, exchange knowledge and ideas, share experience and impart expertise towards professional and personal development.
- * I understand that in-person meetings should occur in public locations, such as professional offices and coffee shops, rather than private residences. I agree that if I host my mentoring partner in my place of work, I will ensure that the visit adheres to the appropriate privacy, and occupational health and safety, policies and procedures.
- * I will commit to completing activities provided throughout the program. I will take notes and complete the goals and tasks my mentoring partner and I define and will complete an evaluation at the conclusion of the program.



- * I will keep open lines of communication with my mentoring partner and inform them of any changes that may impact my participation in the program.
- * I agree that discussions that occur between my partner and I will remain private and confidential, and no information will be shared with third parties without the express permission of each partner, except to the extent that I have a legal or other obligation (for example, as a mandated reporter) to share such information
- * I commit to participating in the program for a defined period set forth by the program administrator. If there is an extenuating circumstance and I need to withdraw from the program I will inform my mentoring partner and the program manager immediately.
- * I understand that there is no obligation for my partner and I to continue to communicate with one another after the defined program period ends.
- * I understand this is a voluntary program and neither mentoring partner is entitled to any form of payment.
- *Once I receive my assigned partner, I will let the program administrator know if I believe there is a conflict, including, for example, a financial or already-existing personal relationship, between myself and my partner. Depending on the nature of the conflict, my partner and I may be assigned new partners.
- *I understand that the MMS has the right to end any mentoring relationship in which it learns of a conflict; and will make reasonable efforts to find a new partner for the members of the terminated relationship. If a new partner cannot be found, the member of the terminated relationship may be unable to remain in the mentoring program.
- * For Mentees: I understand that the purpose of mentoring is limited to supporting professional and personal development.
- *For Mentors: I acknowledge that I am not a counsellor, and that I should make a referral for a mentee when advice is needed for areas outside of my scope.



Code of Conduct

*I understand that this mentoring program is considered an MMS event, and will abide by MMS policy, which states:

It is the policy of the Massachusetts Medical Society that all participants in MMS meetings, events, and activities are expected to exhibit respectful, professional, and collegial behavior during such meetings, events, and activities, including but not limited to committee meetings, House of Delegates meetings, dinners, receptions, and social gatherings.

Attendees/participants should exercise consideration and respect in their speech and actions, including while making formal presentations to other attendees, and should be mindful of their surroundings and fellow participants.

The MMS will not tolerate language or behavior that demeans a guest, participant, or attendee on the basis of race, ethnicity, nationality, age, gender, creed, religion, sexual orientation, gender identity, gender expression, disability, economic status, or other similar identifier.

Demeaning language and behavior are that which a reasonable person in the same or similar circumstances as the person being described would feel adversely affects their participation in the meeting, event, or activity. Such language and behavior include, but are not limited to epithets, slurs, or negative stereotyping; threatening, intimidating, or hostile acts; denigrating jokes; and written, electronic, or graphic material that denigrates or shows hostility or aversion toward an individual or group and that is visible during an MMS meeting, event, or activity.

*I will comply with antitrust laws, and will not discuss or exchange information regarding: my reimbursement rates or the price I am paid for my services; raising, lowering or stabilizing my fees; or whether other physicians should or should not deal with certain persons or entities (for example, any agreement of physicians not employed by a hospital not to cover call unless paid to do so, any agreement among non-employed physicians to strike or not accept certain tasks, or any agreement not to contract with a specific payor).

*I agree not to use the online Platform for any purpose that is unlawful. Further, I agree not to act in any way that might burden, impair, disable or damage the Platform itself or other participants on the Platform.



Consequence of Violation

*I agree that if I do not abide by these standards, there may be consequences, including, but not limited to, my being asked to leave the mentoring program.

Contact for Concerns, Complaints or Questions

The Mentoring Program is provided by the Massachusetts Medical Society (MMS). If you have any questions, issues, or concerns, please contact the program administrator, Colleen Hennessey, Manager, Member Relations at chennessey@mms.org.