The Importance of Role Modelling and Mentoring to Nursing Professionalism

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Purpose: This research study examined the views of nursing leaders of professionalism in ward based registered nurses.

Methods: This research project (PHD) utilised narrative inquiry as both the methodology and method. Ethics approval was obtained from ethics committees of the researcher’s university and three metropolitan acute care hospitals. This then all allowed for an email to be sent within the hospitals to all registered nurse asking for volunteers willing to participate in the research and provided contact details of the researcher. Twelve nurse leaders met the inclusion criteria of the study and were interviewed one-to-one. Data collection of recorded and transcribed semi-structured interviews of the twelve nursing leader participants was undertaken during 2014. Focus group interviews in 2016 followed the completion of the coding and analysis of the data to check if the four themes were reflective of the nurse leader’s views of professionalism.

Results: The findings of the study described the attributes of professionalism as identified by nurse leaders, one of which was mentoring and role modelling. Nurse leaders believed that role modelling and mentoring should be undertaken by all levels of staff as part of their nursing roles. They felt that setting an example through professional interaction with both colleagues and patients was considered an important means of developing desired behaviour in other staff and thereby increasing their level of professionalism. There are all mentoring programs discussed in the literature which enhance senior nurses’ orientation to new job roles, and provide enhancement of patient safety and quality improvement programs through the support of other senior staff members (O’Connor, 2017; Fleming, 2017; Eliades, Jakubik, Weese & Huth, 2017). However, the importance of role modelling is generally discussed focusing on the new graduate (Jakubik, Eliades, Weese & Huth, 2016; Vinales, 2015; Anonson, Walker, Arries, Maposa, Telford & Berry, 2014) or nursing students. Both nurse leaders and the literature discuss how the mentor assists the new nurse in negotiating the organisational systems, in understanding their professional role within the multidisciplinary health team together with assistance in improving their professional development (Clarke, 2015; Anonson, Walker, Arries, Maposa, Telford & Berry, 2014).

Mentoring programs are usually of a short-term nature for new staff members or graduate nurses, with longer term relationships being of an informal nature. Nurse leaders believed that a nurse will seek out an informal mentor of someone who is knowledgeable and approachable as a ‘go to person’ when they have a question. The importance of being able to discuss patient information without fear of ridicule (Cowin & Eager, 2012) is an important aspect of improving patient safety. Padgett (2015) discusses that a community of practice allows peers and colleagues to speak openly with each other in the clinical practice environment. The development of a community of practice through utilising a network of mentors for all staff may develop a sense of collegiality and organisational commitment which may then reduce the incidence of workplace incivility. Feeling supported through the allocation of a support person with whom they are able to freely discuss any work related issues without fear of recrimination would increase the confidence of all staff to have open discussions about any professional or patient issues.

Conclusion: Mentoring programs have been found to be beneficial to job satisfaction, retention and improved patient outcomes of nursing staff. This research study purports that with formalised ongoing peer to peer mentoring programs for all staff, there will be resultant positive individual and organisational outcomes.
There will be a reduction in workplace incivility through the increased staff collegiality and organisational commitment with an increase in staff professionalism.

Title:
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Keywords:
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References:


Abstract Summary:
This research study examined the views of nursing leaders of professionalism in ward based registered nurses. Two attributes of professionalism identified were mentoring and role modelling. Formalised
ongoing peer to peer mentoring programs for all staff, will result in positive individual and organisational outcomes.

Content Outline:

Introduction

1. This research study examined the views of nursing leaders of professionalism in ward-based registered nurses. The findings of the study described the attributes of professionalism as identified by nurse leaders, one of which was mentoring and role modelling.

Background

1. Registered nurses demonstrate professionalism through positive workplace performance and behaviour. To help nurses develop an understanding of what constitutes correct professional behaviour within their role in the healthcare organisation, the assistance of another nurse they can watch and ask questions is an essential aspect of support. Most organisations provide some means of orientation to the organisational policies and procedures, general facility information, specific ward requirements and other information as is deemed necessary for new staff to know.
2. There is, however, more individual or personal information which the new staff member may need. This information may be where is the best coffee to be found, which lunch bar serves the best sandwiches as well as the professional aspects of how to negotiate the intricacies of working in a new ward with new team members.
3. The best way to provide that support is through a mentoring process which is where another nurse is “buddied” with the new staff member. Mentoring has been found to improve staff retention, patient outcomes, job satisfaction (Johnson, Billingsley, Chrichlow & Ferrell, 2011) and professional growth (Erland, 2017). The mentor provides invaluable support of a professional nature for a designated period. Traditional mentoring is where an experienced nurse works with a less experienced graduate or new staff member transferring their knowledge to the less experienced individual (Edlund, 2017; Green & Jackson, 2014). Peer to peer mentoring is a two-way relationship with peers or colleagues provide ongoing support to each other (Stephenson, 2014).

Body

1. Main Point #1

1. Supporting point #1 Mentoring has been found to improve staff retention, patient outcomes, job satisfaction (Johnson, Billingsley, Chrichlow & Ferrell, 2011) and professional growth (Erland, 2017).

2. In the literature there is a discussion on the mentoring of senior nurses resulting in positive patient and staff outcomes (O’Connor, 2017; Fleming, 2017; Eliades, Jakubik, Weese & Huth, 2017). However, the literature is focused on the importance of role modelling relating to the new graduate (Jakubik, Eliades, Weese & Huth, 2016; Vinales, 2015; Anonson, Walker, Arries, Maposa, Telford & Berry, 2014) or to nursing students.
4. Supporting point #2
5. Both nurse leaders and the literature discuss how the mentor assists the new nurse in negotiating the organisational systems, in understanding their professional role within the multidisciplinary health team together with assistance in improving their professional development (Clarke, 2015; Anonson, Walker, Arries, Maposa, Telford & Berry, 2014).

6. 

2. Main Point #2
1. Supporting point #1
2. The importance of being able to discuss patient information without fear of ridicule (Cowin & Eager, 2012) is an aspect of improving patient safety.

3. 

4. Supporting point #2
5. Padgett (2015) discusses that a community of practice allows peers and colleagues to speak openly with each other in the clinical practice environment. The development of a community of practice through utilising a network of mentors for all staff may develop a sense of collegiality and organisational commitment which may then reduce the incidence of workplace incivility. Feeling supported through the allocation of a mentor with whom they can freely discuss any work-related issues without fear of recrimination would increase the confidence of all staff to have open discussions about any professional or patient issues.

6. 

3. Mentoring programs are usually of a short-term nature for new staff members or graduate nurses, with longer-term relationships being of an informal nature. Nurse leaders believed that a nurse would seek out an informal mentor of someone who is knowledgeable and approachable as a ‘go-to person’ when they have a question.

3. Nurse leaders felt that setting an example through professional interaction with both colleagues and patients was an essential means of developing the desired behaviour in other staff and thereby increasing their level of professionalism. Nurse leaders believed that role modelling and mentoring should be undertaken by all levels of staff as part of their nursing roles.

1. Conclusion: The benefits of mentoring programs relate to job satisfaction, retention and improved patient outcomes of nursing staff. This research study purports that with formalised ongoing peer to peer mentoring programs for all staff, positive individual and organisational outcomes will continue. There will be a reduction in workplace incivility through the increased staff collegiality and organisational commitment with an increase in staff professionalism.

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**Professional Experience:** I am a Lecturer at the Edith Cowan School of Nursing and Midwifery. I have been teaching undergraduate and postgraduate nursing students for over 20 years. During my time at Edith Cowan I have held various management roles of course coordinator responsible for the undergraduate nursing course, clinical coordinator managing the clinical placements team and the placements of the 2000 students, as well as year coordinator for the first year of the undergraduate program.

**Author Summary:** I am currently enrolled with CQ University writing up my PHD on nursing professionalism which is a subject about which I am passionate. I currently teach undergraduate students about the role of the registered nurse and nursing professionalism. I also teach a unit in the postgraduate Masters course on Coaching, precepting and mentoring in the clinical setting.