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Outcomes of a Structured Mentorship Program for Expert Clinicians in New Roles as Clinical Faculty

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Purpose: Internationally, we are losing nurse faculty due to aging and forecasted retirements of nurse educators. (Fang & Kesten, 2017). The need to construct innovative strategies to replace these educators is more critical than ever (Nardi & Gyurko, 2013). Recruiting expert clinicians to fill part-time clinical teaching positions is one way to obtain needed clinical educators, but this does not provide the requisite knowledge and skills they may need to be successful as educators (Sorrell & Cangelosi, 2015; Schoening, 2013). Preparing expert clinicians to move into educator roles through a structured educational program is yet another approach. The Eastern Shore Faculty Academy and Mentorship Initiative (ES-FAMI) and its recruitment, training, and mentoring of expert clinicians to become clinical teachers is one approach that has met with success (Hinderer, Jarosinski, Seldomridge, & Reid, 2016). ES-FAMI has a seven-year history of training and mentoring clinical experts as they transition to new roles as part-time clinical faculty. ES-FAMI is a hybrid educational program and collaboration between three nursing programs and three hospitals in a rural part of Maryland, USA. The 30-contact hour educational initiative includes: face-face meetings, interactive online modules and simulated teaching encounters. Key elements of this program are formal teaching preparation, help with navigating the academic culture, and structured mentoring. ES-FAMI provides a foundation in educational theory, legal aspects of clinical teaching, assessment and evaluation methods, and strategies for dealing with difficult students. In 2017, as a result of feedback from Academy graduates, a formal, yearlong mentorship was added to provide a means of ongoing support for novice clinical faculty offering support, guidance, and professional development through their first year of teaching. This ongoing mentorship provides support to novice nurses as they move through their transition to academia and assists with their retention in these new roles as educators.

At the conclusion of the 30 contact hour program, Academy graduates (mentees) begin a yearlong mentoring program. Novice teachers are paired with expert nursing faculty from one of the three participating nursing programs who offer support, guidance, and professional development through their first year of teaching.

Mentees and potential mentors, experienced nursing faculty, complete the VARK Learning Styles Inventory that identifies their learning preferences as visual, aural, read/write, kinesthetic, or a mixture. Participants (mentees) and potential mentors
are matched by the program director and administrative assistant based on results of the Learning Styles Inventory and the matching questionnaire. Once matched, mentors attend a one-hour preparation for mentoring workshop. In this seminar, the program director discusses how to establish ground rules for the mentorship, meeting schedules, and ethical issues related to boundaries as well as the mechanism and timelines for reporting. The expectation is that mentors/mentees meet biweekly via face-face, phone calls and emails. The mentor completes a monthly report of their meetings that describes the focus of the meeting (e.g. time management, career development, challenges in teaching etc.), and is viewed only by the administrative assistant.

The purpose of this research was to evaluate various aspects of the structured, comprehensive, one-to-one mentorship experience. The qualitative study elicited the experiences of mentees and mentors who completed a structured training and mentorship program. Focus group data from mentor/mentee pairs was used to uncover mentee and mentor perspectives of this formal mentorship experience.

**Methods:** To assess the perceived effectiveness and benefits for participants (mentees and mentors), this qualitative research was undertaken. University IRB approval was obtained. Mentors and mentees who had completed their year-long mentorship were invited to participate in focus groups facilitated by two expert consultants with experience in this methodology. Mentors and mentees were deliberately separated to allow for open expression about the successes and challenges associated with this model. Three mentor and three mentee focus groups were conducted at two sites on host campuses. Two additional mentees participated thorough individual phone interviews. Focus groups were approximately 2 hours in duration. Transcriptions of the focus groups, which consisted of twelve mentors and 10 mentees, were analyzed qualitatively for thematic development.

**Results:** Through interpretive thematic analysis, three preliminary themes emerged for Mentors: 1) Making it work; 2) Working through the missteps; 3) A thriving experience; and for Mentees: 1) Discourse is important;2) Lessons learned; 3) Next steps. These themes underscored the need for program refinement and provided information related to the value of a year-long one-to-one mentorship program, the process of pairing all Academy graduates with seasoned faculty, and the changes needed to enhance the program.

**Conclusion:** A structured, comprehensive mentorship program is a necessary component of the preparation of expert clinicians as new nursing faculty and can be implemented in any nursing program regardless of geographic location. Since it takes one full-time faculty to produce six graduates per year who in turn provide $704,000 in annual health care services (Kowalski & Kelly, 2013), assuring a successful transition to the role of clinical teacher is a sensible investment. Though it requires time and effort to develop, implement, and evaluate, an extended mentorship experience may be the missing link in supporting new clinical teachers through their first teaching assignments. This new model for professional development can add to the number of available
nursing faculty and enhance “nursing’s capacity to meet global healthcare needs” (Nardi & Gyurko, 2013, p. 324).

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Abstract Describes:
Completed Work/Project

Applicable category:
Clinical, Academic, Leaders, Researchers

Keywords:
Mentorship, Nurse faculty shortage and Retention strategies

References:

Abstract Summary:
A mentorship program is a necessary component for the preparation of expert clinicians. The purpose of this research was to evaluate various aspects of the one-to-one mentorship experience. Mentor/mentee focus group data was used to uncover perspectives of this formal mentorship experience using a qualitative approach.

Content Outline:
I. Introduction- Outcomes of a Structured Mentorship Program for Expert Clinicians in New Roles as Clinical Faculty
   1. International overview of the nursing faculty/nursing educator shortage
   2. Eastern Shore faculty and Mentorship Initiative-one approach
II. Creating a mentorship initiative
   1. The mentorship initiative
2. The matching process  
3. Mentoring workshop  
4. Expectations and reporting guidelines  

III. Method  
1. Interpretive phenomenological analysis  
2. Focus Group questions  
3. Focus Group procedure  

IV. Outcomes  
1. Emergent themes for mentor focus groups:  
2. Making it work  
3. Working through the missteps  
4. A thriving experience  
1. Emergent themes for mentee focus groups  
2. Discourse is important  
3. Lessons learned  
4. Next steps  

V. Conclusion- While the ES-FAMI academy provided the tools, scenarios and theoretical underpinnings of teaching, the actual process of teaching requires support and direction. A formal mentorship program is a natural progression in any such program whose goal is to facilitate the growth of nurse educators as they become comfortable in their new roles.