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### Title:

The Gift of Mentorship: A Qualitative Study of a Statewide Mentoring Program

### Theresa Wurmser, PhD, MPH, RN, NEA-BC

Ann May Center for Nursing and Allied Health, Hackensack Meridian Health Network, Neptune, NJ, USA Mildred Ortu Kowalski, PhD, RN, NE-BC, CCRP

Center for Nursing Innovation and Research, Morristown Medical Center, Morristown, NJ, USA

### **ACCEPTED**

## **Session Title:**

Leadership Poster Session 1 (Saturday/Sunday, 16 & 17 November)

### Slot:

LEAD PST1: Sunday, 17 November 2019: 11:45 AM-12:15 PM

### **Abstract Describes:**

Completed Work/Project

## **Applicable Category:**

Clinical, Academic, Students, Leaders, Researchers

# **Keywords:**

Leader development, Mentorship programs and Qualitative study

### **References:**

Block, L.M, Claffey, C. Korrow, M.K. and McCaffrey, R. (2005). The value of mentorship within nursing organizations. *Nursing Forum*, 40, 134 â<sup>2</sup> 140.

Eller, L.S., Ley, E.L., Feurer, A. (2014, May) Key components of an effective mentoring relationship: A qualitative study, 34(5), 8185-820.

Grossman, S.C. (2013). *Mentoring In Nursing: A dynamic and collaborative approach*. Springer Publishing: New York.

Short, J.D. (2002). Mentoring: Career enhancement of occupational and environmental health nurses. *American Association of Occupational Health Nurses*, 50, 135.

# **Abstract Summary:**

Learn specifics of how mentorship benefits both mentees and mentors. A qualitative study of participants in a statewide formal mentorship program allowed nurse leaders and aspiring nurse leaders to share their experiences. The perceptions of the participants highlight the effectiveness of this program.

## **Content Outline:**

The Gift of Mentoring:

- I. Introduction
  - 1. Background of Qualitative Research Study on Statewide Leadership Mentoring Program
  - 2. Discussion of why Mentoring is Important to the profession with a brief review of the literature
  - 3. Development of Leadership Mentoring program
- 1. Committee membership
- 2. Goal
- D. Statewide Mentorship Committee Vision and Program Structure
- 1. Member identification
- 2. Meeting logistics
- 3. Ongoing evaluation/monitoring
- 4. Feedback and modification
- E. Educational Programming
- F. Development of a Mentorship Toolkit
- 1. Content development
- 2. Ice breaker
- 3. Setting expectations (mentor and mentee)
- 4. Key leadership skills
- 5. Scheduling communications
- II. Body (Research)

- Purpose of the Study: To describe the perception of mentorship participants including the strengths and weaknesses of the statewide program in meeting the needs of aspiring and existing nurse leaders
- 2. Study Methods: Using purposive sampling, focus group interviews were conducted with 2 groups of participants of the statewide mentoring program after receiving IRB approval.
- 3. Research Question: What is the experience of nursing mentors/mentees who participated in a statewide leadership mentorship program
- 4. Demographics of the Study Sample
- 5. Data Analysis: Mentor/Mentee Themes
- 6. Mentor Themes:
- 1. Giving Back
- 2. Rewarding and Energizing
- 3. Concrete Guidance
- 4. Not always a good fit
- 5. Goal setting
- 6. Sources of Conflict
- 7. Nourishing the Mentee
- G. Mentee Themes
  - 1. Lifeline for the Mentee
  - 2. Moving from reluctance to reliance
  - 3. Instilled Courage
  - 4. Gaining confidence
- H. Joint Themes: Connected for Life
- I. Mentor/Mentee Recommendations for the statewide mentorship program improvement
- III. Conclusion
  - 1. Open Discussion of Findings and Recommendations; a) benefits, b) opportunities
  - 2. How should nursing further promote mentorship as an effective process for leader development at all levels.
  - 3. Recommendations for Future Research

# **Topic Selection:**

### **Abstract Text:**

Introduction and Background: Mentoring has been acknowledged as an effective process to support the development of nurses at all levels. With the sweeping changes occurring in health care, mentoring can help new and experienced nurse leaders navigate the complexity of the nurse leader role. Developing and maintaining formal mentorship programs to address the developmental needs of nurse leaders should be a priority for nursing but can also be challenging to sustain. Little is published about the perceptions of nurse mentees or mentors who participate in external formal mentorship programs. A Statewide Mentorship Program (MP) was developed in 2008 to provide an opportunity for nurses throughout the state to be mentored by experienced nursing colleagues. A qualitative study was conducted to understand the lived experience of mentors and mentees who participated in this statewide program so that the program could be improved to better meet the needs of those who participate and to provide support for the development of mentoring programs in nursing as a standard.

Purpose: The objective of the study was to describe participants' perception of a formal statewide mentorship program, with a focus on its impact on professional growth and to identify opportunities to strengthen formal mentoring programs.

Methods: A qualitative descriptive design was used to explore the experience of two cohorts, both mentors and mentees, who participated in a structured, formalized nurse leader mentorship program. Focus groups and individual interviews were conducted separately with 13 mentors and 14 mentors. Five interview questions were used to guide the focus group interviews and demographic data were collected after informed consent was obtained from the study participants.

**Data Analysis**: Analysis of the focus groups was conducted for the mentor group and the mentee group independently. The investigators individually reviewed and analyzed the transcripts and then met and reached consensus on common themes using the constant comparison method of analysis.

Findings: Through purposive sampling, 27 or 87% of those contacted participated in the focus groups. The range of participant age was 20-50; most were female (n=26, 96%), and mentors were slightly older than mentees. Eighty-five (85%) of the total sample earned MSNs or higher, with the higher education group being the mentees (93%). All of the mentors held at least one national certification in nursing compared to 86% of the mentees. Most of the participants worked in an acute care setting, n=24 (89%); the remainder worked in the outpatient area or other undisclosed settings.

Themes identified as a result of the 60 minute focus group with the 13 mentors, and individual interviews with two mentors include: Giving Back; Rewarding and Energizing; Concrete Guidance; Not Always a Good Fit; Sources of Conflict; Goal Setting; Nourishing the Mentee. The mentors felt confident in their role as mentors, and disclosed that this was an opportunity for them to "share their gifts", experiences and knowledge gained through their work as nurse leaders. The mentors were very pleased with their experiences with their mentees and felt they were able to give as well as get value from their relationship. As a group, they felt strongly that the MP should continue, and some felt mentorship should be recognized as a new standard for professional nursing.

Four themes emerged from the focus group interviews with the fourteen mentees: Mentorship program as a lifeline for the mentee; Moving from reluctance to reliance; Instilled courage; Gaining confidence. For the mentees, the MP program was like a gift and helped them to learn more about themselves, and helped to reduce self-doubt. Involvement in the mentorship program instilled courage and provided them with confidence. Mentors helped them to support their own choices and decisions to become more effective leaders.

A joint theme that emerged throughout both the mentor and mentee interviews was that although the "official" mentorship was coming to the end; the dyads would be connected for the rest of their careers. The mentees felt confident that they could and would call the mentors for advice in the future and they would continue to enjoy lifelong friendship.

Conclusion: The experience of mentors/mentees who participated in the statewide MP was very positive and the participants felt that the program was effective in meeting its goals. Mentorship programs can be established statewide and can be effective mechanisms to support leaders or prospective leaders in their rolls in an often chaotic and challenging health care environment.