



PROFESSIONAL MENTORSHIP IN NURSING

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ABSTRACT

Mentoring is an essential component in educating nurses and sustaining leadership. Mentoring relationships, benefits, and examples of mentor-mentee roles in nursing setting will be addressed. An overview of the mentoring cycle in nursing will be explained.

Mentoring is a vital process in nursing; it is a means for experienced nurses to orient and to facilitate acclimation of novice nurses to their new role. This process involves the art and science of guiding another through the purposeful actions of inspiring, coaching, teaching, directing, and leading an individual to a new place of cognition (Barker, 2006; Metcalfe, 2010).¹

KEY WORDS- *Mentee - Mentor, Bi - Directional Communication,*

INTRODUCTION

One of the earliest concepts of mentoring was documented in Greek history when Athena, the goddess of wisdom, disguised herself as Mentor, a trusted family friend, and assumed responsibility for Odysseus' household for the ten years he was away during his odyssey. During the time Odysseus was away, Mentor tutored Telemachus, his son, to become a successful ruler (Allen, 2006; Holmes, Hodgson, Simari, & Nishimura, 2010). Nurses teach and help other nurses by mentoring, which is crucial to maintain competency, encourage professional expertise, and promote leadership.

Both the mentor and mentee are engaged and committed to nurturing the relationship. This nurturing relationship may be described as a covenant between the mentor, one who shares his experience and expertise, and the mentee, who looks to the expert for knowledge to contribute to personal growth, consultation, and career advancement (Blauvaelt & Spath, 2008; McCaughey, O'Brien & Jackson, 2009; Mijares, Baxley & Bond, 2013). This bidirectional

relationship is complex and composed of trust and respect.

WHO IS A MENTOR ?

Faculty mentors play a crucial role in mentoring graduates. Students and their mentors share responsibility for ensuring productive and rewarding mentoring relationships. Both parties have a role to play in the success of mentoring. For graduate students, a mentor is someone who serves as a guide throughout their institutional training. They provide both professional and personal advice in transitioning into, and out of, graduate school. They give constructive feedback on writing, teaching and other elements of career design. They can serve to help students balance professional goals with their personal lives or give emotional encouragement during challenging times.

OBJECTIVES

- Enabling constructive interaction, guidance and mentorship of students by faculty



- ✎ Providing a reliable and comprehensive support system to motivate students to excel in both academic and non-academic fields and to make the most of their life at the Institute.
- ✎ To help fresh students understand the challenges and opportunities present in the Institute and develop a smooth transition to campus life.
- ✎ To counsel academically weak students and to play an important role in helping troubled students cope with academic, extra-academic and personal problems.
- ✎ To provide positive role models students in the institute.
- ✎ To proactively try to identify problems of the general student populace and to bring them to the notice of the concerned authorities.
- ✎ Ensuring regularity and punctuality of students through counseling sessions.²

THE BENEFITS OF A MENTOR-MENTEE RELATIONSHIP FOR THE WORKPLACE ARE

- ✎ Improved nursing staff retention, reduced isolation, increased opportunity for promotion within the workplace, less transition time for learning, and improved teaching effectiveness (Billings & Kowalski, 2008).
- ✎ It is essential for the mentor to be available to the struggling or overwhelmed mentee. During a busy day, there is little time for the mentee to process the events or disengage from the stress of providing care.
- ✎ The mentee may become emotional; realistically, it may be difficult for any nurse to. The mentor may be astute and tailor the teaching accordingly to the mentee's needs in order to assist the mentee in progressing through the cycle.
- ✎ The mentor must be both academically and clinically proficient, to provide proper support to the mentee.
- ✎ Anderson describes a mentor as an experienced nurse who has completed an approved mentorship program and is qualified to support and assess students in the practice setting (2011).
- ✎ An approved mentoring program prepares the mentor with communication resources, assessment tools, and teaching skills, in order

to provide a positive learning experience for the mentee.

- ✎ The mentor must be willing and able to accept responsibility for directing and overseeing the mentee. The mentor must not only direct, but also correct and coach the mentee forward, striving for excellence.
- ✎ The fit mentor should exude enthusiasm, support adult learning, portray professionalism, and possess a working knowledge of workplace operations, nursing policies, procedures, and corporate mission and vision (Blauvelt & Spath, 2008; Anderson, 2011).
- ✎ 2009).
- ✎ The mentor must become familiar with a mentee's learning history. This process assists the mentor to better understand challenges or recognize upcoming pitfalls and remediate any deficiencies. The mentor must be able to analyze the mentee's learning style and optimize the learning experience (Riley & Fearing)³

MENTORING CYCLE

- ✎ The mentee may pass through five levels of proficiency during their acquisition and development of skills: "novice, advanced beginner, competent, proficient and expert." (Benner, 2004).
- ✎ A mentee starts as a novice, and gains experience learning and communicating with their mentor. The novice mentee passes to advanced-beginner mentee, and, eventually with time, the mentee may progress and acquire sufficient skills to become an expert practitioner and mentor.
- ✎ Methods of mentoring are broad. Some mentors adhere to a rigid meeting schedule with goals, research and defined expectations. They anticipate problems and guide the mentee through challenges using methodologies such as transformational learning, remediation, and peer mentoring (Riley & Fearing, 2009; Jacobson & Sharrod, 2012).
- ✎ Mentoring may involve assigning the mentee tasks or research to facilitate learning. It may also involve traditional and nontraditional learning techniques, as appropriate for the mentee.



- ✎ Holmes, Hodgson, Simari, and Nishimura describe three models of mentoring. The first model describes the mentor as asking questions to expose the mentee to a broader vision of a particular topic.
- ✎ The second model involves assigning learning tasks to the mentee,
- ✎ and the third requires the mentee to study and observe a subject, and take notes (2010). All three approaches enable the mentor to assess the professional scope and academic capabilities of the mentee.

REFLECTION IN MENTORING - The mentor and mentee must engage in sincere dialogue as they review their goals and reflect on how to achieve them. Mentors promote bi-directional communication, ongoing insight, reflection, critical thinking, clinical reasoning and clinical decision making in open discussion (Barker, 2006; Holmes, Hodgson, Simari & Nishimura, 2010, Wilson, Andrews & Leners, 2006). Mutual trust, caring, and in some instances confidentiality, provide a scaffold for the mentor-mentee relationship. Understanding the expectations and limitations will determine its success.

BARRIERS TO MENTORING

Not all mentor-mentee relationships are successful. Barriers to a successful mentor-mentee relationship may be due to :

- ✎ Lack Of Faculty Sensitivity
 - ✎ Lack Of Academic Preparation
 - ✎ Cultural Miscommunication
 - ✎ Feelings Of Isolation
 - ✎ Fear Of Failure
 - ✎ Difficulty In Establishing Peer Relationships, and
 - ✎ Lack Of Professional Role Models (Wilson, Andrews & Leners, 2006)
- Problems May Occur If The Mentor Or Mentee Are Unable To Maintain The

Commitment Or Lose Communication Due To Responsibilities Or A Career Change (Billings & Kowalski, 2008).⁴

CONCLUSION

Mentoring can foster the leadership skills that student nurses need to secure larger roles in developing, designing and delivering health care. Mentoring relationships inside healthcare organizations and academic institutions can help those organizations retain nurses and nurse educators, reducing the cost of turnover. The ideal mentor is not always the most experienced or the most productive, but rather an effective communicator who is accessible and willing to enter into a mentoring relationship. Establishing and maintaining the mentor-mentee relationship cannot be overemphasized because it is the relationship that serves as the cornerstone for mentoring success.

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