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Effects of Mentoring on Job Satisfaction

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Table of Contents

Abstract.....	p. 4
Introduction.....	p. 5
Background.....	p. 6
Problem Statement.....	p. 7
Organizational “Gap” Analysis of Project Site.....	p. 7.
Practice Gap Analysis Recommendation.....	p. 8.
Organizational Readiness.....	p. 9
Literature Review.....	p. 10
Theoretical Framework/Evidence Based Practice Model/Conceptual Model.....	p. 11
Goals/Objectives/Expected Outcomes.....	p. 11
Project Design/Methods.....	p. 12.
Project Site and Population.....	p. 13
Measurement Instrument (s).....	p. 14
Data Collection Procedure.....	p. 14
Ethical Considerations/Protection of Human Subjects.....	p. 15
Data Analysis and Results.....	p. 15
Conclusion.....	p. 15
References.....	p. 16

Appendices

Appendix A	Training PowerPoint.....	p. 20
Appendix B	Remember When.....	p. 29
Appendix C	Mentor Helpful Hints.....	p. 30
Appendix D	Mentor Self-Assessment.....	P.31
Appendix E	Group Exercise Scenario.....	p. 33
Appendix F	Mentoring Relationship.....	p. 35
Appendix G	Program Requirements.....	p. 36
Appendix H	Mentor Contract.....	p. 37
Appendix I	Monthly Meeting Form.....	p. 38
Appendix J	Mentoring Monthly Meeting Form.....	p. 39
Appendix K	Mentoring Evaluation Form.....	p. 40
Appendix L	Evaluation Form.....	p. 42
Appendix M	Minnesota Satisfaction Questionnaire.....	p. 44

Abstract

Background: Hospitals have experienced nursing shortages and high rates of turnover for years. Healthcare organizations have sought answers to these problems, such as stressful work environments, lateral violence, perceived lack of support and general job dissatisfaction. Hospitals' nursing workforce is being affected in a large way; therefore, a solution is needed. Hospitals around the United States and in other countries have instituted mentoring programs to increase job satisfaction and increase nursing job retention. **Objective:** The purpose of this project was to implement and assess the effectiveness of a mentoring program at a Midwestern Hospital. **Methods:** A mentoring program was developed that paired new employees with a mentor who had been employed by the organization for a minimum of one year. The mentor-mentee pairs attended a training session at the beginning of the project and then met monthly. The Minnesota Satisfaction Questionnaire (MSQ) was utilized as a pre and post-survey to assess the effect of the mentoring program. **Results:** There was 100% mentee participation in the pre-survey with a mean MSQ score of 86; only 42% mentees participated in the post survey, with a mean MSQ score of 83. Nurse turnover rate prior to the implementation of the project was 9.09%; this rate dropped to 4.54% after the project. **Conclusion:** The mentoring intervention helped the mentees to establish supportive relationships with established nurses. Program protocol was not strictly followed exhibited by several deviations including low response to the post-survey. Due to low post-survey responses, the effect of the intervention could not be adequately evaluated. Although there was not 100% participation in the completion of the post-intervention questionnaires the responses received indicated a positive effect.

Key Words: hospital, nursing, mentorship, job satisfaction, retention.

Introduction

This project is submitted to the Faculty of Marian University Leighton School of Nursing as partial fulfillment of degree requirements for Doctor of Nursing Practice, Family Nurse Practitioner Track.

Nurses are the backbone of healthcare, therefore; the strength of the nursing workforce is critical to effective function of the healthcare system. Nursing shortages affect the work environment, causing nurses to work with less staff for longer hours with the potential to affect the quality of patient care. The heightened stress experienced by nurses results in job dissatisfaction and attrition. According to Chen and Fang (2016), low job satisfaction and high turnover results from nursing burnout, which causes job dissatisfaction. Job dissatisfaction affects retention rates therefore "improving the work environment" may reduce turnover (p.1). A mentoring intervention has the potential to improve the work environment.

The purpose of this project is to determine the effect of a mentoring program on job satisfaction and retention rates in nursing. The question being raised is "Does the hospital nurse that participates in a mentorship program have more job satisfaction and retain employment compared to the hospital nurse that does not participate in a mentorship program?"

Background

Staffing problems have affected the nursing workforce nationwide and as a result a solution to the nursing shortage has been sought out. Mentoring is a popular developmental approach

that has been applied to retention efforts (Weng, Huang, Tsi, Chang, Lin and Lee, 2010). In response to nursing shortages healthcare agencies have initiated mentorship programs to determine if these programs would affect retention (Halfer, Graf and Sullivan, 2008; Grindel and Hagerstrom, 2009). Mentoring is especially helpful in the development of nursing leadership; it is rooted in building relationships (Jakubik, Eliades, Weese, 2016). Mentoring has its roots in Greek mythology; the word mentor is associated with guidance, teaching and helping (Jakubik et al., 2016)). Healthcare agencies have also discovered the value of mentorship as evidenced by the many mentoring initiatives that have been instituted across the nation and internationally (Weng et al., 2010; Grindel and Hagerstrom, 2009). Various hospitals cite socialization into the profession and the work environment as partial reasons for high attrition rates (Mills & Mullins, 2008). New nurses start jobs, but they don't stay, often leaving within the first year (Jones, 2017). The concept of "nursing eating their young" has been brought to light (Latham, Hogan and Ringl, 2008). The current state of the nursing workforce has brought about the need for the development of mentoring programs to address staffing issues.

Problem Statement

Retention problems in healthcare agencies have impacted the nursing labor force. The work environment has been shown to be unsupportive which has resulted in low retention rates (Hurst and Baucum, 2003). A midwestern hospital had a high turnover rate and determined that a change in practice was needed to improve job satisfaction and retention. Mentoring programs have shown positive results effecting job satisfaction and retention; this program was implemented to address the problem (Halfer, Graf and Sullivan, 2008).

Organizational “Gap” Analysis of Project Site

Stakeholder Assessment

A midwestern hospital desired Pathway to Excellence Designation in professional development. Hospital leadership determined that a mentoring project would be formulated and implemented as a professional development initiative. A gap analysis and SWOT analysis were completed as an organizational assessment. The gap analysis revealed that the development, implementation and evaluation of a mentoring program is evidence based best practice and has shown to increase retention rates. Table 1 represents best practice strategies for the project. Table 2 lists the barriers related to project planning and implementation. Table 3 represents elements of organizational readiness in a SWOT analysis.

Table 1

Best Practice Strategies
Mentoring Program
1. Develop Program Specifics
2. Publicize Program
3. Recruit Mentors
4. Training for Mentors and Mentees
5. Match Mentees to Mentor
6. Begin Mentoring Relationship 9-12mos
7. Evaluation
8. Data Collection Pre/Post Survey

Table 2

Barriers to Best Practice Implementation
Limited Access to Nursing Staff
Possible Staffing Issues
Timeline Issues/lining up with new hires

Table 3

SWOT
STRENGTHS - Committed Leadership
WEAKNESS – Inability to come staff during training
OPPORTUNITIES – Collaboration with a local university for process improvement
THREATS – Training cost, staff availability for training

Literature Review

According to Hurst and Baucum (2003), mentoring is helpful in the development of nursing skills and socialization to the profession; this adds to job satisfaction and retention. Literature has shown that mentoring can be an effective intervention to increase job satisfaction and improve retention rates (Weng, Huang, Chang, Lin and Lee, 2010; Halfer, Graf and Sullivan, 2008; Grindel and Hagerstrom, 2009; Jones, 2017). Mentoring reduces the cost of staffing replacement, new employee recruitment and as a result of job satisfaction and retention positively impacts the quality of care (Halfer, Graf and Sullivan, 2008, Jones, 2017). Several authors reported positive statements made by the mentees in reference to their mentoring experience, indicating that mentees felt a sense of accomplishment, and expressed a greater

commitment (Weng et al., 2010, Jones, 2017). One mentee stated, "My mentor has saved me several times" (Jones, 2017, p. 77). Weng et al., (2010) conclude that the "role modeling function" of mentors influences new nurses resulting in contentment and commitment (p. 7). Recommendations that were made included that a mentor possess a "professional attitude" in addition to expert skill to improve mentor impact role display (Weng et al., 2010). Grindell and Hagerstrom (2009) indicate that for mentoring programs to be successful, healthcare agencies must commit to supportive mentorship programs. Mentoring is rooted in relationship, and although several terms have been used there are two common themes which are relationship and support. Many studies have shown mentoring to be effective in increasing job satisfaction and the intent to stay on the job.

Theoretical Framework

The theoretical framework used for this project is Patricia Benner's From Novice to Expert. From Novice to Expert is based on the Dreyfus Model which is a model that promotes developmental stages and skill acquisition (Benner, 1984). The theory details five levels of skill progression which are novice, advanced beginner, competent, proficient and expert (Alligood, 2018). Progression of skill is circumstantial as the novice nurse evolves from being dependent on regulations to intuition, experience and then acquires a comprehensive perspective (Alligood, 2018). Comprehensive perspective develops by a phenomenon called "embodied intelligence" which is defined as coming to know things by being in situations (Alligood, 2018, p. 100). Mentoring is helpful and offers support in the acclimation process as new nurses adapt to new roles and environments. Mentoring allows new nurses to develop professionally through counseling, coaching and guidance.

Goals/Objectives/Expected Outcomes

The over-reaching goal for this project was to increase nursing staff retention through mentoring.

Objectives and strategies to meet expected outcomes are defined as follows.

- Mentors will attend a one-time training session prior to the start of the program.
- Mentees will attend an orientation class before beginning the program.
- Mentors and mentees will meet once a month.
- Mentors and mentees will complete required forms prior to the program start and monthly meeting forms during program participation.

Project Design/Methods

During an initial meeting, the DNP student and the project lead discussed the hospital's desire to pursue clinical excellence through the implementation of a mentoring program.

Organizational leadership previously determined the need for nurses to feel supported, exemplified by job satisfaction and retention. After a review of the literature, the DNP student met with the project lead once again to share the findings of the literature search. The DNP student was granted approval by the project lead to develop a mentoring program for the hospital. The DNP student formulated a mentoring program and a mentor training class as a translation of research evidence. According to the Center for Evidenced Based Medicine, knowledge is important however; impact and greater meaning are obtained when knowledge is useful (2019).

The mentor training session was held and included a power point presentation with an overview of mentorship and a discussion about the importance of socialization (see Appendix A). Preparation for the mentoring relationship included personal worksheets and interactive activities such as the "remember when" exercise and workplace scenarios to promote problem

solving (see Appendices B through F). Mentoring guidelines were presented during the training and the mentoring contract was completed (see Appendices G & H). Mentee orientations were handled by the project lead and purposed to be held at completion of employment orientation and preceptorship. Mentor/mentee monthly meetings were initiated once new hire orientation and preceptorship were completed. The mentor/mentee dyad met to develop goals, build a relationship, and strengthen communication. The mentoring program was initially planned with a duration of 9 months immediately following new hire orientation and preceptorship. Due to organizational changes mentoring was reduced from 9 months to a range of three to four months duration.

Project Site and Population

The project took place at a small Midwest community hospital east of Indianapolis. The hospital maintained a 24-hour emergency department, surgical department, critical and progressive care unit, labor and delivery, radiology and was equipped with a cancer center. A professional building located adjacent to the hospital was available for private physician practice. The pre-surveys were completed by the nurses who were the stakeholders. The program was advertised with posters, flyers, and emails. Mentors were recruited, mentor-mentees were matched, mentors-mentees attended a training session and mentors and mentees entered into a contractual agreement for participation in the program (see Appendix H). Program protocol indicated that the mentor-mentee dyad would meet monthly and complete evaluations at three, six and nine months. Upon completion of the mentoring program the mentees were asked to complete a post-survey. The DNP student worked closely with the project lead. A hospital employee/Marian University Associate Professor who completed Research Ethics and

Compliance Training and was certified by Collaborative Institutional Training Initiative program collected the pre and post surveys. The project was authorized by hospital leadership.

Participants

The participants included eight mentors and seven mentees. The mentors met the mentoring criteria each having maintained one year of hospital employment with good standing to qualify as a volunteer. The mentees were required as new employees to participate in the mentoring program as a part of the hospital orientation-preceptorship-mentoring process. The newly hired nurse terms of employment ranged from three to five months. There were six female and one male nurse mentees ranging in age from 36 to 55 years. The mentees were educationally prepared at the baccalaureate (n=2) and associate (n=5) level, with nursing experience ranging from one to 15 years.

Measurement Instruments and Data Collection

The survey instruments used were the Minnesota Satisfaction Questionnaire (MSQ) (see Appendix M), Mentor Satisfaction Survey (see appendix K), Mentee Evaluation (see Appendix L) and the Monthly Meeting forms (see Appendices I & J). The MSQ is a 20-question survey questionnaire that is used to measure intrinsic, extrinsic and general job satisfaction within a work organization. The MSQ has provided evidence of construct validity internal reliability (Weiss, Davis, England and Lofquist, 1967). The MSQ was used as a pre and post intervention questionnaire by the mentees of each dyad. The confidentiality and anonymity of the MSQ pre and post survey forms were preserved while secured in a locked cabinet within the hospital

Nursing Education office. The pre-survey mean satisfaction score was 86 and the post-survey mean satisfaction score was 82 (see Table 4). This may be due to the low response rate for the post-survey as only three of the seven participants returned their post-survey. The Mentor Satisfaction Survey is a questionnaire with a Likert scale used to measure the mentee's satisfaction with the mentor. There was a 28.5 % response to the Mentor Satisfaction survey showing 50% satisfied and 50% very satisfied. The mentee evaluation form consist of 24 yes, no questions indicating the mentee's interaction with the mentor and response to mentor guidance and availability, one form was returned indicating 21/24 yes responses. The monthly meeting form documents the names of the mentor/mentee dyad, date and time spent during meeting sessions. Only one meeting form was submitted post intervention.

Table 4

Mentee	MSQ general satisfaction score Pre-intervention	MSQ general satisfaction score Post-intervention	
1	97	88	
2	86	80	
3	95	-	
4	83	-	
5	77		
6	82	80	
7	82	-	

Mean general satisfaction score	86	83	
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The pre and post-surveys were collected by a CITI certified designee within the hospital organization. The monthly attendance forms and evaluation forms were collected by a CITI certified designee.

Ethical Considerations/Protection of Human Subjects

The Marian University Internal Review Board (IRB) determined that this project was exempt from Human Subject Review. The study posed no risk of harm to participants and no humans were endangered. Confidentiality was preserved and only CITI certified designees collected the pre and post surveys.

Data Analysis and Results

The initial plan for analysis was to compare pre-surveys with post surveys to evaluate if mentoring enhanced job satisfaction and intent to stay. Although seven mentee participants began the program only three mentee's submitted post survey forms. According to Ms. Whitney Speicher, one of the mentee's communicated verbally "Thanks for this program because if it hadn't been for my mentor I would've quit" (personal communication, 2019). As a secondary measurement, mentee retention rates were assessed. Ms. Speicher stated that the hospital previously experienced high nurse turnover at the rate of 9.09% prior to the mentorship program compared to 4.54 % turnover after implementation of the mentorship program (personal

communication, 2019). Several authors reported that evaluating job satisfaction could be reflected in retention rates (Grindel & Hagerstrom, 2009; Halfer et al., 2008).

Conclusion

The mentoring intervention provided support and guidance to the newly hired nurses during which time there was an opportunity to build a relationship with the mentor. There were limitations to the intervention, including deviation from program protocol. The mentor/mentee dyads may not have all met monthly as was stipulated in the program guidelines. There was also a low response to the post-intervention surveys at program completion. Low response affects the final analysis and the ability to adequately assess the effect of the mentoring program as is also reflected in research evidence (Grindel and Hagerstrom, 2009). Lapses in program compliance indicate a need for closer organizational oversight and dedication. Organizational commitment is integral to an optimal outcome in a process improvement such as a mentoring project (Grindel and Hagerstrom, 2009, Bally, 2007). Mentoring increases job satisfaction and retention while simultaneously reducing cost related to "recruitment, orientation and temporary labor coverage" (Halfer, Graf and Sullivan, 2008, p. 243). Historically, mentoring has had positive outcomes helpful in navigating the challenges of nursing shortages.

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Appendix A



MENTORING

By Kelly Patton-Boyd BSN, RN, DNPS

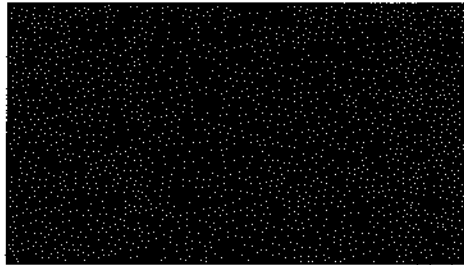
GREETINGS

■ Introduction-

Hancock Regional Mentoring Program was developed to promote nursing excellence by cultivating professional development through mentorship which promotes creativity, achievement, autonomy, self-esteem building and decision making. Mentors impact lives, careers and make a difference.

■ Background-

Mentoring is a valuable tool used to enhance, and provide vital support, and facilitate professional socialization. Mentoring is utilized by healthcare agencies across the nation to reduce attrition rates and increase job satisfaction. Mentoring is an effective strategy instrumental in professional growth and quality in the workplace.



Slide show mode to view video

MENTORSHIP – merriam-webster defines mentorship as

1 a friend of Odysseus entrusted with the education of Odysseus son Telemachus

2. a trusted counselor or guide

Mentorship Definitions

A wise and faithful advisor committed to a working relationship with a new nurse or new graduate and helps to navigate the unit, hospital politics, empowers new employees to feel supported in their growth (Faron & Poeltler, 2007).

A mentor is a career role model, advises, guides and promotes another's career and training, the relationship between mentor and trainee is described as intense and emotional (Mills & Mullins, 2008).

"A nurturing process in which a more skilled and experienced person, serving as a role model, teaches, sponsors, encourages, counsels and befriends a less skilled and less experienced person for the purpose of promoting the latter's professional and/or personal development [Anderson 1998]" (Mills & Mullins, 2008).

The Need for Mentorship

Nurses are leaving the profession because...

Stress

Inadequacy

Anxiety

Oppression

Disempowerment

Horizontal Violence

The Need for Mentorship

■ Nurses report:

“On some units they’ll eat you alive”

NURSES
EAT
THEIR
YOUNG





MENTORS MAKE A DIFFERENCE

Success Stories

A new graduate nurse was considering finding new employment because she perceived that none of the staff wanted to eat lunch with her. Interventions by her mentor, including surreptitiously coordinating her work schedule to coincide with a sociable group of nurses, have helped her assimilate well into the unit.

Mentors Make a Difference



Success Story

A new graduate nurse told her mentor: "Sometimes you feel like you're very alone and, on some units, they'll eat you alive. I'm so glad that I have a mentor. It helps to have an experienced and concerned person to bounce around the trials of the day. I know someone cares. Thank you, and please don't ever think of leaving."

Mentor Exercise

- 1. Remember When
- 2. Mentors Helpful Hints Exercise
- 3. Group Exercise
- 4. Mentor Self Assessment

Mentorship Program Overview Requirements

Mentor-mentee matching, and the mentor-mentee contractual agreement need to be completed.

The mentoring program is a 9-12-month commitment, pre-survey and incremental evaluations at three, six, nine and 12 months must be completed followed by a post survey. The mentor and the mentee may use discretion as to whether the mentee needs 9 or 12 months of mentoring.

- Pre-surveys will be completed by the mentees prior to the implementation of the mentoring program and will be a requirement for anyone participating in the program. Pre-surveys will either be completed electronically or are to be collected by the designated person.

A contractual agreement is to be completed prior to participation in the program and indicates what is expected of the mentor, mentee, training prior to participation is required, matching with a mentor/mentee, monthly meeting requirement, incremental evaluations at three, six, nine, 12 months and post-survey to be completed upon completion of the program. Post-surveys are to be completed electronically or given to the designated person.

- Program Intervention.
- During the program mentors will be required to submit monthly meeting attendance sheets to the designated person.
- During the program three, six, nine and 12-month evaluation forms should be completed by the mentor and the mentee to submit to the designated person for forwarding to Human Resources.
- Post program intervention
- Post-surveys are to be completed and given to the designated person

Mentor Qualities and Characteristics

- | | |
|---|--|
| ■ Integrity | Role model |
| ■ Advocate | Experienced |
| ■ Counselor | Professional |
| ■ Experienced | Proficient |
| ■ Professional | Skilled |
| ■ Proficient | Helpful |
| ■ Skilled | Willing to Attend Scheduled Meetings |
| ■ Helpful | Agrees to Complete Evaluation Forms |
| ■ Willing to commit to 9-12 months mentoring. | Agrees to the terms of the mentoring program |
| ■ In good standing with Hancock Regional | |
| ■ | |
| ■ | |
| ■ | |
| ■ | |

Phases of the Mentorship Relationship

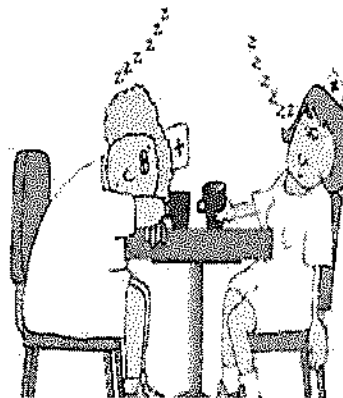
- Preparation
- Negotiation
- Enabling Growth
- Coming to a Closure

Questions/ Comments

- Notes

BE THE
TYPE OF
NURSE
YOU WANT TO
WORK WITH

allnurses.com



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Appendix B

"Remember When" Exercise

Objective

To help you remember in a personal, realistic way, what it was like to be a new nurse or a new nurse on the unit.

QUESTIONS

- What was hard for you when you first became a nurse?
- As a new nurse or new nurse employee what were your fears
- As a new nurse or new nurse employee what were your needs
- As you look back, was there anyone that was helpful to you?
- What did that helpful individual do for you that was so helpful?
- As a new nurse or new employee what were your strengths that helped you?
- As a new nurse or new employee what were your weaknesses?
- As a new nurse or in a position as a newly hired nurse have you ever had someone to encourage you and if so how did it impact your career?

Appendix D

Mentor Self-Assessment

This activity is designed to help you to identify your strengths and areas that require more development. Read each characteristic and determine whether it is a strength or requires more development. Some items may be a strength and others may need further development. Indicate the appropriate answer.

	Strength	Needs Development
Flexible	—	—
Good listener	—	—
Offers constructive criticism	—	—
Possesses conflict resolution skills	—	—
Observes people, places and situations	—	—
Patience	—	—
Able to relate to different personality types	—	—
Competent, resourceful	—	—
Coaching, counseling and mentoring ability	—	—
Delegates	—	—
Thinks before action	—	—
Team builder, relationship builder, consistent	—	—
Considerate of the needs and feelings of other	—	—
Understands the influence of the mentor role	—	—
Open minded	—	—
Knows how to approach a problem	—	—
Builds relationships	—	—
Knows how to bring out the best in people	—	—
Skillfully approaches people and situations	—	—
Networker	—	—

This activity is an opportunity for self-assessment and will help you as you prepare to mentor.

Academy of Medical -Surgical Nurses

Appendix E

Nursing Scenario/Group Exercise

1. There is a new nurse working on a med-surg unit, she has five patients, three on IV antibiotics, two constantly on the call light, she has a critical lab the and the Dr. is waiting to talk to her, it's 10 am and she still needs to give an 8 o'clock med. The nurse begins to cry.
As a mentor what can you do to help or encourage? How can you help her to learn to manage her time? What can she do until she's better able to manage her time?
2. There is a new nurse and she asked a seasoned nurse for help, the seasoned nurse replied, "figure it out on your own, because I'm busy" The new nurse finally got some help and at the end of the day she was discouraged and talked about finding another job.
As a mentor how can you help? What do you say to encourage?
3. There is a new nurse having a tough day she breaks down and says, "I don't think I can do this."
As a mentor what can you do to help or encourage?
4. This is the nurses second week working at the hospital and no one has befriended her. Every time she goes to lunch she ends up sitting by herself; other nurses from her unit eat lunch at the same time but never ask her to join them. She's becoming a little sad and beginning to wonder why people at the hospital aren't friendly and is also wondering if it's the place for her.
As a mentor how would you approach this issue?
5. The new nurse complains that she has a tough time communicating with her supervisor/manager and that every time she approaches her she gets brushed off. She is now becoming discouraged.
As a mentor what encouraging words would you share?
6. This new nurse complains of constant "micromanaging" and no opportunity for autonomy? As a mentor how do you respond to this?

This will be a group discussion. Nurses will be placed in groups and given a scenario so that they can discuss it. It is an opportunity to think about hypothetical situations and a possible solution.

Appendix F

Mentoring Relationship

Mentoring is based on relationship. Each meeting with your mentee is an opportunity to get to know them better, share and bond. A successful mentoring relationship can last a lifetime. The mentoring relationship builds trust because it's confidential. Mentoring strengthens the mentor and mentee relationship especially as the mentor supports the mentee in their work. As the mentoring relationship builds through communication, sharing, and experience there is also counseling, shared wisdom, laughter and aha moments.

Appendix G

Program Requirements

Mentor-mentee matching, and the mentor mentee contractual agreement need to be completed. If for any reason the mentor-mentee match is not agreeable, please notify program contact.

At three, six, nine- and 12-months evaluations must be completed. The mentor and the mentee may use discretion as to whether the mentee needs 9 or 12 months of mentoring.

- Pre-surveys will be completed by the mentees prior to the implementation of the mentoring program and will be a requirement for anyone participating in the program. Pre-surveys will either be completed electronically or are to be collected by the designated person.

A contractual agreement is to be completed prior to participation in the program and indicates what is expected of the mentor and mentee. Mentor training and mentee orientation prior to participation is required, monthly meeting requirement, incremental evaluations at three, six, nine, 12 months and post-survey to be completed upon completion of the program. Post-surveys are to be completed electronically or given to the designated person.

- Program Intervention
- During the program mentors will be required to submit monthly meeting attendance sheets to the designated person.
- During the program three, six, nine and 12-month evaluation forms should be completed by the mentor and the mentee to submit to the designated person for forwarding to Human Resources
- Post program intervention
- Post-surveys are to be completed electronically or given to the designated person

Appendix H

Mentor Contract Date _____

Name _____

I agree as a mentor participant in the Hancock Regional Hospital Mentoring Program to abide by the requirements of the mentorship program. The requirements are listed as follows:

Confidentiality- the mentoring relationship is confidential, and everything shared between the mentor and the mentee is confidential except for violation of hospital policy. Violation of hospital policy is not to be kept confidential.

Complete the pre-survey

Attend the mentor training class

Arrange an initial get acquainted meeting with the mentee

Duration of the mentoring relationship is at the discretion of the mentor and the mentee; the duration can be nine or 12 months

Meet with mentee monthly

- Suggested meeting duration one hour
- Complete monthly forms
- During monthly meetings discuss goals and objectives as identified by the mentee.
- Call the mentee in between monthly meetings to see how they are doing. If indicated check on the mentee more often.
- You must meet with the mentee at least monthly.
- If a meeting is missed reschedule and make it up
- If unable to contact your mentee after three calls report to the program contact
- Instruct the mentee to bring written goals for each monthly meeting

Evaluations must be completed at

- 3-month evaluation
- 6-month evaluation
- 9-month evaluation
- 12-month evaluation

Post survey

Mentor Signature _____

Witness _____

Appendix I
Monthly Meeting

Date _____

Mentor _____ Signature _____

Mentee _____ Signature _____

My Goals for this meeting

What did we accomplish during this meeting

Goals for next meeting

Appendix J

Mentoring Monthly Meeting

Month/Year _____

Date _____

Mentor name printed _____

Mentor signature _____

Mentee name printed _____

Mentee signature _____

Meeting Duration _____

Meeting was productive. yes _____ no _____

Appendix K
Mentoring Evaluation Form

Mentee Name _____ Date _____

Please show your satisfaction with this mentoring program, choose a number from 1 to 5 indicating your satisfaction. Less satisfied 1 2 3 4 5 more satisfied

Have you experienced professional growth through this mentoring program?

Less 1 2 3 4 5 more satisfied

Have you experienced personal growth through this mentoring program?

Less 1 2 3 4 5 more satisfied

Has your ability to develop supportive relationships improved through this mentoring experience?

Less 1 2 3 4 5 more satisfied

Has this mentoring experience increased your ability to communicate with your colleagues?

Less 1 2 3 4 5 more satisfied

Has this mentoring experience increased your ability to communicate with other healthcare providers?

Less 1 2 3 4 5 more satisfied

Has this mentoring experience increased your ability to communicate with patients?

Less 1 2 3 4 5 more satisfied

Has this mentoring experience increased your ability to communicate with physicians?

Less 1 2 3 4 5 more satisfied

Has this program improved your ability to problem-solve work issues?

Less 1 2 3 4 5 more satisfied

Are you satisfied with your mentoring relationship?

Less 1 2 3 4 5 more satisfied

Are you satisfied with your mentor?

Less 1 2 3 4 5 more satisfied

Are you satisfied with the discussions at your mentoring meetings?

Less 1 2 3 4 5 more satisfied

Are you able to communicate with your mentor?

Less 1 2 3 4 5 more satisfied

Do you feel comfortable communicating with your mentor?

Less 1 2 3 4 5 more satisfied

Has this program helped you to transition into your workplace?

Less 1 2 3 4 5 more satisfied

Are you satisfied with your experience in this mentoring program?

Less 1 2 3 4 5 more satisfied

Has this mentoring program been a positive experience for you?

Less 1 2 3 4 5 more satisfied

Appendix L

Evaluation

Date _____

3-month _____ 6-month _____ 9-month _____ 12-month _____

Mentor printed name _____

Mentor signature _____

Mentee printed name _____

Mentee signature _____

Evaluation of the relationship with the mentee

Mentee keeps appointments with mentor yes _____ no _____ sometimes _____

Explanation _____

Mentee calls when there is a need yes _____ no _____ sometimes _____

Mentee participates in conversation to develop strategies to meet his or her professional goals yes _____ no _____

Explanation _____

Mentee speaks freely about their work environment yes _____ no _____

Mentee has been willing to evaluate their work environment in a constructive manner yes _____ no _____

Mentee follows-up with professional resources provided by the mentor yes _____ no _____

Mentee has discussed their long-range career goals with mentor yes _____ no _____

Mentee appears confident in mentor's ability to guide yes _____ no _____

Mentee discussed ways to handle challenging patient situations yes _____ no _____

Mentee discussed ways to handle challenging situations with co-workers yes _____ no _____

Mentee discussed ways to handle challenging situations with a physician yes _____ no _____

Mentee discussed ways to handle challenging situations with their supervisor and/or unit manager yes _____ no _____

Mentee discussed their ability to advocate for the patient yes _____ no _____

Mentee discussed their previous clinical decisions yes _____ no _____

Mentee indicated a value for discussions with the mentor yes _____ no _____

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Mentee allowed the mentor to advocate for him/her yes_____ no_____

Mentee has assessed their personal professional performance with mentor yes_ no_

Mentee has discussed their ability to act independently as a nurse yes_____ no_____

Mentee freely communicates problems in their workplace yes_____ no_____

Mentee has indicated current struggles and immediate learning needs yes_____ no_____

Mentee has discussed healthcare agencies operation with mentor yes_____

no_____

Mentee has discussed human behavior in the workplace yes_____ no_____

Mentee has discussed their future career potential yes_____ no_____

Mentee has actively participated in the mentoring program yes_____ no_____

Comments _____

Appendix M

Appendix M

minnesota satisfaction questionnaire
(short-form)



Vocational Psychology Research
UNIVERSITY OF MINNESOTA

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minnesota satisfaction questionnaire

The purpose of this questionnaire is to give you a chance to tell **how you feel about your present job**, what things you are **satisfied** with and what things you are **not satisfied** with.

On the basis of your answers and those of people like you, we hope to get a better understanding of the things people **like and dislike about their jobs**.

On the next page you will find statements about your **present job**.

- Read each statement carefully.
- Decide **how satisfied you feel about the aspect of your job** described by the statement.

Keeping the statement in mind:

—if you feel that your job gives you **more than you expected**, check the box under **"Very Sat."** (Very Satisfied);

—if you feel that your job gives you **what you expected**, check the box under **"Sat."** (Satisfied);

—if you **cannot make up your mind** whether or not the job gives you what you expected, check the box under **"N"** (Neither Satisfied nor Dissatisfied);

—if you feel that your job gives you **less than you expected**, check the box under **"Dissat."** (Dissatisfied);

—if you feel that your job gives you **much less than you expected**, check the box under **"Very Dissat."** (Very Dissatisfied).

- Remember: Keep the statement in mind when deciding **how satisfied you feel about that aspect of your job**.
- Do this for **all** statements. Please answer **every** item.

Be frank and honest. Give a true picture of your feelings about your **present job**.

Ask yourself: How **satisfied** am I with this aspect of my job?

Very Sat. means I am very satisfied with this aspect of my job.

Sat. means I am satisfied with this aspect of my job.

N means I can't decide whether I am satisfied or not with this aspect of my job.

Dissat. means I am dissatisfied with this aspect of my job.

Very Dissat. means I am very dissatisfied with this aspect of my job.

On my present job, this is how I feel about . . .	Very Dissat.	Dissat.	N	Sat.	Very Sat.
1. Being able to keep busy all the time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The chance to work alone on the job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The chance to do different things from time to time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The chance to be "somebody" in the community	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The way my boss handles his/her workers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The competence of my supervisor in making decisions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Being able to do things that don't go against my conscience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. The way my job provides for steady employment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. The chance to do things for other people	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. The chance to tell people what to do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. The chance to do something that makes use of my abilities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. The way company policies are put into practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. My pay and the amount of work I do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. The chances for advancement on this job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. The freedom to use my own judgment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
16. The chance to try my own methods of doing the job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
17. The working conditions	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
18. The way my co-workers get along with each other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
19. The praise I get for doing a good job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
20. The feeling of accomplishment I get from the job	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	Very Dissat.	Dissat.	N	Sat.	Very Sat.

Name _____ Today's Date _____ 19____
Please Print

1. Check one: Male Female

2. When were you born? _____ 19____

3. Circle the number of years of schooling you completed:

4 5 6 7 8
Grade School

9 10 11 12
High School

13 14 15 16
College

17 18 19 20
Graduate or
Professional School

4. What is your present job called? _____

5. What do you do on your present job? _____

6. How long have you been on your present job? _____ years _____ months

7. What would you call your **occupation**, your usual line of work? _____

8. How long have you been in this line of work? _____ years _____ months