



Nurse leader mentorship

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Identifying opportunities to retain nurses isn't a new challenge for those in nursing leadership. Organizations diligently work to recruit and retain dedicated, skilled, and motivated nurses. There continues to be a focus on examining National Database of Nursing Quality Indicators® survey data to improve quality care, prevent adverse events, and allow nurses to share their perceptions of support from frontline management and senior leadership. These efforts strive to promote a culture in which nurses' voices can be heard.



However, there's another step in this process that can't be overlooked: identifying and developing our nurse leaders to not only prepare them for their roles, but also retain them. The Institute of Medicine (IOM) Future of Nursing report reinforces the call for nurses to mentor those new in their role.¹ This is no different as nurses progress through their career to higher levels of leadership.

Recognizing nursing leadership turnover trends, as well as a lack of effective organizational succession planning, became the impetus for the Organization of Nurse Leaders, New Jersey (ONL NJ) to focus on providing effective and meaningful mentorship opportunities for its members.

Organizational impact

The financial impact of staff turnover is well documented, as is the impact on unit and department functioning. However, gaps remain in examining the impact of turnover among nurse leaders, as well as establishing an effective succession plan. It isn't uncommon to hear of nurses being thrust into leadership roles without proper preparation. Often, nurses become managers either at the recommendation of a colleague or by default.² Nurses may be placed in leadership roles due to their seniority or clinical competency, not necessarily due to their

desire to fill the role. There's evidence that nurse leaders are ill-equipped in terms of knowledge and may lack support and guidance to manage the challenges inherent in the role, such as productivity, job satisfaction, and retention concerns. This highlights the need for skill development and support to attain success.³

Results of a systematic review showed a lack of robust evidence to facilitate the retention of nurse leaders; however, data did reflect multifactorial decisions to stay, including support from a transformational leadership team.⁶ Continued efforts examining how to retain frontline managers have identified themes of workload responsibilities and work-life balance.⁷ Current evidence-based strategies for nurse retention focus on specific nurse leader behaviors. The rationale for this is that nurse leader behavior creates a positive correlation with employee satisfaction and, ultimately, organizational commitment. The three most identified areas facilitating retention are autonomy, recognition, and communication.⁸

The importance of mentoring has transcended all areas of nursing and is supported by numerous professional nursing organizations. With the current average age of an RN being 50, the focus is now on how to guide and mentor nurses into leadership roles.⁹ When an organization promotes leadership development through mentoring, it may improve succession planning and retention of not only its nurse leaders, but also its frontline staff.

Translating evidence into practice

One organization that has taken the initiative to address nurse leader mentorship is the ONL NJ. This organization represents over 90% of hospitals in New Jersey and a collective workforce of over 116,000 nurses across the healthcare continuum, as well as academia.¹⁰ In an effort to align with both the IOM and American Organization of Nurse Executives, and prepare nurses for leadership roles, a statewide mentoring program was created.^{1,11} The ONL NJ mentoring program provides a year-long

Table 1: Mentoring relationship themes

Making a connection	Giving and getting	Emotional roller coaster	Logistics	It can't be forced
<ul style="list-style-type: none"> • Participants want to know they have a person who they can talk to and learn from 	<ul style="list-style-type: none"> • Mutual relationships • Both parties contribute and benefit from the relationship 	<ul style="list-style-type: none"> • Various feelings and emotions from nervousness as the relationship starts to excitement as goals are met to sadness during the separation phase 	<ul style="list-style-type: none"> • Lack of structure for when to meet, how often, and what topics to discuss • Geographic location of pairings challenging 	<ul style="list-style-type: none"> • Participants want a say in who they're paired with

Table 2: Mentoring education workshop

	Mentorship committee activities	Purpose
Preeducation session	<ul style="list-style-type: none"> • Collect résumé/survey of mentors and mentees • Organize seating arrangements for education session 	<ul style="list-style-type: none"> • Identify common interests/specialties/expertise • Consider geographic location, mentoring goals, and current positions
Education session	<ul style="list-style-type: none"> • Curriculum includes understanding mentoring relationships, being reflective and aware, and an introduction to the tool kit and its components • Incorporation of small group projects • Table assignments strategically made based on potential pairings • Participants list preferences for pairings 	<ul style="list-style-type: none"> • Provide meaningful instruction on what mentoring is, its goals and objectives, and how to make it beneficial for both participants • Facilitate networking and relationship building among potential pairings • Support natural personal connections
Posteducation session	<ul style="list-style-type: none"> • Committee review of pairing requests • Notification of pairings with distribution of tool kit • Quarterly follow-up by the committee liaison to facilitate success of pairings 	<ul style="list-style-type: none"> • Provide as much support and guidance as possible

mentoring experience for leaders at all levels and in various capacities. For example, based on their needs, new and aspiring nurse leaders have been paired with experienced frontline managers. Dyads have also included new CNOs with more experienced nurse executives and novice nurse researchers with experts in nursing research.

At the conclusion of the first two cohorts of the program, the ONL NJ conducted its first qualitative research study to examine experiences and identify areas for improvement. Of the 25 initial pairings from cohorts 1 and 2, there were several pairings that either never connected or weren't an effective "match." Study findings included the identification of five themes revolving around the mentorship relationship between the mentor and mentee. (See *Table 1*.) Additional feedback suggested the need

for an improved educational program before dyad matching and more structured guidance as the pairing navigates their relationship. As a result, the program now includes a 1-day structured educational session, allowing participants to learn about mentorship, network, and interact more closely with those interested in being or having a mentor.¹² (See *Table 2*.) This provides the opportunity for members to identify common areas of interest, which encourages relationship building and mitigates potential barriers to success such as geographic location or conflicting personality traits.

Another outcome from the research findings included the development of an evidence-based toolkit to guide both the mentor and mentee in the year-long relationship. The ONL NJ Mentorship Tool Kit outlines the phases of the mentor-

ing relationship, explores and defines roles, and facilitates dyad goal setting and meetings through assessments and checklists, as well as the ability to evaluate progress as they go along.¹² Although the goals and outcomes of each mentoring relationship vary, the intent of the program is to provide a structured guide to support the dyads' goals and objectives. Dyad expectations often extend beyond the year-long relationship. (See *Table 3*.) The combination of a structured education session, focused networking, and guidance via the toolkit has been supplemented with check-in points with mentorship committee members. This action is the result of recent research findings that an independent resource can help keep the dyad on track, address any concerns, and provide further assistance as needed to promote success and meet the needs of both parties.

Table 3: Expectations of participants

Predyad pairing (up to 3 months before pairing)

Commit to personal and professional development

Completion of preprogram questionnaire outlining areas of interest/expertise/goals

Attend mandatory mentoring educational program

Network with other nurse leaders

Recognize that the mentee determines how the relationship develops/evolves

Identify potential mentorship partners

During dyad pairing (1-year commitment)

Utilize ONL NJ Mentorship Tool Kit to guide relationship/progression

Identify/work through phases of the mentoring relationship

Establish/commit to regularly scheduled meetings either in person or via telephone/e-mail

Consistently evaluate/reevaluate goals and objectives of the mentee using worksheets/self-reflection

Maintain quarterly communication with committee liaison to facilitate success and address challenges

Postdyad pairing (ongoing)

Recognize the importance of program evaluation through the use of provided evaluation tools (partner/program evaluation)

Consider future involvement in dyad pairings as either a mentor or mentee (same or new role)

Support the program through participation in program outcomes research

Commit to lifelong learning and promote the development of future nurse leaders

Since its inception, the ONL NJ has had five cohorts of mentor/mentee dyads, helping over 100 nurse leaders build their confidence and skills while promoting professional development. Both mentors and mentees have indicated personal and professional growth from these mentoring relationships. Since the adjustments to the mentoring program, there have been an additional 50 dyads, with approximately 5 dyads failing to establish an effective mentoring relationship. Future data analysis includes the identification of outcome data related to participation in

the mentorship program. Data points include, but aren't limited to, opportunities for promotion, advanced formal education, and professional certifications.

Up for the challenge

With increasing quality expectations and evolving methods of how we provide care, we must prepare future nurse leaders for the challenges that lie ahead. The trickle-down effect of failing to mentor our nurse leaders can have a profound and far-reaching impact on the future of nursing and healthcare.

As mentoring continues to weave its way into organizations, we must not forget to include those in nursing leadership. **NM**

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