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A Mentoring Program: Mentoring the Mentor and Mentee

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ABSTRACT

Mentoring is a concept that is essential in recruiting and retaining nursing faculty. While a number of nursing programs provide methods for mentoring novice faculty members, the success of such activities may often be determined by the rate of faculty attrition. Expectations, workload, and attrition rate of novice faculty members were the catalysts for developing a program focused on mentoring the mentor and mentee. Previously, mentors functioned in the roles of teacher or resource person, causing the roles of both mentor and mentees to be unclear and without specificity. With a focus on teaching mentors how to be more effective while mentoring the novice faculty members, a Nurse Educator Mentor was assigned to develop and implement the Faculty Mentoring Program. Faculty members who have experience teaching, as well as novice faculty members, are able to transition into their roles easier thus, promoting faculty attrition, productivity, and better outcomes. This article presents a discussion of a successful nursing faculty mentoring program.

Keywords: Nurse Educator Mentor, Faculty Mentoring Program, transition...

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Introduction:

Background:

Many nurse educators enter academia with a wealth of clinical expertise, but with little or no formal classroom teaching experience. Adjusting to the academic environment and learning the practical aspects of the teaching role have been identified as some of the most significant stressors for new faculty (Sorcinelli, 2004). A major source of stress is new expectations at the beginning of employment. For example, novice faculty often find that they are assigned to school and university level committees, with an organizational culture and expectations for output not directly related to teaching. Also, expectations for job promotion often include service to the community and research. Clinical faculty may be consumers of research, but they are not experienced in the research process.

Many of the stressors reported by novice faculty members also apply to seasoned faculty when they take a new position. For example, seasoned faculty members may have accepted time toward promotion to rank, which shortens the promotion process but adds stress while adjusting to teaching new and unfamiliar courses in a new environment (Clark, Alcala-Van Houten, & Perea-Ruan, 2010). In addition, both new and seasoned nursing faculty face the challenge of maintaining clinical practice and remaining current in didactic and clinical teaching (Lewellen, Crane, Jones, & Hu, 2003). Novice faculty members from other regions of the world who do not speak English as a first language may also have to deal with initial communication difficulties, especially with those who have no experience listening to accented speech (Nimoh, 2010). Further, foreign-born faculty members tend to be doctoral prepared and place greater emphasis on research rather than on teaching and service (Mamiseishvili, 2010; Webber, 2012), which can generate organizational conflict. Male faculty members in nursing find that there are few role models for academic life, and their sources of job satisfaction may not be the same as for female nursing faculty (Evans, 2013).

These challenges, along with an unfamiliar social environment, can lead to social isolation. Further, failure to identify the individual needs of new faculty can lead to feelings of lack of support. Reasons for leaving academia include changing faculty workload demands, stress, and an inability to meet academic role expectations (Institute of Medicine, 2011). Nursing programs thus need to focus on making new faculty members aware of expectations in their role and ways to succeed. Formal relationships, an understanding of the organizational culture, and a safe place to share have been identified as ways to meet the needs of novice faculty members and ease the transition to a new job for seasoned faculty members as well (Lewellen et al., 2003). Mentoring has been used successfully in many professions to support new employees in their role transition. Nursing academia has utilized mentoring to support new faculty members as they transition from clinical nursing to the roles and responsibilities of the nurse educator. Since it has been acknowledged that new faculty members need to be mentored, then this responsibility falls to the seasoned faculty members are not familiar with the expectations and frustrations of the faculty mentor. Research is needed to identify the support and skills needed by a mentor. In a study conducted by Wilson, Brannon, and White (2010), challenges of mentoring were identified. Challenges for mentors included balancing an equal relationship but at the same time sharing their knowledge with mentees. This was difficult for them due to the mentors' busy work load.

It is increasingly recognized that formal mentoring promotes faculty satisfaction, decreases stress, and may improve research productivity (Billings & Kowalski, 2008; Johnson, 2002; Sambunjak, Straus, & Marusic, 2009). Much has been written about mentoring nursing students for success, but less about mentoring of faculty into the complex role of clinician, educator, and scholar. In response to the perceived needs of faculty members who were new to the institution including the faculty role, and the needs of seasoned faculty members who would become mentors, this paper describes a formal mentoring program developed at a southeastern university. The program is based on the Schumacher and Meleis Transitions Model (1994). While initially focusing on patient health transitions, the model has also been applied to student transitions from learner to professional nurse, and was applied here to the transition of faculty members to a new nurse educator role and academic workplace environment, as well as seasoned faculty members' transition into the mentoring role.

Novice faculty members experience a situational transition, which is related to the changes that occur as a new faculty member begins a faculty role. While the individual is still a professional nurse, the role in higher education is different from the role previously held. The novice nurse faculty member must now interact with students, clients, professionals in clinical settings, other faculty members, administrators, and staff, as well as collaborate with other faculty across disciplines in higher education. Effective skills in the classroom, clinical setting, testing, teaching, evaluating, scholarly activities, and community service are expected outcomes. The situational transition would also apply to the faculty memtor, moving from a faculty member into the formal role of faculty mentor. An organizational transition also occurs

as novice nurse faculty enter a new work environment. The new nurse educator is a member of the nursing faculty, the college or unit in which the nursing faculty is a part of, as well as the university at large. Novice faculty members are expected to participate at all levels within the university, thus making the organizational transition quite broad and complex. The role of the faculty memtor should be to assist new faculty members through each of these transitions and thereby support the organization.

Mentoring Program

The situational and organizational transitions that occur for new nursing faculty and faculty mentors are challenging. In our nursing program, in the past, all novice faculty members (mentees) were individually paired with an experienced faculty member by the program director. Assignments were based on mentor availability, workload, and perceived compatibility. Mentors were available to mentees and worked with them individually as needed; however, new faculty complained that orientation to the program varied among mentors, with inconsistent delivery of information and explanation of role expectations. It was apparent that faculty mentors were not prepared for their important role and needed guidance in facilitating the transition for the new mentees.

In 2006-2008, the nursing program experienced a great deal of turnover: in a department of about 20 members, 6 new faculty members were hired and 2 were promoted to administrative roles. The experiences of the new faculty varied greatly, and affected faculty satisfaction with the nursing program. Novice faculty members noted gaps in their orientation to the nursing program and expressed frustration with the speed of acclimation to the nursing program and the university.

The nursing program recognized the need to improve mentorship as novice faculty experienced situational and organizational transitions related to academia. A faculty orientation was implemented in 2008-2009, focusing on all new faculty members, including those new to the teaching role as well as experienced faculty new to the program, to assist them in finding productive roles in the nursing program. The orientation program standardized the new faculty orientation, provided resources useful to novice and seasoned faculty members, and socialized faculty members into the nursing program and university with individual and group activities. Additionally, the orientation also provided a webbased discussion board as an avenue to engage with other new faculty and gain feedback about performance.

The orientation program was designed as a year-long program because longer programs are considered more effective than shorter programs (Morin & Ashton, 2004). A welcome letter provided an overview of the program, including a) policies and procedures, b) classroom instruction and management, c) grading and evaluation, d) self-directed

learning, e) simulation lab, f) committee work, and g) information about the multimedia

classroom environment. Strategies were aimed at orienting novice and seasoned faculty members to the roles, while also socializing novice members into the nursing community.

The faculty orientation was housed fully on-line under a web-page titled "Faculty Lounge", to enhance the situational and organizational transitions of new faculty to academia. A mentor checklist with weekly/monthly activities guided all new mentees through the orientation process, but allowed for flexibility to suit individual schedules. Mentors were expected to show novice faculty the various departments on campus and provide introductions to campus division leaders.

In the Faculty Lounge, modules were developed that guided the novice faculty members in their role as educators. One module provided journal articles which discussed instructional strategies, considerations regarding culture and diversity, and Boyer's principles of teaching and scholarship (Boyer, 1991). An instructional module included tips for classroom ice breakers, student motivation, ways to enhance teaching effectiveness, a syllabus template, instructions for creating rubrics, a test item writing guide, and classroom management information. Since some of the nursing courses are hybrid or fully on-line, information to enhance the learning environment was also incorporated in the instructional module. A culture and diversity module included resources for culturally sensitive communication, teaching in the diverse classroom, teaching the subject of cultural diversity, and the American Association of Colleges of Nursing's (AACN), "Toolkit of Resources for culturally Competent Education for Baccalaureate Nurses" (AACN, 2008). In addition, there were resources for understanding students of different generations. The module on the faculty roles of scholarship and service included a power point on promotion and tenure. Since many faculty were new also to the local area, personal resources, including a campus map marked with a nearby sandwich shop, post office, and dry cleaner were also included.

Beginning in the 2012-2013 academic year, the mentoring program was further strengthened with administrative support. A grant was written to create a formal Faculty Mentor Program (FMP) and a Nurse Educator Mentor (NEM) position was created, with 50% release time from teaching to implement this new role. The inaugural NEM was tasked with administering and managing the FMP, beginning with the arrival of a new nursing faculty cohort (mentees). Using experience, specialty, and course assignments as guides, a seasoned faculty member (mentor) was assigned to each of the nine (9) new faculty members (mentees) and the new formal program was launched. From our previous experiences, faculty mentors were not prepared for their important role and needed guidance in facilitating the transition for the new mentees. Emphasis was placed on instructing and guiding the seasoned faculty members who were assigned as mentors. The role of these faculty mentors were to assist these new faculty mentees through each of their organizational and situational transitions. The NEM developed and conducted a New Faculty Orientation before the academic year began, and mentors, mentees, and administrators attended. Expectations and professionalism related to the role of the faculty member were addressed during the orientation. Each mentor and mentee was given a notebook containing the Faculty Handbook, Student Handbook, and other documents relevant to the FMP and the nursing program. Mentors also received a notebook with resources, articles, and other helpful information pertinent to mentoring. Because seasoned faculty members were selected as mentors, administrators realized that their workload would be increased. Therefore, these faculty mentors received a monetary stipend for serving as a mentor, which was an incentive to become a mentor.

After the initial formal orientation, mentor/mentee pairs completed a mentoring needs assessment and signed a mentoring agreement that included mentoring expectations, meeting schedules, and goals to be achieved during the year. Novice faculty members developed individual objectives specific to their identified needs. According to Lichtenberg (2011), "the mentor is in charge and runs the show. The mentor needs to be responsible to the mentee's requests, demands, and expectations, but is not responsible for creating the spark and interest in the mentee" (p.421).

An orientation checklist for mentors to use with mentees, containing essential areas for orientation to the nursing program and campus wide, was completed by the third week of the semester. In addition, a list of required activities and documents was distributed with due dates in order to enhance consistency, quality, and achievement of goals, and thus promote effective mentoring. Weekly meetings, with planned agendas, were scheduled and conducted with the mentor and mentee groups. Time was allowed for open discussion and feedback in both groups for continuous improvement of the mentoring process. During the meetings, there was also discussion of relevant articles, concerns, and accomplishments, as the mentors and mentees adapted to their new roles. During the fall semester, a guest speaker, who had experience in mentoring novice nursing faculty, presented a program on successful mentoring. All mentors, mentees, and administrators attended this program.

During the spring semester, mentors completed an online webinar on mentoring, which supported their role as faculty mentors and earned continuing education credits, including a certificate in mentoring. The online webinars consisted of weekly online mentoring presentations on topics pertinent to the mentoring process, teaching, learning, and academia. Both seasoned and new faculty members reported that these webinars were very helpful. These educational offerings were funded by the mentoring grant. Mentees were initially mentored in the clinical setting by seasoned faculty members who were already supervising students in the area in which the mentees were assigned. Throughout the year, the NEM visited the mentees in the clinical setting to offer support and guidance, collaborated with mentors and mentees individually, as well as in groups and upon request. All documents, anecdotal notes, and program reports were kept on file by the NEM, including a mentoring notebook.

Outcomes

The FMP was evaluated in several ways. Upon completion of the spring semester, the mentors evaluated the program and the NEM, and the mentees evaluated the program and the mentors. At the end of the academic year, all mentors and mentees were presented with a certificate as evidence of participation in the first year of the formal FMP.

Throughout the academic year, several challenges were reported by the mentors and mentees. Some mentors reported that more time was needed with mentees in regard to assistance with standardized testing requirements and procedures. Several mentors noted challenges in regard to mentoring versus supervising. This finding collaborated with the study done by Wilson, Brannon, and White (2010) in that faculty expressed not having enough time to engage in meaningful activities with their mentee and the power imbalance. According to Zachery (2005), role confusion is a common occurrence.

Mentoring provides a more collaborative approach, but this may not be embraced by some mentees. Several mentees reported that they did not feel comfortable collaborating with mentors and felt they should be supervised. This is what

they were accustomed to in the clinical setting from which they came. During the group sessions, special attention was given to differentiating mentoring from supervising and this was beneficial for both groups. Additionally, mentees recommended that new faculty members be exposed to all of the resources available on campus, including Human Resources, Disability Services, and State online requirements (ethics, ergonomics, and sexual harassment) since this information is not covered in detail in the university orientation. Some mentees also reported feeling overwhelmed by student advisement and the applicant interview process. These challenges were addressed by the NEM prior to the next scheduled advising and interview sessions and again early in the next academic year. The curriculum, advisement process, and applicant interview process were reviewed with mentees. Mentees were scheduled to observe an advisement and interview session with a mentor or seasoned faculty member before meeting with students on their own.

The FMP is now in its third year, and a number of positive outcomes of the program have been noted. First, mentors have reported that relationships with their mentees became much "smoother" after meeting to clarify roles, particularly mentoring versus supervising. Second, the program has fostered collaboration and support among all faculty members and, as a result, faculty morale has improved. This is evident in the decrease in faculty turnover and in the evaluations completed by both mentees and mentors at the end of each academic year. Faculty attrition has declined, as evidenced by the decrease in the faculty attrition rate over the past three years. After the first year of the program, seven out of nine (77%) of the new faculty mentees returned, and after the second year of the program, no new faculty members left. This was an improvement compared to the loss of six faculty members the year before the program began. Mentors also reported positive changes and feeling more confident in their mentoring roles as the program progressed. Third, under the guidance and direction of their mentors, several mentees have progressed exceptionally well in supervising students in the clinical setting, in part because mentees have been under the direct supervision of a mentor or seasoned faculty member during their first rotation with students in the clinical setting. Success in this, in turn, has fostered increased feelings of belonging among mentees, and mentors have reported an increase in confidence in their roles as mentors. Fourth, with the addition of the FMP and NEM role, nursing administrators were able to deal with other administrative issues rather than supervising and mentoring new faculty members. For example, the NEM assisted mentees with classroom teaching, clinical supervision of students, dealing with difficult students, writing anecdotal notes, and navigating the university system, which would have otherwise been dealt with by nursing administration.

Although the program has fostered success in many areas, some specific issues have been identified. While no male faculty and only a few individuals from diverse cultures or under the age of 35 years have been successfully recruited in this program, there is recognition that needs and preferences of a diverse faculty need to be more intentionally addressed. Finally, new faculty members have been confused by the "Faculty Lounge" web-page name, believing it was a physical location whenever anyone spoke of it. After the second year, the title was therefore changed to "Faculty Resources" and this has decreased the confusion. Other suggestions for improvement have been noted and plans to modify the program are ongoing. Some suggestions made were to include orientation to the standardized testing software program used in summative evaluation at the end of each nursing course, and balancing the scheduling of class, lab, and clinical time. The FMP is an ongoing project that is continuously being evaluated and will be modified and enhanced each year.

Summary

Effective role transition for new nursing faculty is achieved when faculty no longer feel a sense of disruption and stability has returned to their lives. The seasoned faculty mentors are there to assist new faculty members in achieving stability in nursing education. When faculty are successfully 'swimming' and are able to reach out and recognize the rewards in their career (Anderson, 2009), a positive transition has been achieved for both the mentors and the mentees (Meleis & Trangenstein, 1994). Mentoring is an essential component in improving the retention and satisfaction of new nursing faculty members. In our program, communication and collaboration between mentor/mentee pairs and the NEM have helped to make a successful program. This FMP, based on transitions theory, provides a model for effectively assisting both novice nurse educators as they enter a nursing program in academia, as well as seasoned faculty members who become mentors in their new roles.

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