



University of HUDDERSFIELD

University of Huddersfield Repository

Linford, Dawn and Marshall, Joyce

Mentorship from the student perspective

Original Citation

Linford, Dawn and Marshall, Joyce (2014) Mentorship from the student perspective. *The Practising Midwife*, 17 (11). pp. 33-36. ISSN 1461-3123

This version is available at <http://eprints.hud.ac.uk/23461/>

The University Repository is a digital collection of the research output of the University, available on Open Access. Copyright and Moral Rights for the items on this site are retained by the individual author and/or other copyright owners. Users may access full items free of charge; copies of full text items generally can be reproduced, displayed or performed and given to third parties in any format or medium for personal research or study, educational or not-for-profit purposes without prior permission or charge, provided:

- The authors, title and full bibliographic details is credited in any copy;
- A hyperlink and/or URL is included for the original metadata page; and
- The content is not changed in any way.

For more information, including our policy and submission procedure, please contact the Repository Team at: E.mailbox@hud.ac.uk.

<http://eprints.hud.ac.uk/>

3. Mentorship from the student perspective

Mentorship: is the fourteenth series of 'Midwifery basics' targeted at practising midwives. It aims to provide information to raise awareness of the impact of the work of midwives on student learning and ultimately on women's experience and encourage midwives to seek further information through a series of activities. In this third article Dawn Linford and Joyce Marshall consider what students value in a mentor. Student responsibilities will also be considered along with how mentorship needs change during the three years of pre-registration midwifery training.

Introduction

When undertaking a programme of pre-registration midwifery education, student midwives are working towards responsible and accountable practice at the point of registration. In order to facilitate this, mentors are required to support learning in a range of clinical settings and contribute to the development of the students ability to practice as a safe and competent midwife (Nursing and Midwifery Council, 2008, 2011). Experiences of mentorship can influence how a student midwife's confidence and competence develops and may shape how they will subsequently practice once qualified (Hughes and Fraser, 2011; Licqurish and Seibold, 2008). Consequently, supportive and positive mentorship is essential to enhance student learning experiences in practice and to promote their personal and professional development.

Scenario

Penny is about to start her first placement on labour ward. She has telephoned the student coordinator and now knows that she will be working with Suzanne during this placement. Penny is slightly anxious about starting on labour ward as she has heard from other students that it is a busy and challenging environment that will be very different from her first placement in the community setting.

Importance of the initial meeting

A student midwife entering clinical practice for the first time or embarking on a new placement area may well be excited, yet nervous and apprehensive. Possibly wondering what their allocated mentor will be like, whether or not they will be friendly and if the other staff will be welcoming. Indeed students can view relationships with staff and fitting into the social environment as a pre-requisite to their learning and participation (Nolan, 1998). First impressions are important to students when entering a new placement and can have an impact on their practice experience. A friendly, receptive welcome from their mentor and other staff can instil feelings of being valued and accepted and can have a significant impact on the student's motivation to learn. Conversely being met with indifference and hostility can heighten feelings of anxiety and result in the student dreading return to the placement, thus negatively affecting their learning (Levett-Jones et al., 2009). This highlights the impact that the initial meeting can have on a student's wellbeing and desire to learn. Consequently, it is crucial that the mentor considers the best way to approach this first meeting with each student. Taking time to offer a friendly welcome, make introductions to other members of the

team and to familiarise the student with the placement area may help to relieve any anxieties about lack of skills or knowledge.

Supporting Learning

Clinical placements make up 50% of midwifery training and are essential for students to achieve the competencies required for registration. Mentors need to be aware of the student's level of experience and their learning requirements from the outset. This will ensure the mentor is prepared and able to invest the time required during a clinical placement to provide and facilitate learning opportunities to meet the student's individual needs (NMC, 2008). Prior to commencing a clinical placement the student has a responsibility to identify their current level of learning and what they need to achieve to meet the relevant competencies. Students value mentors who are supportive of and facilitate their learning needs (Hughes and Fraser, 2011). Taking time to view the ongoing record of achievement will enable the mentor to gain an understanding of the student's progress so far, their current learning needs and the competencies to be achieved. This can then facilitate discussion about the appropriate learning opportunities available within the placement environment from which the mentor and student can develop and negotiate a realistic learning plan. This allows the student to take some responsibility for their own learning by directing their practice requirements towards achieving necessary competencies.

Continuity of mentor is considered important by students for relationship development, assessment of learning needs and to maximise learning opportunities (Licqurish and Seibold, 2008). However, professional demands or absence might affect the time a mentor is able to supervise the student. The NMC (2008) stipulates that 40% of the student's time in clinical practice must be supervised directly or indirectly by the sign off mentor. Consideration must therefore be given to the mentor's availability at the beginning of the learning relationship. Periods of annual leave or additional responsibilities which might affect the midwife's mentorship role and continuity of supervision could be identified and additional support put in place. Allocation of a regular co-mentor enables members of the wider team to be involved in student learning, allows continuity in the mentor's absence and is viewed positively by students in clinical placements (Gidman et al., 2011).

Activity 1

Consider the questions you might ask a student to enable you to understand their level of learning. Then think about the opportunities for learning in the area where you work. Plan some possible activities and for students working at three different levels.

Relationship building

Mentorship bridges the gap between the students theoretical knowledge and the necessity of competently putting this into practice (Kilgallon, 2012), therefore the importance of the relationship a student has with their mentor should not be underestimated. Indeed it is regarded by students as the most important factor for facilitating a positive learning environment (Cahill, 1996). Students have identified the need for the relationship with their mentor to be nurturing; identifying qualities such as friendliness, patience, approachability and understanding as being of great value (Wilkes, 2006). This highlights the student's need to feel valued and safe to facilitate learning. Furthermore, a

trusting, supportive relationship with a mentor who has a positive attitude towards the mentorship role, is enthusiastic, aware of their learning needs and invests time to provide opportunities to meet those needs, is seen as essential to the development of a student's confidence and competence as a practitioner. Conversely a mentor who does not communicate effectively, is disinterested in their mentorship role and who controls rather than encourages learning is viewed as a source of anxiety by students (Hughes and Fraser, 2011). It is, however, important to remember that the mentor-student relationship is a two way partnership and the student has a responsibility to contribute to its effectiveness. Mentors value students who are keen, enthusiastic and directive of their own learning. They also expect students to be aware of their responsibilities to act professionally with regards to attitude, punctuality and confidentiality and to demonstrate this in practice (NMC, 2011; Kilgallon, 2007).

Activity 2

List the qualities you value in students and then list the qualities you would value in a mentor. Use these to consider how you would build a relationship with a student who does not portray all the qualities you expect.

OR

If you are a student consider what you might say and/or do to help to develop a good working relationship with a mentor.

Role Modelling

Beginning the first clinical placement can be an exciting yet daunting prospect for a student midwife who is keen to practice skills and apply the theory they have learned at university. Standards for pre-registration midwifery education (Nursing and Midwifery Council, 2009) stipulate that woman-centred care supported by evidence-based practice must be reflected through university education programmes. This often results in novice students beginning their first placement with an idealistic view of midwifery which can sometimes conflict with the realities of the obstetric led clinical environment (Licqurish and Seibold, 2013). The student midwife's learning occurs primarily in clinical settings and mentor qualities have been identified as playing a pivotal role in how this learning is experienced (Bluff and Holloway, 2008). Mentors are perceived as role models from whom values and behaviours are observed and emulated, thus potentially moulding how the student learns and develops (Armstrong, 2008). Therefore this suggests that the characteristics and qualities of mentors are essential to the future practice of student midwives. For example, a mentor who is flexible, autonomous and who supports evidence based practice might inspire an autonomous and woman-centred student. Whereas, a prescriptive midwife who lacks autonomy due to fear of litigation, may influence this practice in his/her student. It must not be forgotten, however, that learners bring their own characteristics and personalities to midwifery training. Student midwives value mentors who are advocates for women (Hughes and Fraser, 2011) and are keen to reject the qualities of mentors who contradict their own ethos of midwifery, instead wishing to emulate flexible role models. As students become more confident in their role, they begin to question practice and vicarious learning takes place. Students may observe how the practices of different mentors affect women and modify their own behaviours accordingly, choosing which aspects of care they will incorporate into their own practice (Bluff and Holloway, 2008).

Activity 3:

Consider the characteristics in Table 1. As a role model for students, how might your behaviour and characteristics influence their practice?

OR

If you are a student think about the behaviour and characteristics of at least two mentors or midwives you have worked with and consider which of these you may wish to incorporate into your developing practice.

A flexible midwife:	A prescriptive midwife:
Practices woman-centred care	Practices medical model of care
Interprets rules	Rigidly follows rules
Has normal concerns about litigation	Fears litigation
Is an autonomous practitioner	Lacks autonomy
Uses evidence to inform practice	Uses traditional knowledge
Works in partnership with clients	Is maternalistic
Shares knowledge	Restricts information to client
Is caring	Appears uncaring

Table 1. Characteristics of prescriptive and flexible midwives (Adapted from Bluff and Holloway, 2008).

Student's changing mentorship needs

As students progress through the three year midwifery education programme, their mentorship needs change. They view an effective mentor as one who encourages and enhances their learning (Hughes and Fraser, 2011). Students crave hands on experience appropriate to their learning needs and value mentors who take time to teach and support the relevant skills (Licqurish and Seibold, 2008). Whilst first year students may be dependent on their mentor for opportunities to practice skills and to give continued guidance, students in subsequent years appreciate opportunities to develop their skills and competence more independently as their confidence grows.

The sign-off mentor is responsible for assessing and judging the student's performance in practice, this is enhanced by providing regular and appropriate feedback (NMC, 2008). Students value mentors who take time to give feedback on their performance. Constructive feedback facilitates future learning and can provide reassurance that skill and knowledge are developing and that the student is providing safe and appropriate care. This can boost confidence in the learning environment and encourage the student to seek opportunities to develop skills and competence with minimal supervision (West et al, 2007). As they approach professional registration, third year students in particular are keen for opportunities to direct the care of women and apply critical thinking to their practice. Consequently, they appreciate mentors who provide supportive supervision by demonstrating confidence in their abilities and encouraging responsibility and decision making (Licqurish and Seibold, 2008).

Points to consider when giving feedback

- Encourage the student to evaluate their progress
- Maintain confidentiality
- Be honest and constructive (beware of being destructive)
- Remain calm and objective

Ask for feedback from others who have worked with the student Refer to specific actions not personal traits Allow time for the student to process the information Check understanding and clarify meaning Set small achievable goals to reduce anxiety Use positive feedback to reinforce learned skills Style of feedback may need to vary to suit individual students Contact university link lecturer if there are concerns Record all feedback in student documentation

Table 2: Points to consider when giving feedback (Adapted from Penfold, 2007)

Reflection on the scenario

Having an awareness of a student's need to feel valued and to fit in to a new clinical environment can help Suzanne to prepare for Penny's arrival. A warm, friendly welcome may encourage the start of a supportive mentor-student relationship which will subsequently facilitate an effective learning partnership. What might Suzanne do to enhance Penny's learning experience in this placement? Penny is determined to take responsibility for her own learning; how might she prepare for the placement?

Conclusion

Students have a basic human need to feel safe in the clinical environment before they are able to learn effectively, this is affected by the relationships they have with mentors and the wider team. Student midwives have a responsibility to be professional and to direct their own learning as they progress through pre-registration training; however, a supportive and positive role model is essential to their ongoing personal and professional development. Ultimately, the importance of an effective mentor-student relationship should not be underestimated as it may well shape the midwife the student will become.

References

- Armstrong, N., 2008. Role modelling in the clinical workplace. *British Journal of Midwifery* 16, 596-601.
- Bluff, R., Holloway, I., 2008. The efficacy of midwifery role models. *Midwifery* 24, 301-309.
- Cahill, H.A., 1996. A qualitative analysis of student nurses' experiences of mentorship. *Journal of advanced nursing* 24, 791-799.
- Gidman, J., McIntosh, A., Melling, K., Smith, D., 2011. Student perceptions of support in practice. *Nurse Education in Practice* 11, 351-355.
- Hughes, A.J., Fraser, D.M., 2011. "There are guiding hands and there are controlling hands": Student midwives experience of mentorship in the UK. *Midwifery* 27, 477-483.

Kilgallon, K., 2012. The mentor-student relationship., in: Kilgallon, K., Thompson, J. (Eds.), *Mentoring in nursing and healthcare: A practical approach*. John Wiley and sons, Chichester, pp. 26-53.

Levett-Jones, T., Lathlean, J., Higgins, I., McMillan, M., 2009. Staff – student relationships and their impact on nursing students' belongingness and learning. *Journal of advanced nursing* 65, 316-324.

Licqurish, S., Seibold, C., 2008. Bachelor of Midwifery students' experiences of achieving competencies: The role of the midwife preceptor. *Midwifery* 24, 480-489.

Licqurish, S., Seibold, C., 2013. 'Chasing the numbers': Australian Bachelor of Midwifery students' experiences of achieving midwifery practice requirements for registration. *Midwifery* 29, 661-667.

Nolan, C.A., 1998. Learning on clinical placement: the experience of six Australian student nurses. *Nurse Education Today* 18, 622-629.

Nursing and Midwifery Council, 2008. *Standards to support learning and assessment in practice: NMC standards for mentors, practice teachers and teachers*. NMC Publications, London.

Nursing and Midwifery Council, 2009. *Standards for pre-registration midwifery education*. NMC Publications, London.

Nursing and Midwifery Council, 2011. *Guidance on professional conduct: For nursing and midwifery students*. NMC Publications, London.

Penfold, S., 2007. Helping people learn, in: West, S., Clark, T., Jasper, M. (Eds.), *Enabling learning in nursing and midwifery practice: a guide for mentors*. John Wiley & Sons Ltd, Chichester.

Wilkes, Z., 2006. The student-mentor relationship: a review of the literature. *Nursing Standard* 20, 42-47.