

Effect of Mentorship on New Graduate Nurses' Assertive Communication: An Evidence Review

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Introduction

- New graduate nurses are often hesitant to voice safety concerns despite having a responsibility to do so.
- The purpose of the review is to determine if mentoring increases new graduate nurses' assertive communication.

Background

- 10% of admitted patients are exposed to a safety event, half of which could have been prevented (McFarland & Doucette, 2018).
- According to one study, 7000 out of an investigated 23000 medical malpractice lawsuits could be attributed to communication failures, resulting in \$1.7 billion in malpractice costs and almost 2,000 preventable deaths (CRICO Strategies, 2015).
- All nurses have a "duty to act to prevent harm" (American Nurses Association [ANA], 2015, p. 4).
- New Graduate Nurses begin careers with a lack of professional confidence (Ortiz, 2016).
- Inexperienced nurses require a supportive framework in which to develop professional confidence in order to fulfill their professional requirement to speak up for safety (Darawad et al., 2020).

PSCOT Question

In new graduate nurses (P), how does participating in a mentorship program (S) compared to no mentorship (C) affect assertive communication (O) during the first year of practice (T)?

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Methods

- Cumulative Index to Nursing and Allied Health Literature (CINAHL), MEDLINE, PubMed, Nursing and Allied Health, and Google Scholar databases were searched using the key words newly qualified nurses, newly graduated nurses, new nurses, novice nurses, mentor, mentorship, mentoring, assertive communication, assertiveness, speaking up, confidence, empowerment, work empowerment, structural empowerment, informal power, organizational empowerment, and moral courage.
- Inclusion criteria were peer-reviewed articles written in English published between 2015 and 2020.
- Exclusion criteria were books; dissertations; magazines; trade journals; articles in a language other than English; and studies pertaining to tool development, nurse retention only, or populations other than new graduate nurses.
- Of the approximate 550 resulting articles, titles and abstracts were screened for relevance. The remaining 50 articles were obtained and screened. Seven articles were included in the review.
- JHEBP tools were used with permission to appraise the evidence.

Individual Evidence Summary Tool- JHEBP Appendix G

Number	Author and Date	Type of Research	Sample Size and Composition	Results	Limitations	Rating
1	Mansour & Mattukoyya (2019)	Qualitative	42 New Graduate Nurses from four acute hospitals in England	Learning and practicing assertive communication results from a combination of different factors including nurse residency programs, a supportive work culture, and the ability of preceptors to fully engage.	Writing fatigue stemming from answering open-ended questions may have reduced the depth and quality of the collected data Data saturation could not be assured	III/B
2	Mansour & Mattukoyya (2018)	Mixed-method Survey	51 NGNs in four hospitals in eastern England.	A statistically significant correlation was found between the participants' total empowerment score and the average score on the given hypothetical speaking up scenarios. Limited access to preceptors was perceived to inhibit the development of assertive communication skills	Convenience sampling of nurses and hospitals	III/B
3	Darawad, et al. (2020)	Mixed-method Survey	233 NGNs employed at hospitals in central Jordan	New Graduate Nurses gain confidence and moral courage to assertively communicate through experience, training, positive working culture and peer support.	Convenience sampling	III/B
4	Salmond, et al. (2017)	Non-Experimental Quality Improvement	39 preceptors and 37 NGNs employed within a sample of 36 long-term care facilities	NGNs indicated feeling more confident and assertive following the residency program, and felt their preceptor had a positive impact on their development.	Convenience sampling Only two cohorts of nurse residents were surveyed. Not all preceptors were bedside nurses	V/A
5	Law & Chan (2015)	Qualitative	Eighteen NGNs from seven public hospitals in Hong Kong	New Graduate Nurses require mentoring before, during and after assertive communication experiences Mentoring is not confined to one particular person New Graduate Nurses require a supportive environment in order to engage in assertive communication, and positively recognized when they do	Purposeful and snowball sampling	III/A
6	Lyman, et al. (2020)	Qualitative	Thirteen registered nurses with less than 2 years of experience from six states	When New Graduate Nurses felt supported, they were more confident speaking up and voicing concerns. Support occurred through frequent check-ins, and when concerns were met with respectful responses or actions. New Graduate Nurses will create psychologically safer environments by avoiding situations when they feel unsafe	Participants were recruited through professional connections and snowball sampling. The authors did not offer information regarding strategies to control self-bias.	III/B
7	Rush et al. (2015)	Mixed-method study	245 New Graduate Nurses approximately one year after graduation, employed in a variety of clinical settings	New Graduate Nurses whose orientation lasted 4 weeks or more, or worked more hours had significantly higher communication/ leadership scores the Casey-Fink survey. Quality, not quantity, of preceptor encounters account for the difference in skills. Having participated in a formal NGN transition program was associated with higher communication/ leadership.	Participants were not randomly assigned into groups. The survey was conducted at only one time point	III/A

Synthesis of Evidence

- New Graduate Nurses require a supportive environment in order to verbalize safety concerns (Darawad et al., 2020; Law & Chan, 2015; Lyman et al., 2020; Mansour & Mattukoyya, 2018).
- New Graduate Nurses value mentorship, and perceive it to be a significant instrument in fostering a supportive environment (Lyman et al., 2020; Salmond et al., 2017).
- Residency programs, experience, and perceived level of power contribute to New Graduate Nurses' self-perceived ability and willingness to engage in assertive communication (Darawad et al., 2020; Mansour & Mattukoyya, 2018; Mansour & Mattukoyya, 2019; Rush et al., 2015; Salmond et al., 2017).
- Utilizing a combination of interventions was found to have a positive impact on New Graduate Nurses' self-perceived ability and willingness to engage in assertive communication (Mansour & Mattukoyya, 2019; Rush et al., 2015; Salmond et al., 2017).

Implications

- New Graduate Nurses must have physical and emotional access to a trusted mentor or preceptor in order for communication skills to develop (Lyman et al., 2020; Mansour & Mattukoyya, 2018; Mansour & Mattukoyya, 2019; Rush et al., 2015).
- More than one strategy should be used to develop assertive communication skills in New Graduate Nurses (Darawad et al., 2020; Law & Chan, 2015; Lyman et al., 2020; Mansour & Mattukoyya, 2019; Rush et al., 2015).
- Future research should focus on developing more rigorous studies including actualized or missed opportunities to speak up for safety, and development of a tool to more accurately measure voicing safety concerns to be used in conjunction with the Casey-Fink survey.

Limitations

- Limitations to the existing literature include an absence of Level I and II studies, and studies examining incidences of actualized or missed opportunities to voice safety concerns.
- A majority of the studies were conducted outside of the United States, potentially limiting the transferability of the results.
- Most of the study participants were female, of similar age, and employed in hospital settings (Darawad et al., 2020; Law & Chan, 2015; Lyman et al., 2020; Mansour & Mattukoyya, 2018; Mansour & Mattukoyya, 2019; Rush et al., 2015); however, as this is the typical demographic of a New Graduate Nurse in the United States (Salmond et al., 2017), this is a minor limitation.

Conclusion

Nurse educators are able to help New Graduate Nurses gain confidence to voice safety concerns by utilizing several interventions. Nurse educators should work with unit and institution leadership to create supportive environments. Educators should also work with leadership to advocate for time that mentors and New Graduate Nurses can meet to allow these relationships to grow. Additionally, educators should provide multiple interventions, such as nurse residency programs and opportunities to gain experience, and personnel with whom New Graduate Nurses can physically and emotionally connect.

References

