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¹ Assistant Professor, Purbanchal University School of Health Sciences, Gothgaun, Morang, Nepal

*Corresponding author: Namu Koirala Email ID: koiralanamu11@gmail.com, ORCID iD: https://orcid.org/0000-0003-3780-7820

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The Impact of Mentorship Programs on Nurses in the Workplace: A Comprehensive Review

Namu Koirala^{1*}, Diptiy Subba¹, Menuka Shrestha¹, Bhupendra Barakoti¹

Abstract

Introuction: This review article explores the multifaceted impact of mentorship programs on nurses within the workplace setting. Mentorship has gained prominence as a crucial component in professional development, providing valuable support and guidance to nurses as they navigate the complexities of their roles. This systematic review was conducted to systematically search for existing literature on multifaceted impact of mentorship programs on nurses within the workplace setting and to critically evaluate and assemble the literature.

Method: PubMed, CINAHL and EMBASE databases were searched to identify relevant publications in English. Key words were impact, mentorship, nursing and workplace. The timeframe was from 2000 to 2023. Screening of the titles, abstracts, full articles (where necessary) was done and duplicates were removed. After the critical analysis of all the existing literature a narrative synthesis was produced.

Results: Total eighty-eight articles were screened. Among them one paper had been retracted. In total, seven papers were included for the study. These studies highlighted the fact that the turnover rate in nursing can be minimized through mentoring programs. Mentoring can also augment nursing proficiency and set up an encouraging workforce environment, which can ultimately result in positive outcomes.

Conclusion: Mentorship programs should include meticulous mentor selection and sufficient training. Consideration should be given to rigorous selection of mentors and adequate training in mentoring and traineeships. Finally, the development of mentor programs has proven to be successful in making it easier for new registered nurses to take on work responsibilities.

Keywords: Career Satisfaction; Mentorship; Nursing; Skill development; Workplace



Introduction

There's a substantial body of evidence to suggest that there is a shortage of nurses all around the globe. As the World Health Organization (WHO) report said, there are estimated to be a shortage of 7.2 million healthcare professionals around the world who will provide medical care in 2035 and demand for nursing is expected to increase to 12.9 million by then.¹In order to meet the demand for posts, there have been an increasing number of newly qualified nurses being called into demanding positions without adequate training or preparation. In spite of continued efforts to deal with this issue, transition has been complicated, challenging, stressful and scary for a lot of new nurses.² In view of the fact that newly trained nurses are at an advanced stage of their development, they perceive patient care circumstances as a challenge to their skills and abilities; they have a focus on tasks; they lack organization of patient care; and they lack experience in identifying and responding to patient situations. As a result, due to excessive stress, lack of experience, prolonged shifts and others, these nurses will soon find it difficult to cope.3,4Also, recently graduated nurses have to assume the professional concept of nursing learned and practiced in nursing schools to be functional in the complex hospital work environment.

For the mentor and his mentee, mentoring is an interaction of equals that aims to advance both careers and career satisfaction. The mentor is guiding the mentee, setting up an appropriate environment for growth and transition through this lasting relationship.⁵ For the mentee to acquire confidence in his or her professional activity, such an ongoing process is of particular importance. Ideally, this will be a dynamic and cooperative relationship with focus on personal and career development of the mentee.⁶

In many contexts, mentoring may be carried out and based on a variety of purposes or theoretical approaches with different length and intensity depending upon the circumstances. In facilitating the transition of new nurses, mentoring programs have shown promising results.⁷ Mentoring programs have shown encouraging success in facilitating the transition of new registered nurses (RNs).

There is an extensive body of literature revealing that the use of trained nurse mentors who guide and supervise the newly graduated nurses can reduce the rate of turnover in nursing,⁵enhance nursing competency and professionalization, and establish a supportive professional environment, hence, resulting in positive patient care outcomes.^{8,9}

Several studies have lobbied that mentoring programs play a pivotal role in facilitating the transition of new nurses, but there are few systematic reviews or meta-analysis, which have been conducted in this topic. The primary objectives of this systematic review were to: a. Evaluate the impact of mentorship programs on nursing skills and competence. b. Assess the influence of mentorship on nurses' knowledge acquisition and application. c. Examine the relationship between mentorship and job satisfaction among nursing professionals. d. Investigate the long-term effects of mentorship on career development and retention in the nursing workforce.

Hence, this systematic review will satisfy this gap in the literature related to nurse mentoring programs. This systematic review was therefore conducted to systematically search for existing literature and to identify the impact of mentoring programs for nurses in workplace by reviewing existing literature.

Method

Search strategy

The following databases were searched: Pub-Med, Embase and CINAHL (the Cumulative Index to Nursing and Allied Health Literature). The time frame of the included studies ranged from 2000 to 2023. The databases were searched for relevant information published in English language with the following key search terms: "impact", "nursing", "workplace" and "mentorship". The Boolean operator AND was used and the



search terms could appear in the title and anywhere in the text.

Selection of Studies

The retrieval of abstracts of all of the published studies recognized by the search approach was examined and scrutinized by two review authors. The full texts of all the studies identified by either of the reviewers were inspected to recognize the studies that (1) included nurses, regardless of gender; (2) were of experimental or quasi-experimental design or even review articles or metaanalysis and had implemented a mentoring program; (3) included satisfactory details relating the mentoring program; and (4) were published in English language. The exclusion criteria were as follows: (1) editorial and gray literature; and (2) studies comprising numerous nursing interventions that do not describe the utility of a mentoring program (3) studies that were in other languages than English (4) studies that involved other healthcare professionals than nursing.

Data extraction and mapping

The review authors checked titles and abstracts to identify whether the retrieved articles met inclusion/exclusion criteria and then removal of duplicates was done. Any queries and conflicts about meeting/not meeting inclusion criteria were resolved through retrieval of full articles and discussion in the team. Complete versions of the retrievals were read by one of the researchers who checked against inclusion and exclusion cri teria, to identify systematic reviews, reviews, ethical analyses, grey literature and primary research. Ambiguity about inclusion of any article was resolved through review of each paper and team discussion. Experts in the related subject were also consulted about additional reviews and primary research. Then finally, a PRISMA chart was also planned.

Result

The results of search and selection process are shown in Fig. 1. A total of 86 studies were obtained from the electronic databases. After removing 21 duplicates, 65 relevant studies were identified. Sixty-five studies were screened for reading the titles and abstracts. The abstracts of 65 articles were read, of which 1 article was retracted. Fourteen papers contained full texts and were assessed for eligibility based on the inclusion criteria. Seven of the screened full text articles were not considered eligible for the review and were excluded. Those articles had the following characteristics: (1) included population was doctors and not nursing personnel (n=2)(2)included population was that of pharmacists (n=1) (3) mentorship in workplace not inclusion criteria (n=3) (4) included articles containing adjustment problems in workplace due to other social and ethnic reasons (n=2). These studies were published between 2000 and 2023.

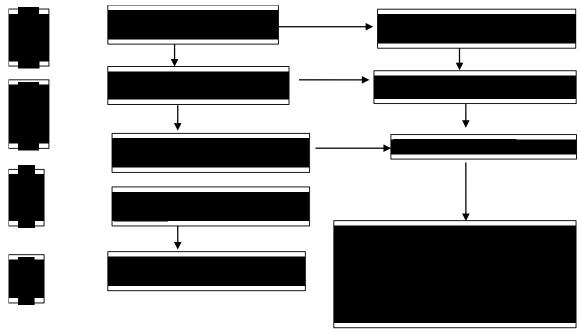


Figure 1: PRISMA flowchart showing study selection process



| Place | Publication | Methods | Title | Results |
|------------|------------------|---|---|--|
| Tiace | Year/ Author | Wiethous | | |
| - | 2015/ Ed- | Systematic review, quantitative | 2 | Transition interventions can im- |
| | | studies that investigated the effec- | fectiveness of strategies and | prove confidence, skills, job satis- |
| | Hawker, C.; | tiveness of support strategies for | interventions to improve the | faction, critical thinking and alle- |
| | Carrier, J.; | newly qualified graduate nurses | transition from student to | viations of stress and anxiety for |
| | Rees, C. | | newly qualified nurse | the newly qualified nurse |
| - | 2014/ Hough- | Review article, nursing and allied | | An understanding of socialization |
| | ton, C.E. | health literature examining students' | through which to understand | strategies could be beneficial to |
| | | socialization and the clinical learn- | how nursing students fit in | create a suitable clinical learning |
| - | | ing environment was retrieved | with the real world of practice | environment |
| Scot- | 2020/ Collard, | Scoping review for thematic analy- | Closing the gap on nurse re- | Development of resilience and |
| land | Sarah S.; | sis using research question "what is | tention: A scoping review of | commitment, knowledge and con- |
| | Scammell, Ja- | the impact of undergraduate nurse | implications for undergradu- | fidence enhanced, preparation for |
| | net; Tee, Ste- | and social work education on reten- | ate education. | transition |
| | phen | tion of new nurses?" | | |
| United | 2020/ Dulay, | Curriculum development, using | | Curriculum was found to be effec- |
| States | Maya; et al | teaching strategies, curriculum | | tive in engagement, skill develop- |
| | | evaluation, mentor appraisals and | Through a Longitudinal, Pro- | ment, team building and faculty |
| | | impact assessments | ject-Based, Interprofessional | development |
| <u> </u> | 2022/ | DOT | Curriculum. | |
| Canada | 2023/ | RCT to assess participants' commit- | Implementation of a Web- | web-based training and mentoring |
| | Henshall, | ment with a newly advanced Resili- | Based Resilience Enhance- | found useful and engaging, reflec- |
| | Catherine; et al | ence Enhancement Online Training | ment Training for Nurses: Pi- | tive, enhanced networking, and |
| | | for Nurses (REsOluTioN) | lot Randomized Controlled Trial. | sessions participatory |
| En el en d | 2017/ | Minud mathed to identify the im- | | The level of even out a model does |
| England | Wareing, | Mixed method, to identify the im- | The influence of placements | The level of support provided by mentors and clinical staff; and the |
| | Mark; Taylor, | pact of practice positions on final- year adult nursing students' career | on adult nursing graduates' choice of first post. | diversity of placements, had ma- |
| | Renate; et al | decisions | choice of first post. | jor influences on nursing students' |
| | Kellate, et al | decisions | | decision regarding their first staff |
| | | | | nurse post. |
| Aus- | 2020/ | Mixed methods design consisting of | The implementation and | resilience augmentation programs |
| tralia | Henshall, | surveys, conversations, and a case | | can augment nurses' levels of re- |
| | Catherine; | study approach, the understandings | hancement program for | silience and conviction and im- |
| | Davey, Zoe; | of a cluster of nurses were re- | nurses working in the foren- | prove inter-professional relation- |
| | Jackson, | searched in relation to their encoun- | sic setting. | ships which in long term results in |
| | Debra | ters of an involvement program to | ste setting. | retention of nurses |
| | | improve personal resilience | | |
| | 1 | improve personal resilience | | |

Table 1: Summary of the screened articles after eligibility assessment

In total seven articles were included in the review. Among these seven included articles one of them was systematic review and one was scoping review, while five of them were original research articles.

Defining Mentorship in Nursing

The evidence from the systematic review suggested that transition strategies do show the way to improvements in self-confidence, proficiency, job satisfaction, critical thinking and stress as well as anxiety reductions in and for the newly graduated nurse.¹⁰ This systematic review also recognized the advantageous effects of transitional support approaches for newly graduated nurses from the point of view of the new nurse and their employer. In general, the impacts of support strategies were shown to have optimistic and positive results, irrespective of the type of support provided. Structured approaches included graduate programs, residency programs, orientation programs and nurse internships. Informal approaches reported include mentoring, lecturer practitioner support, preceptorship, clinical practice facilitators and peer support. This review also suggested that the organizations have to focus on new graduate nurses for mentorship rather than simply leaving them to familiarize themselves to their new roles all by themselves. Another article was conducted on the clinical student nurses which revealed that to generate a suitable clinical learning atmosphere, an understanding of socialization strategies could be of use. Role modeling can also act as a successful strategy for adaptation of newcomer nurses in the entirely new environment. Peer support is crucial and nursing students with some knowledge of the



workplace tend to adapt more easily. Similarly, students' outlook and, in particular, their self-confidence can also augment the process of so-cialization. It is the learning of the standards, at-titudes and beliefs of the profession. It was suggested that both the organization and the student can impact on successful adaptation of the nurs-ing students through socialization.¹¹

Career Satisfaction and Skill Development

In another study, it was suggested that health professionals must demonstrate competencies in quality improvement (QI) and interprofessional (IP) practice, which can be developed by mentorship through a different approach, i.e. designing and incorporating mentorship curriculum by the team members.¹² A curriculum was designed which offered team-based, workplace experiences for trainees to learn and apply QI knowledge and skills. Leading factors for successful implementation included attention to team-building and faculty development suggesting need of mentorship in workplace.

Psychosocial Support and retention of nurses

Another study was conducted which implemented Web-Based Resilience Enhancement Training for Nurses. A self-developed Resilience Enhancement Online Training for Nurses (named Resolution), was implemented and levels of resilience and psychological well-being in nurses who completed Resolution with those who did not was compared. The Resolution program was hosted on the Totara learning management system (version 12), conducted by the Learning and Improvement in information technology team at the participating trust. This webbased Resolution training was conducted over a period of 1 month and covered weekly elements on (1) building toughness and sustaining a positive attitude, (2) academic flexibility and emotional intelligence, (3) thoughtful and critical thinking, and (4) achieving equilibrium in life and enabling spirituality. Both synchronous and asynchronous learning approaches were used in the program. The Resolution program was engaging, apparently useful, and recommended to be implemented to increase resilience, psychological health, communication, and workplace environments. It was suggested that mentorship support in the form of such programs with similar

design features within busy health care settings, can optimize resilience and adjustment in workplace.¹³ In another study nurses working on forensic inpatient wards were provided a work based mentorship program for developing resilience. Senior nurses were enrolled as mentors. Data collection were done before and after the implementation of the program to assess the nurses' resilience levels. Interviews were also undertaken after the program with the nurses and mentors to investigate their experiences of the program. It was found that granting a fostering background for nurses can enhance their resilience levels, therefore proposing resilience augmentation programs can boost nurses' levels of resilience and confidence and enhance inter-professional interactions.¹⁴Such implementation and programs can finally have a positive impact to improve nurse retention and recruitment.

Discussion

Defining Mentorship in Nursing

In order to build trust in his or her work, it is necessary for the mentee to have been mentored during a lifetime process of professional development in academic medicine. It will assist in the selection and career development, as well as publication's productivity and implementation of grant funding. Mentoring is a mutually beneficial relationship for both the mentor and the mentee, in order to increase their career prospects and satisfaction. This is a dynamic, mutual and reciprocal connection that focuses on the personal and professional development of the mentee. Either through mutual interest or by institutional means, mentoring can be developed in a spontaneous way.⁶ Transitional support approaches, generation of a suitable clinical learning atmosphere, an understanding of socialization strategy, role modeling, peer support, resilience developing program through web-based approach etc. are some of the ways of mentoring.

Career Satisfaction and Skill Development

Although a large number of studies are conducted with respect to efficiency of mentoring programs on turnover rates, cost savings, and competencies in nursing, the efficiency of the programs in terms of job satisfaction, professional socialization, and occupational stress is unclear.^{9,1,7,15}



Psychosocial Support and retention of nurses

Lack of opportunities for career advancement or financial remuneration, stress linked with the duties and low morale due to changes in organization were the most frequently cited reasons that the nurses reported about quitting. The findings were similar, dating back to 10 years ago, showing that 35% of nurses considered leaving their jobs despite high job satisfaction.^{3,9} It was suggested that mentorship support in the form of different programs within busy health care settings, can increase resilience and adjustment in workplace.^{13,14}

The literature search for this systematic review have been limited to electronic databases and published reports (only in English language). There may have been some of these studies that were missed, possibly due to a publication bias which would limit the generalizability of those results and discussions.

Conclusion

Over the period of time, more programs have been focused on facilitating successful transition and adaptation through mentoring which might be formal or informal. The transition was offered to new graduates of nursing; however, it required emotional support and mentoring in order for them to make a difficult and demanding transition into employment. Adequate training in mentoring and traineeships and incorporation of variety of mentorship programs is the need of the hour. Finally, the development of mentor programs has proven to be successful in making it easier for new registered nurses to take on work responsibilities. In preparing, implementing and reviewing mentor schemes, the findings of this Systematic Review can be relevant for nursing managers.

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