Mentoring: A Workshop for Nurses

Gloria Chan BSN, RN-BC, CCRN-CSC, PCCN

Raissa Lynn Sanchez BSN, RN

Timothy Shi BSN, RN, OCN

Key Elements of Mentoring

1

The Key Elements

Formal Relationship

Informal Relationship

Mentees are a Mentor's 'Livacy'

Having a Structure

"... After a mentoring program for nurses was implemented, turnover rates dropped nearly 20% in three years."

(Fox 2010)

Social Learning Theory of Bandura
Albert Bandura, 1977

"Learning would be exceedingly laborious, not to mention hazardous, if people had to rely solely on the effects of their own actions to inform them what to do.

Fortunately, most human behavior is learned observationally through modeling: from observing others one forms an idea of how new behaviors are performed, and on later occasions this coded information serves as a guide for action."

Bandura and Mentoring in Nursing

Novice nurses learn by emulating behaviors
- Mentors
  - Teach new skills
  - Impart outlooks of the profession

Bandura and Mentoring in Nursing

Novice nurses copy role models

- Without questioning the theory

- Assume mentor is correct

- Do not 'think through' problems for themselves
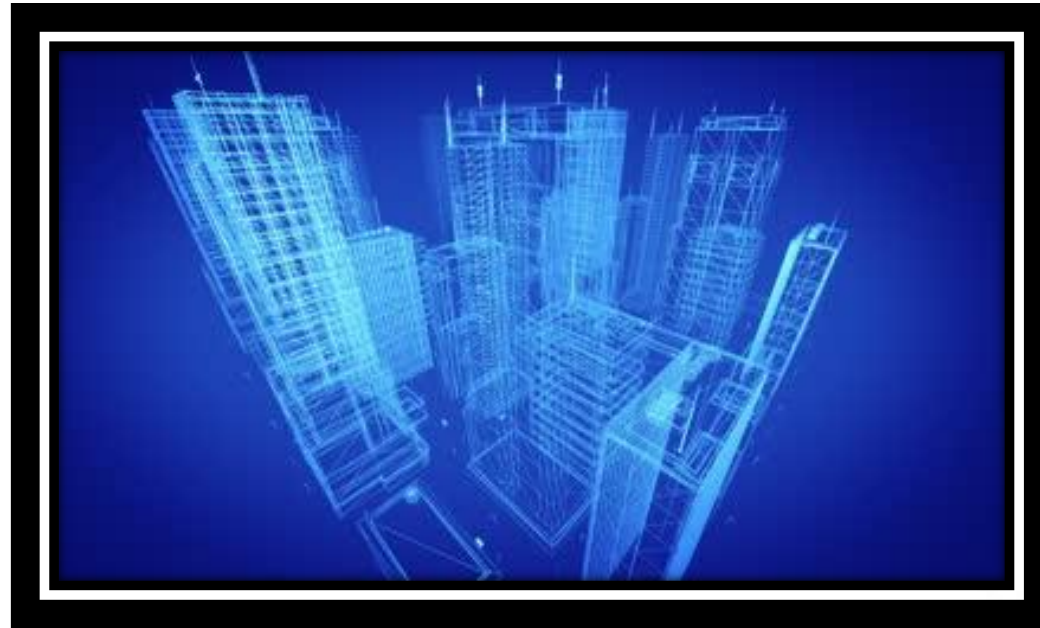
WHAT WE DO *for* OURSELVES **DIES WITH US.** WHAT WE DO FOR **OTHERS** *AND* **THE WORLD** REMAINS *&* IS **IMMORTAL.**

- Albert Pine

Importance of a Structured Mentor Program

2

Structure

A complex system considered from the point of view of the whole, rather than of any single part

Roadblocks to a strong foundation

- Lack of Continuity

- Increased demand from mentor and mentee

- Standstill from mentoring relationships

- Confusion of formal versus informal relationship

- Decreased follow up

A successful man is one who can lay a firm FOUNDATION with the bricks others have thrown at him

David Brinkley / www.geckoandfly.com

... Mentors need to motivate learners and successfully facilitate learning as opposed to simply dictating what the adult learner needs to know...

(Vinales 2015)

Transition from Mentees to New Leaders

3

How does a Mentorship Relationship Drive One to become a Leader?

Leadership

Unifying people and their values

Helping people get through change

Constructing social world for others around those values
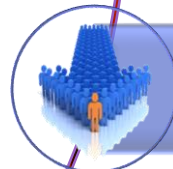
Becoming Great Leaders

Leadership Theories

- Great Man
- Trait
- Situational - Contingency
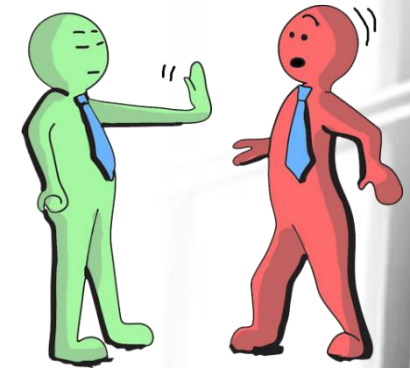- Transactional
- Transformational

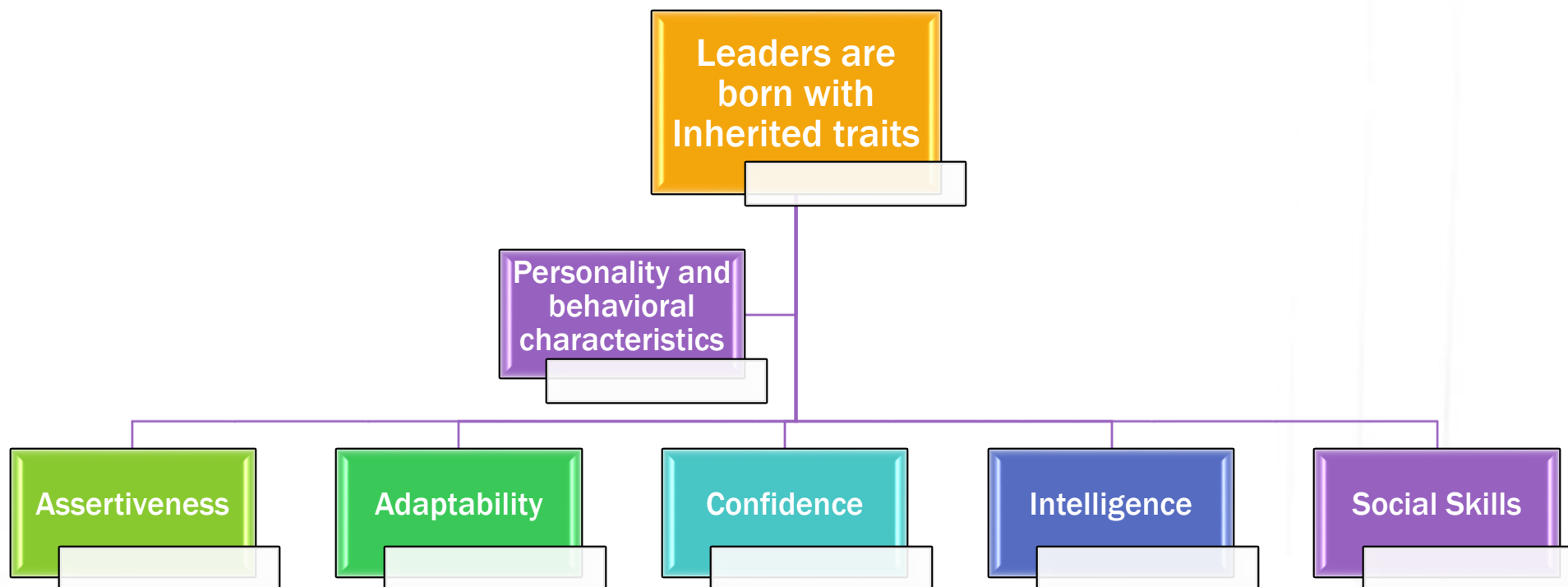# Great Man Theory

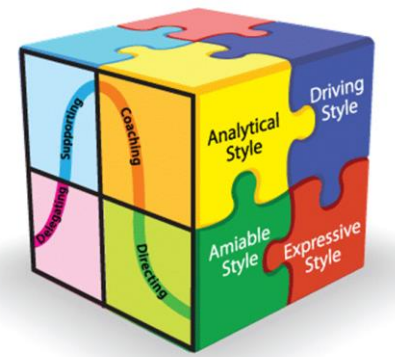**Leaders are born, not made**

Leaders will come at a time of need

Aristocracy

Male

Trait Theory

Leaders are born with Inherited traits

Personality and behavioral characteristics

- **Assertiveness**
- **Adaptability**
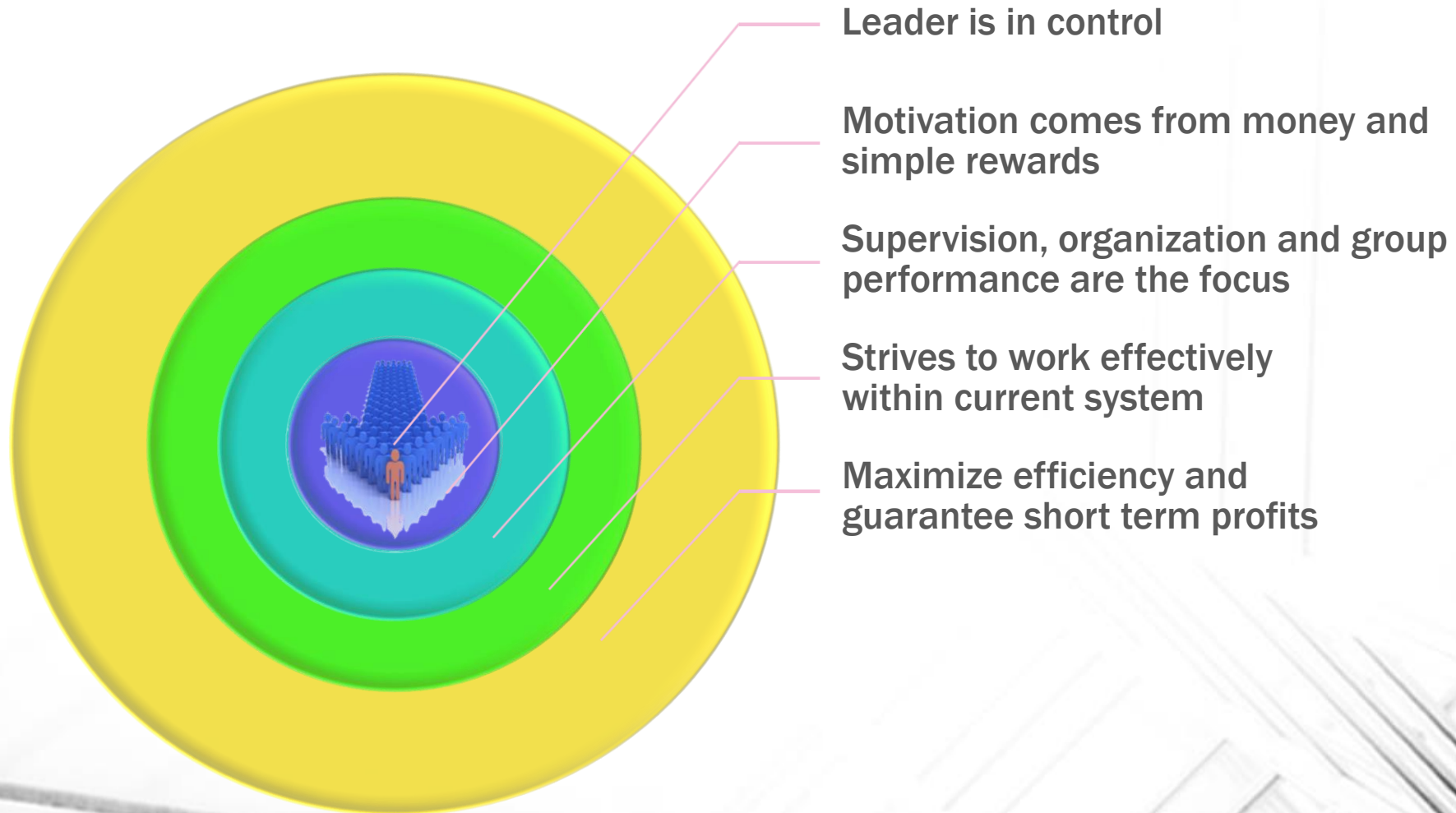- **Confidence**
- **Intelligence**
- **Social Skills**

Situational – Contingency Theory

Factors and ability to lead is contingent upon the situation

**3 significant areas:
Situation, Leader, Follower**

**Different leadership styles
for different situations**

Transactional Leadership

Leader is in control

Motivation comes from money and simple rewards

Supervision, organization and group performance are the focus

Strives to work effectively within current system

Maximize efficiency and guarantee short term profits

Transformational Leadership

Relationships are of critical importance

- Especially of leader and follower

Emphasis on empowerment and development of potential

Change is a key focus

- Builds a shared vision
- Sees the big picture
- Deal with Complex issues

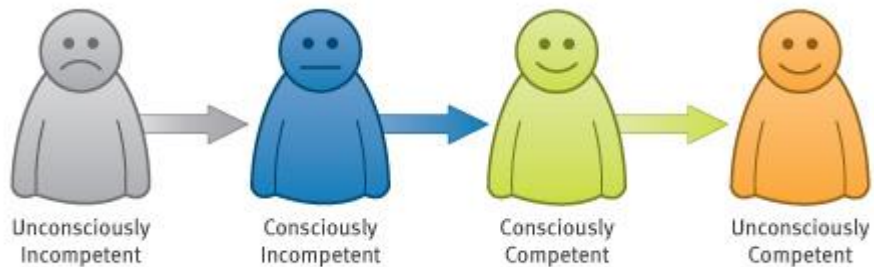**Encourages participation and motivation**

Stage 1: Novice

Has no experience in the situations in which they are expected to perform

Lacks confidence to demonstrate safe practice

Requires continual verbal and physical cues

Unconsciously Incompetent → Consciously Incompetent → Consciously Competent → Unconsciously Competent
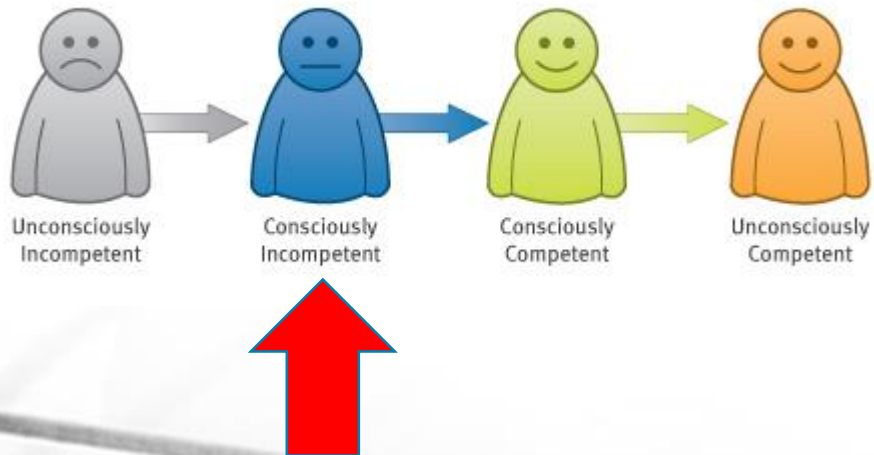
Stage 2: Advanced Beginner

Demonstrate marginally acceptable performance due to prior experience

Is efficient and skillful in parts of the practice area

Requires occasional supportive cues

Knowledge is developing

Unconsciously Incompetent → Consciously Incompetent → Consciously Competent → Unconsciously Competent

I'M TOO BUSY TO LEARN ANYTHING ABOUT THE PROJECTS I'M MANAGING.
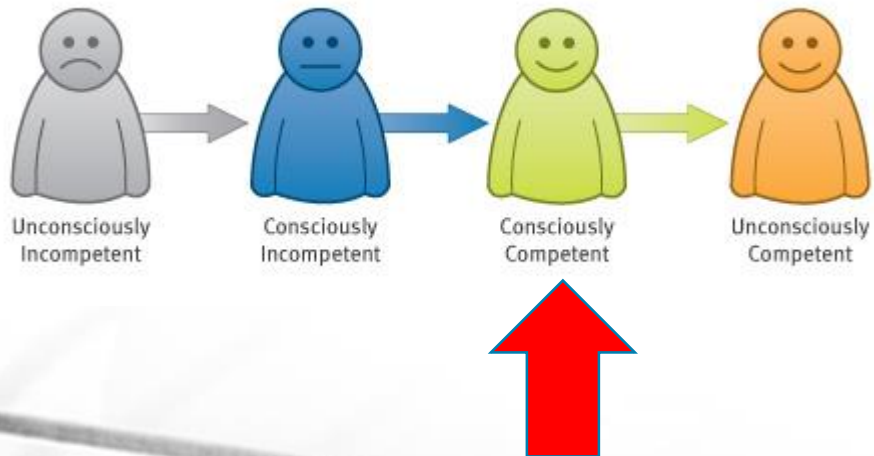
© Scott Adams, Inc./Dist. by UFS, Inc.

Stage 3: Competent

Competence is demonstrated by the nurse who has been on the job in the same or similar situations for two or three years

Able to demonstrate efficiency and is coordinated

Has confidence in his/her actions

Unconsciously Incompetent → Consciously Incompetent → Consciously Competent → Unconsciously Competent
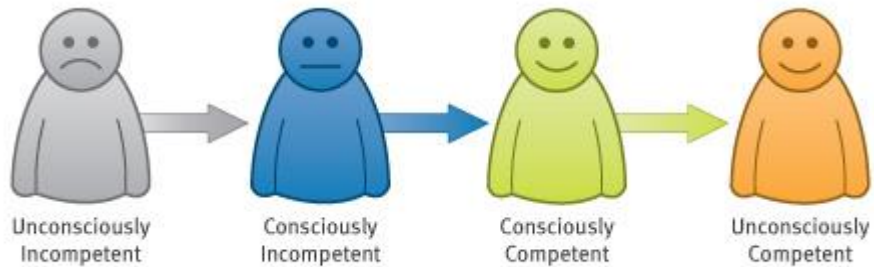
Stage 4: Proficient

Perceives situations as wholes rather than chopped up parts or aspects

Learns from experience what typical events to expect in a given situation

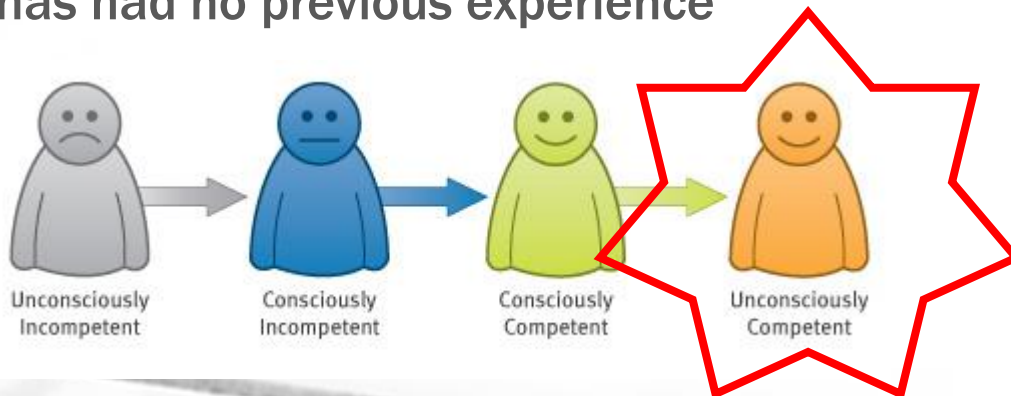Understands how plans need to be modified in response to these events

Stage 5: Expert

Has an intuitive grasp of each situation

Zeroes in on the accurate region of the problem without wasteful consideration

Operates from a deep understanding of the total situation

Highly skilled analytic ability is necessary and used for situations with which the nurse has had no previous experience

Unconsciously Incompetent → Consciously Incompetent → Consciously Competent → Unconsciously Competent

Adaptation of Stages of Nursing Clinical Competence to Stages of Nursing Leadership

Stage 1: Novice Leader

No prior experience

Willingly accepts supervision, shows creativity, initiative and drive when performing clinically oriented tasks

Beginning to understand leadership roles and how groups operates and performs

- Staff nurse routinely carries out duties with ease

- Accepts charge nurse supervision and ideas without hesitation

Retrieved From: http://angelabrook.com/wp-content/uploads/2013/03/nurse-leader.jpg
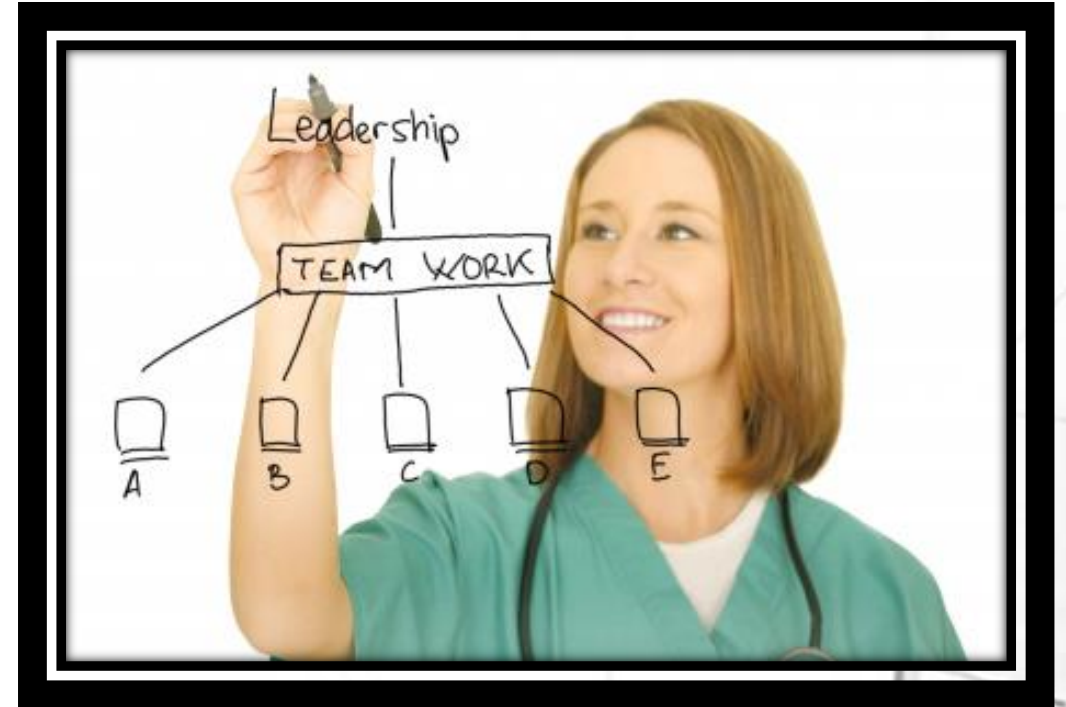
Stage 2: Beginning Leader

Assumes more responsibilities for clinical situations

Relies less upon direct supervision and more upon independent practice

Is able to contribute ideas and knowledge to others

Begins to develop credibility and a positive reputation amongst coworkers

Is involved as a mentor to help and develop other nurses

- Staff nurse begins suggesting performance improvement projects to the nurse manager

- Is being called upon to train and mentor newer nurses

Retrieved From:
http://a.abcnews.com/images/Entertainment/ap_Star_Trek_Into_Darkness_nt_130516_wmain.jpg

Stage 3: Proficient Leader

Understands situations as a whole, quickly strategize and delegate appropriate responsibilities to others

Utilizes leadership skills to effectively unify individuals around a central goal and can motivate to create change

- Staff nurse creates performance improvement project

- Delegates appropriate roles for assistance in project to newer nurses

- Becomes an ambassador of the unit for the hospital

Retrieved From: http://newsfirst.lk/english/wp-content/uploads/2014/06/ban-ki-moon.jpg

Developed leadership skills through trial & error with guidance from mentors

Leadership Experience

NYC Men in Nursing President

STTI UN Youth Representative

MSKCC Nursing Talent Ambassador

Mentored by former nursing faculty

Developed leadership skills through observation, motivation for increased responsibility and increased experience

Leadership Experience

STTI NYU Chapter President

STTI Region 14 Global Initiatives Co-Chair

NIGH UN Youth Representative
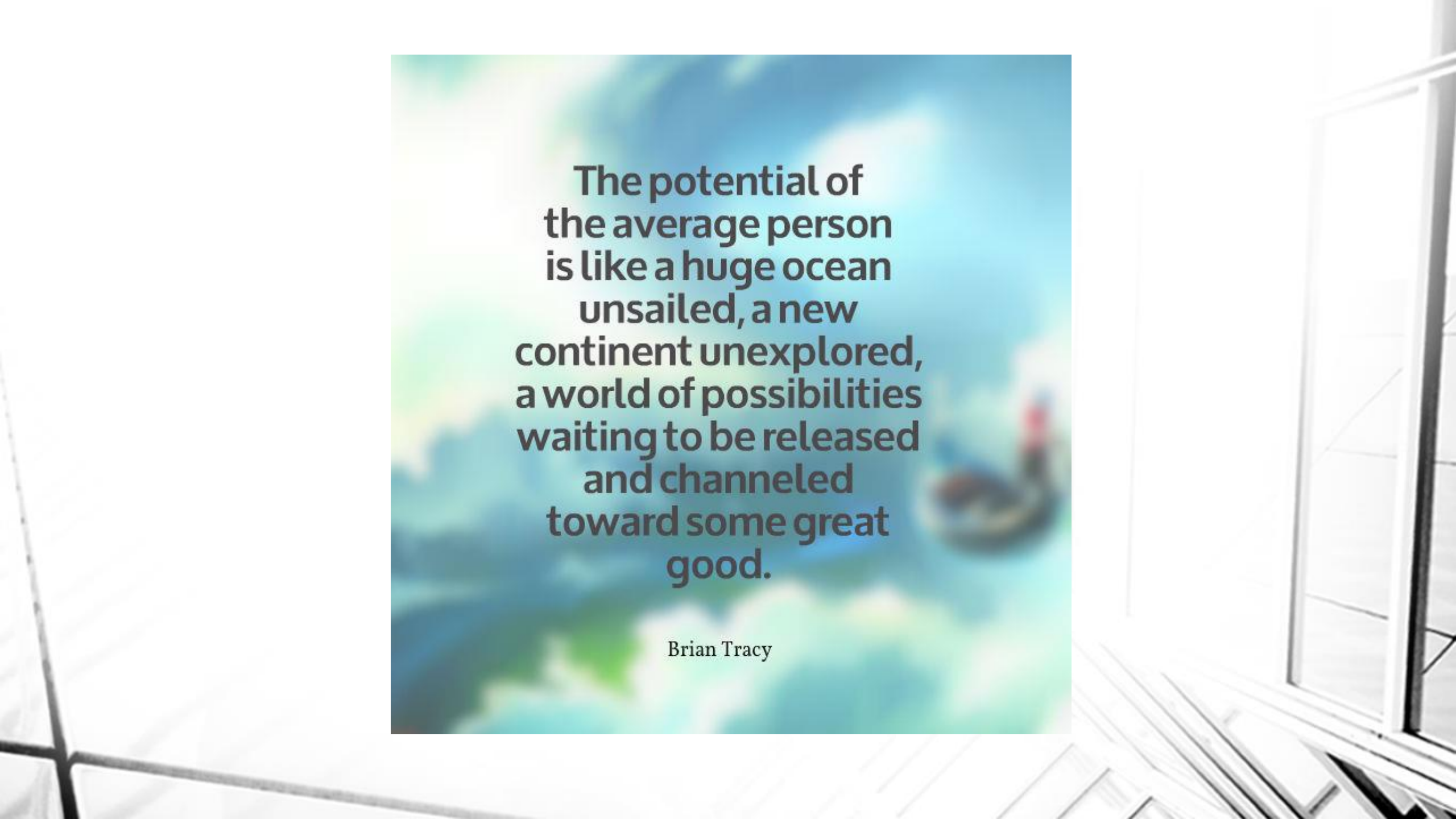
STTI Next Generation Leaders Task Force

Leadership Experience

STTI William Paterson University Chapter President

STTI Region 14 Global Initiatives Co-Chair

STTI UN Youth Representative

The potential of the average person is like a huge ocean unsailed, a new continent unexplored, a world of possibilities waiting to be released and channeled toward some great good.
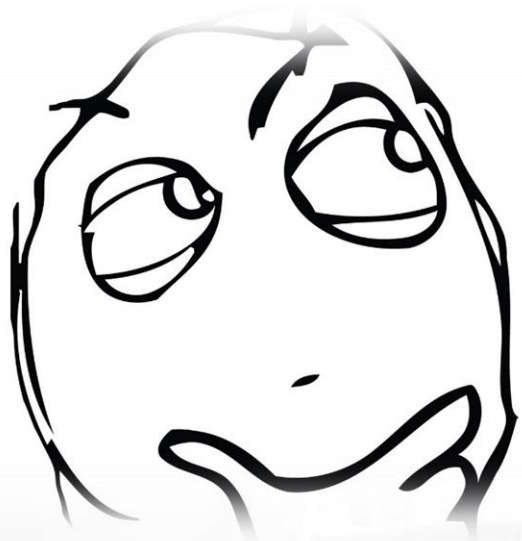
Brian Tracy

Networking Workshop

4

Workshop Objectives

The learner will be able to engage Youth Members into participating in STTI at the local, regional, national, and international levels
- Showcase the leadership of STTI youths and strategies to increase involvement
- Showing active STTI Youth would provide examples to other chapter and regional leaders on how to engage their youth in a meaningful way

The learner will be able to facilitate networking sessions and mentoring partnerships to increase youth leadership.
- Will include a demonstration on the power of networking and mentoring sessions
- Will demonstrate to learners on how to create a networking workshop geared toward new members and initiating a mentoring relationship for experienced members

"Yarn Network" Ice Breaker

Things You'll Need:
- Large ball of yarn
- Form in a large circle

Instructions:
- Facilitator begins be stating his/her name, followed by job title (nursing student, RN, NP, manager, CRNA, etc), related department/university, nursing specialty/interest
  - Ex: My name is Raissa, I'm a cardiothoracic nurse at New York Presbyterian-Columbia, and I'm also interested in global health
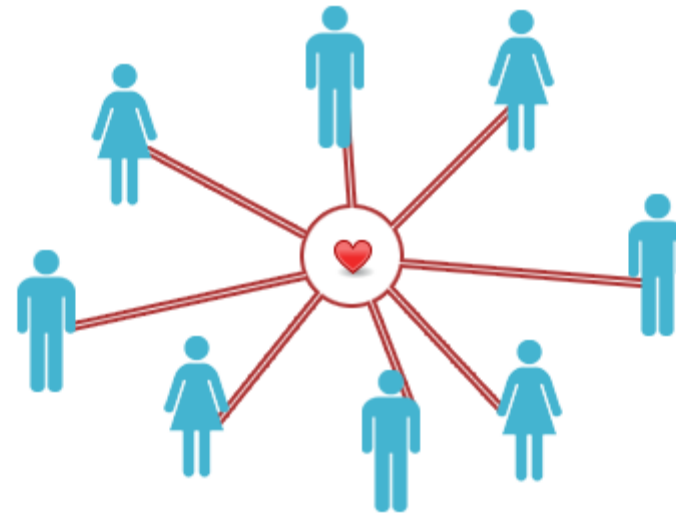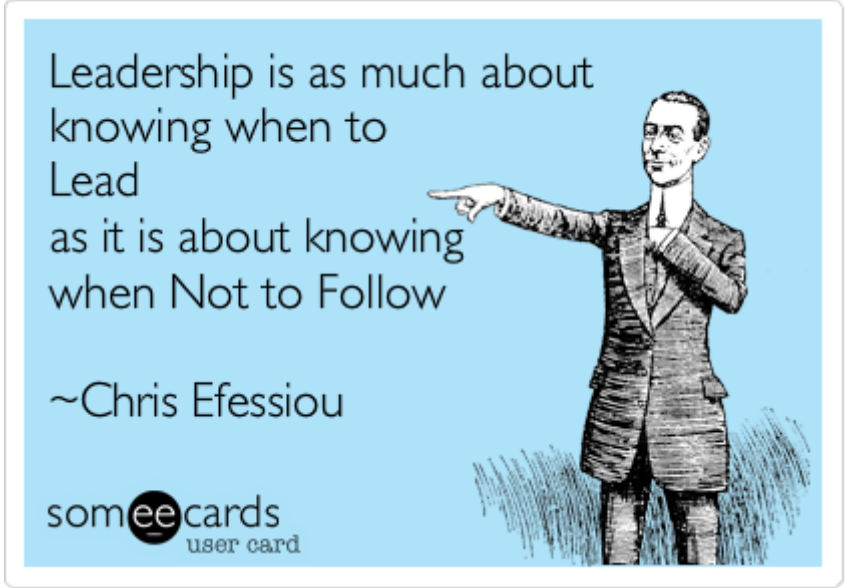
"Yarn Network" Ice Breaker Goal

To visualize the mutual interests nurses may share

To open the conversation between potential mentor/mentee relationships

Can be done in the before networking workshop begins to ease newcomers' anxieties

Can be done in the middle of workshop to break up the time spent after explanation of networking's importance

New Careers

Networking

Leadership Opportunities

Leadership is as much about knowing when to Lead as it is about knowing when Not to Follow

~Chris Efessiou

someecards
user card

References

Bolden R., Gosling J., Marturano A. (2003). *A review of leadership theory and competency frameworks*. Crossmead, U.K. Centre for Leadership Studies, University of Exeter.

Fox, Kathy C. (2010). "Mentor Program Boosts New Nurses' Satisfaction and Lowers Turnover Rate." *The Journal of Continuing Education in Nursing*, 311-16.

Gopee, N. (2008). *Mentoring and supervision in healthcare.* Los Angeles, CA. SAGE Publications.

Stanley S. (2009). Clinical leadership and the theory of congruent leadership In: Bishop V. (2009) *Leadership for nursing and allied health care professionals*. Berkshire, England. McGraw Hill.

Stubbs K., Forbes-Burford J. (2009). Modernisation of primary care: innovation, leadership and enterprise within the workforce in: Sines D., Saunders M., Forbes-Burford J. (2009) *Community health care nursing (4th ed)*. DOI: 10.1002/9781444316247

Taylor, C. (1997)."Problem Solving in Clinical Nursing Practice." *Journal of Advanced Nursing,* 329-36.

Taylor R. (2009). Leadership theories and the development of nurses in primary health care. *Primary health care*, *19(9),* 40-45.

Terry P., Graden A., Haltrecht E., (2013). *The new four stages of contribution research: today's workforce: demographic differences, behavioral contributions, and who is really doing what*. Los Angeles, CA. Korn/Ferry.

Vinales, J. (2015). "The Mentor as a Role Model and the Importance of Belongingness." *British Journal of Nursing*, 532-35.