Mentoring in a Nurse Anesthesia Program: Cultivating Wellness and Developing Leaders

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Certified Registered Nurse Anesthetists (CRNAs)

- Advanced practice nurses who provide a full scope of anesthesia and pain management services
  - Staff nurse anesthetists
  - Military nurse anesthetists
  - Administrators
  - Educators
  - Entrepreneurs
  - Students

- In every practice setting for every type of surgery or procedure

- High degree of autonomy and professional respect

- Have been providing anesthesia in the United States for more than 150 years
Nurse Anesthesia Program Requirements

Rutgers, The State University of New Jersey

- Admission Requirements:
  - Bachelor of Science Degree in Nursing
  - Current license as a RN
  - Minimum of one year's critical care nursing experience at time of interview
  - CCRN credentials
  - Recommendations from clinical leaders

Doctorate of Nursing Practice (DNP)

- 36 months of full time study
- 85 credits to complete degree
- 1-2 days of Didactic classes / week
- 2,500 minimum clinical hours completed
- 3 – 4 Clinical days / week
- 10-12 hours each shift

Acceptance Rates for Nurse Anesthesia Program

- Graduating 2016: 11.4%
- Graduating 2017: 12.9%
- Graduating 2018: 13%
- Graduating 2019: 12.9%
Student Registered Nurse Anesthetists (SRNAs) and Stress

Almost all nurse anesthesia students are in a state of moderate life crisis (Perez & Perez, 1999).

**Academic Stressors**
- Information overload
- Expectations
- Adjusting to different teaching styles
- Fear of dismissal from program

**Clinical Stressors**
- Adaptation to new environments
- Adaptation to new roles
- Adaptation to clinical preceptors
- Conflict with clinical instructors

**External Stressors**
- Lack of personal time
- Financial problems
- Physical and Mental Exhaustion
- Relationships: Family, friends, significant other
# Stress and Burnout in Nurse Anesthesia

*Anthony Chipas, CRNA, PhD*
*Dennis McKenna, CRNA, MSNA*

<table>
<thead>
<tr>
<th>Primary role</th>
<th>Mean stress score(^a)</th>
<th>% of stress from work</th>
<th>No. of respondents</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student</td>
<td>7.2</td>
<td>90</td>
<td>1,094</td>
</tr>
<tr>
<td>Educator</td>
<td>6.2</td>
<td>90</td>
<td>433</td>
</tr>
<tr>
<td>Administrator</td>
<td>5.1</td>
<td>70</td>
<td>593</td>
</tr>
<tr>
<td>Military</td>
<td>4.9</td>
<td>75</td>
<td>109</td>
</tr>
<tr>
<td>Staff CRNA</td>
<td>4.3</td>
<td>50</td>
<td>2,193</td>
</tr>
</tbody>
</table>

Table 6. Average Daily Stress by Primary Role

\(^a\) On a 10-point Likert scale.
“... Our ancestors used the responses of “fight or flight” to cope with daily pressures of survival.

Unfortunately, nurse anesthetists cannot adopt these same responses to cope ... fighting or feeling is not an option.”

(Chipas & McKenna, 2011)
Stress Coping Mechanisms for SRNAs (Philips, 2010)

- **Problem Focused Coping**
  - Asking for assistance from faculty
  - Attempting to manage time better
  - Contemplation of dropping out

- **Emotion Focused Coping**
  - Socially withdrawing from support system
  - Lack of exercise
  - Procrastination

- **Combination Coping**
  - Peer support
“Confusion sometimes exists when using the term mentor. Often it is confused with orientation or precepting.

Mentoring is quite different. Mentors exude qualities of wisdom, teaching, reliability and caring within a strong personal and emotional relationship.”

(Faut-Callahan, 2001)
Student-Driven Formal Mentorship Program

January 2016 – First Round Mentorship
• MSN Cohort – 22 Mentors
• DNP 1 Cohort – 18 Mentees
• 1 Student Coordinator from MSN Cohort
• Program Director and Assistant Program Director to oversee progress

April 2016 – Second Round Mentorship
• DNP 1 Cohort – 18 Mentors
• DNP 2 Cohort – 24 Mentees
• 2 Student Coordinators from DNP 1 Cohort
• Program Director and Assistant Program Director to oversee progress
Mentorship Program Initiatives

Mentorship Program Handbook
• Provides formal guidance information for both mentors and mentees

Student Coordinator(s) responsibilities
• Arrange mentor - mentee pairings between cohorts
• Help facilitate mentor - mentee relationships
• Monthly emails sent to mentor - mentees
  • E.g. Clinical preparation, Stress and wellness techniques, Professional organization involvement
• Coordinate social events between cohorts
• Follow up with issues between mentors and mentees
• Facilitate communication between mentor - mentees and faculty
“...I got a text asking me if I was okay because she heard that the class received horrible grades. To have her contact me felt life saving. It was such a relief to have someone contact me, support me and eventually calmed me down.”

“No one will ever understand what it means when they said that it is very hard. It doesn’t really matter what they say, it’s more about how they say it. They went through the same process and they still seem to like it. It’s hopeful. Piece of mind is the biggest thing that I have gained.”

“Let’s me know my feelings are normal. Reassures me that I am not alone.”

“The relief I experience after talking with my mentor gives me the motivation to continue on this difficult path. I would love to be able to provide that kind of relief to someone else.”

“Been there for me.”
Mentorship and Leadership

Effective Mentor Characteristics

• Advocate
• Attentive
• Enthusiastic
• Empathetic
• Cognizant of personal weaknesses
• Problem Solver
• Patient
• Nonjudgmental and nonthreatening

Effective Leadership Abilities

• Transformational and revolutionary
• Must be able to facilitate the learning of others
• Must believe in empowering their followers
• Change is a key focus
• Able to deal with complex issues
• Encourages participation and motivation
“... (I am) actively trying to create a better atmosphere for nurse anesthesia practice.”

“I look forward to one day providing the support and encouragement I feel now.”

“... I have learned to be more attentive and to be empathetic.”

“(I hope to instill) hard work, dedication, timeliness, humility, honesty.”

“... I aspire to instill a dedication to learning, punctuality and respect of peers, colleagues, professors, preceptors and the nurse anesthesia program.”
References


