Mentoring is often thought of as a more experienced person sharing information, advice, knowledge, or training with a novice. A mentor might be engaged to assist a person to achieve a goal, complete a project, or facilitate a transition to a different role or an expanded level of responsibility. Mentoring can be formal or informal, short or long term, episodic or ongoing, planned or spontaneous. A mentor can be a volunteer or someone specifically hired or assigned and matched according to the competency required. A mentor may also be identified by the person seeking to be mentored.

Mentors may come from many walks of life—parents, siblings, educators, colleagues, clerics, friends or classmates, or bosses. Even a client or patient might offer informal guidance and meaningful feedback. No two mentors are alike. Styles will vary. Some will coach, whereas others will instruct. Some will help their mentees learn from their mistakes, whereas others will be direct. Some will assign tasks and meet regularly with their mentees, whereas others prefer to counsel or provide advice as needed. A mentor can help a new member or employee understand the values and culture of an organization.

Mentoring in the Literature

A large body of research about mentoring in a host of environments—academic, workplace, addiction rehabilitation, science, ministry, youth and adolescent—exists. A select number of articles representing a variety of fields were reviewed; favorable results from mentoring were reported in all fields. Eby, Allen, Evans, Ng, and DuBois (2008) described a meta-analysis of the mentoring research published from 1985–2006 for youth, academic, and workplace mentoring. Despite some differences related to the age of the populations, Eby et al. (2008) found mentoring to be significantly related to favorable social, attitudinal, personal, motivational, and career outcomes in all three environments. Most of the articles specific to nursing detailed the value of mentoring for job retention and satisfaction (Greene & Puetzer, 2002; Latham, Hogan, & Ringl, 2008). International interest in this subject exists as well. An article from Taiwan (Weng, Huang, Tsai, Lin, & Lee, 2010) recommended that nurse managers include career development and role modeling as functions of mentoring. Australian authors Nelsey and Brownie (2012) discussed the challenges and strengths of diverse generations of nurses working together, realizing the value in generational diversity and believing that retention rates will benefit if strategies are designed that employ the knowledge and talent of the more experienced nurses to mentor the younger nurses.
Mentoring can and should occur across the range of nursing environments, and many authors have examined mentoring in particular job circumstances. For instance, Prevosto (2001) studied the effect of mentorship on the job satisfaction of nurse reservists and their intent to stay in the U.S. Army Reserve; more satisfaction and the desire to remain in the Army Reserve were found in the mentored group. Likewise, Persaud (2008) showed that mentors improved retention rates among new graduates in the operating room. In addition, Halfer, Graf, and Sullivan (2008) performed a descriptive study to compare two cohorts of newly graduated RNs employed in a pediatric medical center; one group participated in a pediatric internship, whereas the other did not. Improved job satisfaction and lower turnover rates were observed in members of the cohort who received mentoring during the internship. In another article, Thompson, Wolf, and Sabatine (2012) described a “trimodel for executive success” for nurses interested in executive-level roles; this model consists of a preceptor, mentor, and coach, as well as planned learning experiences and systems-level thinking. Thompson et al. (2012) differentiated between mentoring and coaching, but proposed that both roles are imperative to effectively prepare nurse executives. Mentor is defined as the person who provides specific advice regarding desirable behaviors and skills, whereas coach is described as the person who works with the nurse to put that advice into action (Thompson et al., 2012). In the critical care setting, mentoring may promote retention and successful achievement of nursing competencies (Kanaskie, 2006). Valuable mentors should exhibit patience, enthusiasm, knowledge, humor, and respect, whereas successful mentees should be open to receiving guidance, as well as demonstrate career commitment and a strong sense of self and initiative (Kanaskie, 2006). In examining the effect of a structured mentoring program based on real situations, Leggat, Balding, and Schiftan (2015) found that self-reported practices showed measurable improvement, particularly regarding the transformational properties of leadership.

Opportunities for Mentorship

In honor of his wife who lost her battle with ovarian cancer, Frederick C. Flynn Jr. (2015) created the Susan D. Flynn Oncology Nursing Fellowship Program in 2014 to stimulate interest in oncology among nursing students. The program has grown, and many cancer hospitals are program partners. The program’s fellows are matched with experienced oncology nurses and are mentored while being exposed to all aspects of cancer nursing and patient care. All 37 students the program has sponsored have confirmed their interest in becoming an oncology nurse (Flynn, 2015).

Opportunities for mentoring and being mentored can present themselves in different ways. McLane (2005) acknowledged the challenge that nurse managers face when trying to find time to mentor and develop staff. McLane’s (2005) organization saw implementation of the electronic health record as a chance for mentoring and staff development; the outcome was several successful peer-reviewed manuscript and poster submissions prepared by the nurses involved. The Oncology Nursing Society (ONS) also has formal and informal mentoring opportunities for members. ONS Communities (formerly known as special interest groups) and regional chapters are replete with nursing colleagues who are excellent clinical resources and may be willing to offer practical management advice. In addition, the Clinical Journal of Oncology Nursing (CJON) Writing Mentorship Program (http://bit.ly/1toXILy) pairs new writers with experienced authors who will guide them through the development of an article for CJON. In all, “mentoring is more than an orientation or preceptorship... it is an ongoing relationship that will last as long as the mentor and mentee find value in it” (Nowicki Hnatiuk, 2012, p. 43).

Implications for Nursing

Mentoring offers value to the employer and to the mentee and the mentor. Based on a review of the literature, because of mentoring, a healthcare organization may experience less staff turnover, see improvement in employee morale, and employ staff who are more committed to and have a better understanding of the organization. Mentoring may also allow the organization to identify future leaders among the mentors. The mentee not only acquires a coach and a teacher, but also an expert resource who is invested in his or her success. Mentees may have the satisfaction of achieving a goal, and, very often, the mentee and mentor develop a lasting friendship. Mentors benefit from the satisfaction of helping a colleague and assisting their employer to achieve strategic goals, and they are typically motivated to continue their own professional development to ensure that they have the knowledge and skills to be an effective mentor. At a time when health care is experiencing unparalleled change, skillful mentors can provide stability while facilitating change in a positive and thoughtful manner, contributing to the development of the next generation of nursing care providers.

Those who have rewarding, interesting, and challenging healthcare
careers most likely had many mentors who influenced their professional and personal lives in many positive ways. The approach chosen by the mentor can be as valuable a lesson as the content to be learned. Interactions with mentors allow mentees to acquire needed job knowledge, but they may also be instrumental in sharing life skills that are assets in any personal or professional situation, including the abilities to focus, self-motivate, and be efficient. Mentors are also capable of helping their mentees gain self-confidence, know when to ask a question (which can establish the tenor for a discussion and contribute to gaining or losing cooperation), and understand the importance of developing effective relationships.

Conclusion

Many novice and experienced nurses feel trepidation at the idea of caring for patients with cancer. Without the appropriate clinical foundation or knowledge, various oncology-specific terms, diagnoses, and therapies can appear daunting. An effective mentoring program can help nurses to see what is special about oncology nursing and understand its many benefits and rewards. Employers and patients also benefit from mentoring programs because they allow nurses to acquire the knowledge, skills, and experience that will make them effective nursing care providers.

Good mentors are knowledgeable, kind, flexible, and determined, and they will understand and adapt to the learning preferences of their mentees while sharing their expertise, time, and insight. In addition, they will proudly watch their mentees as they progress in their careers. They will motivate their mentees, as well as challenge them to think differently and convey the importance of planning and investigation. Mentors will teach their mentees to be observant and make thoughtful decisions. In all, mentors can make a difference in the lives of their mentees. To be someone’s mentor is an honor, and to be mentored is a gift.

References


Authorship Opportunity

Leadership & Professional Development provides a platform for oncology nurses to illustrate the many ways that leadership may be realized and professional practice may transform cancer care. For more information about writing for this column, contact pubONF@ons.org.