RN Perception of Mentoring in a Hospital Environment

Diane Kramer  
*Baptist Health South Florida*, dianek@baptisthealth.net

Andrea Prentiss  
*Baptist Health South Florida*, andreap@baptisthealth.net

Kayce Tugg  
*Baptist Health South Florida*, kaycet@baptisthealth.net

Victoria McCue  
*Doctors Hospital*, victoriamc@baptisthealth.net

Eve Butler  
*Baptist Health South Florida*, eveb@baptisthealth.net

*See next page for additional authors*

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Authors
Diane Kramer, Andrea Prentiss, Kayce Tugg, Victoria McCue, Eve Butler, Maria Ojeda, Sally Bonet, and Vivian Fuentes

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Nurse Perceptions of Mentoring in a Hospital Environment

Diane Kramer, BSN, RN
Eve Butler, PhD, RN
Kayce Tugg, MSN, RN
Vivian Fuentes, MSN, RN
August 2016-August 2017
Introduction

- ROIs and Benefits of mentoring in organizations
  - Retention
  - Satisfaction
  - Increase workplace safety
  - Personal and Professional growth

- Baptist Health South Florida currently has a formal mentoring program. Although there has been good attendance with the mentoring classes, the participants fail to commit to formal mentoring. Consequently, system-wide, there are few formally trained mentors.
Purpose of the Study

• To understand the nurse mentoring culture within a hospital environment as well as identify and analyze the barriers to nurse mentoring.
Objectives:

- Examine the benefits of a robust nurse mentoring culture in the hospital setting.
- Review focus group research related to nurse perceptions of mentoring.
- Summarize the themes related to culture, experience, barriers, and a paradigm shift.
Study Personnel/Locations:

- **Principal Investigator:** Diane Kramer, BSN, RN, P-PC
- **Co-Principal Investigator:** Kayce Tugg, MSN, RN, P-PC
- **Co-Principal Investigator:** Vivian Fuentes, MSN, RN
- **Co-Principal Investigator:** Eve Butler, PhD, RN
- **Co-Principal Investigator:** Andrea Prentiss, PhD, CNS-BC, ARNP-BC
- **Co-Principal Investigator:** Sally Bonet, MSN, RN
- **Co-Principal Investigator:** Vicky McCue, MSN, RN, CPN
- **Co-Principal Investigator:** Maria Ojeda PhD, RN
- **Key Personal:** Juanita Gumbs MSN, RN
- **Key Personal:** Vanessa Ginarte
- **Liason:** Diana D’Orazio Garcia

BAPTIST HOSPITAL
DOCTORS HOSPITAL
HOMESTEAD HOSPITAL
MARINERS HOSPITAL
SOUTH MIAMI HOSPITAL
WEST KENDALL BAPTIST HOSPITAL
• This qualitative study explored nurse perceptions of a mentoring culture within a hospital environment.

• Open-ended, conversational-style interviewing techniques with a semi-structured interview guide followed by probes to elicit more specific information were used to gain a full description of each nurse’s perceptions.
Methods

• Inclusion criteria: All nurses employed at BHSF (CNOs, all nursing leadership, CNEs, and bedside clinical nurses)

• 21 one hour focus groups scheduled over a 2 month period N=42

• Data analysis = themes developed

• IRB approved study
Semi-Structured Focus Group Questions

• How would you describe mentoring culture at BHSF?
• What are benefits and barriers of a mentoring culture at BHSF?
• Can you please share any of your experiences of being a mentor or a mentee?
• Can you please share what is the value of mentoring in your professional growth and development in the BHSF organization?
Demographic Questions

- Demographic questions included
  - Age
  - Gender
  - Years of experience
  - Hospital and unit worked
  - Certifications
  - Leadership verses non leadership
  - History and experiences with mentoring
  - Formal verses informal
  - In or out of BHSF
  - Role as a mentee
Analysis

- Demographics were analyzed using frequencies and descriptive statistics
- Audio recorded interviews were transcribed verbatim
- Each transcripts was read at least one time without taking notes to obtain a clear overview of the participants perceptions
- Text was then read again multiple times by each individual research personal recording possible themes related to the research questions
- Themes by each researcher were extrapolated and then brought to the group to form consensuses
- These themes were analyzed to develop 5 major over arching concepts
- The emergent themes were used to build a model of mentoring
Demographic Results

% of Participants by Gender
- 91% Female
- 9% Male

% of Participants by Role
- 57% Leadership
- 43% Non-Leadership
Demographic Results

% of Participation by Entity

<table>
<thead>
<tr>
<th>Entity</th>
<th>Participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>BH</td>
<td>19%</td>
</tr>
<tr>
<td>WKBH</td>
<td>24%</td>
</tr>
<tr>
<td>HH</td>
<td>2%</td>
</tr>
<tr>
<td>SMH</td>
<td>7%</td>
</tr>
<tr>
<td>DH</td>
<td>10%</td>
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<tr>
<td>MH</td>
<td>33%</td>
</tr>
<tr>
<td>CORP</td>
<td>5%</td>
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% of Participants by Department

<table>
<thead>
<tr>
<th>Department</th>
<th>Participation</th>
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<tbody>
<tr>
<td>Peds</td>
<td>2%</td>
</tr>
<tr>
<td>ED</td>
<td>5%</td>
</tr>
<tr>
<td>ICU</td>
<td>9%</td>
</tr>
<tr>
<td>Med/Surg</td>
<td>26%</td>
</tr>
<tr>
<td>Obs</td>
<td>5%</td>
</tr>
<tr>
<td>Other</td>
<td>54%</td>
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</tbody>
</table>
Demographic Results

<table>
<thead>
<tr>
<th></th>
<th>Mean (SD)</th>
<th>Minimum</th>
<th>Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age in Years</td>
<td>48 (11.2)</td>
<td>30</td>
<td>70</td>
</tr>
<tr>
<td>Years Experience</td>
<td>22 (11.99)</td>
<td>4</td>
<td>50</td>
</tr>
<tr>
<td>Years worked at BHSF</td>
<td>15 (10.35)</td>
<td>3</td>
<td>50</td>
</tr>
</tbody>
</table>
Demographic Results

% of Participants that Served as a BHSF Mentor

- 76% Yes
- 24% No

*Out of 50 mentoring experiences 12 were assigned.
Demographic Results

% of Participants that Attended Formal Mentoring Class

- 54% Yes
- 46% No

% of Participants that Attended a BHSF Mentoring Class

- 71% Yes
- 29% No
Results

Five overarching themes with corresponding subthemes emerged from the focus group data.

- **Mentoring culture**: various mentoring models, informal vs formal, leader focused, and evolving.

- **Experience with mentoring**: going above and beyond, lifetime relationships, personal/professional growth, feeling cared for.
Results

• **Benefits**: connections, development, retention, stability, patient safety, and making a difference.

• **Barriers**: time, patients/patience, competition, knowledge deficit regarding mentor verses preceptor roles, lack of incentives, receptiveness, and voluntold

• **Paradigm shift**: match generational and cultural differences, resources, face to face, and voluntary
A structural model of mentoring as perceived by hospital nurses was developed from the data.

(Trust is at the core)
Conclusions

• The study results have identified mentoring as an integral aspect of personal and professional growth within the hospital environment.
• The rewards of mentoring or being mentored translated into increased retention, and nurse satisfaction. However there are identified barriers that need to be overcome.
• The most notable finding was the distinct knowledge deficit regarding the role and responsibilities of a mentor versus a preceptor in the hospital environment.
Next Steps

• Create education and awareness of the differences between preceptor and mentor roles
• Incorporate into the current residency workshop
  • Residency alumni Mentoring program (June 2018)
• Roving carts (Tables at Nurse Week)
• Mentoring consults for leaders and staff (CSC,BH,HH)
• 15 Minute Mentoring Moments (2018)
Special thanks to Barbara Blanco Marchante MSN, RN, Director of Clinical Learning for her support of this project.