Mentoring of Nursing Faculty Tool Kit

Introduction

The National League for Nursing (NLN) Board of Governors published the position statement, *Mentoring of Nurse Faculty*, in 2006. Through this position statement the NLN promotes the deliberate use of mentoring as a means to foster the career development of faculty, enhance the recruitment and retention of nurse educators, and establish healthful academic work environments. The position statement examined how mentoring could be made operational throughout the career continuum and recommended the development of a Tool Kit on mentoring. A review of the literature and search of web-based information guided the Healthful Work Environment Task Group in developing the Mentoring of Nursing Faculty Tool Kit. This Tool Kit is designed to be used by early, mid and late career educators and administrators to assess mentoring practices at individual and program levels and can be used in conjunction with the Healthful Work Environment Tool Kit.

The Tool Kit contains questions to guide the assessment of broad mentoring related concepts, mentoring practices at specific points throughout a faculty member’s career continuum, and mentoring related outcomes. In addition, the Tool Kit contains relevant informational resources useful to mentees, mentors and administrators to enhance understanding of mentoring. The resource list is intended to be evolving rather than comprehensive. If a resource is relevant to more than one section of the Tool Kit, it will be listed under each section to which it applies.

Throughout the Tool Kit, both the terms mentee and protégé are used. The term mentee includes anyone who enters into a mentoring relationship with a mentor, whether it is formal or informal, assigned by an administrator or selected by the mentee. Protégé is used to refer to a specific subset of mentees: those who, because of their potential as leaders, are selected and mentored in a one-to-one long-term relationship. In addition, for the purposes of this Tool Kit, peer and co-mentoring are defined as described in the NLN *Mentoring of Nurse Faculty* (2006) position statement: Peer mentoring occurs when the new faculty members themselves pool their information and expertise and support each other. Co-mentoring is characterized by reciprocity and involves listening and being listened to, teaching as well as learning, and offering and obtaining information and support through recurrent dialogue.

**Mentoring Related Concepts**

1. How is mentoring defined by the faculty in the nursing unit?

2. How are formal and informal approaches to mentoring implemented in this setting?

3. What process is used to partner mentors and mentees? Are considerations given to age, racial or gender issues?
4. If necessary, what mechanism exists for changing mentor/mentee partners?

5. Are mentor-protégé relationships distinguished from mentor-mentee relationships in the nursing unit or institution?

6. What are the responsibilities of each of those engaged in mentor/mentee relationships?

7. What are the characteristics of the individuals who are successful mentors and mentees in the institution?

8. How are mentees prepared for the role?

9. How are mentors prepared for the role?

10. What nursing unit or institutional resources (e.g. training, literature, coaching) are available to help mentors and mentees be most effective in their roles?

11. What is the administrator’s role in establishing and maintaining effective mentor/mentee relationships?

12. What is the role of the overall faculty group in establishing and maintaining effective mentor/mentee relationships?

13. What philosophical framework(s) or conceptual model(s) or theories are used as the foundation for mentoring practices in the nursing unit or institution?

14. How does the culture of the nursing unit and/or the parent institution support or hinder mentoring?

15. In what ways are group, peer and co-mentoring implemented?

16. How is the concept of mentoring introduced to students during their undergraduate and graduate nursing education programs?

17. In what ways have mentors been recognized and/or rewarded for their contributions?

**Resources for Mentoring Related Concepts**


**Free Management Library**
According to this website “The Library provides easy-to-access, clutter-free, comprehensive resources regarding the leadership and management of yourself, other individuals, groups and organizations. Content is relevant to the vast majority of people, whether they are in large or small for-profit or nonprofit organizations.” The page on mentoring includes description of mentoring, information on being a mentor and getting a mentor, suggestions for setting up a mentoring program, along with some general resources. http://www.managementhelp.org/guiding/mentrng/mentrng.htm

**International Mentoring Association**
According to their website, “The International Mentoring Association exists to facilitate growth and development through best practices in mentoring. The IMA is housed at Western Michigan University, and serves members from a broad cross-section of individuals in public and private institutions, and business and industry, all of whom support and promote planned mentoring. Membership is open to all individuals who actively support the objectives of the Association.” http://www.mentoring-association.org

**National League for Nursing**
The National League for Nursing has published numerous resources related to excellence, which have relevance for mentoring practices. Two of these resources are the *Hallmarks of Excellence* (http://www.nln.org/excellence/hallmarks_indicators.htm), and *Excellence Model* (http://www.nln.org/excellence/model/index.htm).

**Sigma Theta Tau International Honor Society of Nursing**
“Sigma Theta Tau International supports and advocates for mentoring as a key component of professional development.” Access a list of resources on this website to learn more about mentoring. http://www.nursingsociety.org/career/cm_mentoring.html
Mentoring Practices Throughout the Career Continuum

**Early Career**

1. How do the nursing unit faculty, administration, and staff establish and maintain a welcoming community that embraces new members?

2. What practices might exclude new faculty members?

3. What practices might discourage new faculty members from fulfilling their roles?

4. How are the needs of the new faculty member identified? How do these needs differ for: a) new faculty members who have formal preparation as an educator versus those who come directly from clinical practice; b) faculty members who function in the full scope of the faculty role versus those who work part time; c) clinical preceptors?

5. What type of organized system of orientation is in place for a) faculty members who are new to the educator role and b) experienced faculty who are new to the institution?

6. How do mentors assist new faculty in understanding, developing and evaluating the teaching, scholarship, and service components of the faculty role?

7. How is the experienced faculty members’ teaching made visible to new teachers?

8. How is new faculty members’ teaching made visible to experienced teachers?

9. What opportunities exist for faculty to come together as a community to talk and listen to one another and to discuss the complexities of the faculty role?

10. What opportunities exist for providing and receiving feedback regarding transition and development in the faculty role?

11. What process is in place to facilitate mentoring of new faculty by a) seasoned faculty and b) others inside and outside their academic community who share their interests?

12. How are the core competencies of nurse educators used to guide the development of new teachers?

13. How do mentors and faculty assess the progress and satisfaction of new faculty members?

14. How can early career faculty members emulate highly regarded faculty?
**Resources for Early Career**


National League for Nursing
The National League for Nursing has published *Core Competencies of Nurse Educators* ([http://www.nln.org/facultydevelopment/pdf/corecompetencies.pdf](http://www.nln.org/facultydevelopment/pdf/corecompetencies.pdf)) to emphasize that the educator role is an advanced practice role. In addition, the references available for preparation for the Certified Nurse Educator® (CNE) Examination, which are available at [http://www.nln.org/facultycertification/information/references.pdf](http://www.nln.org/facultycertification/information/references.pdf), will assist the faculty member new to nursing education.

University of Toronto Faculty of Applied Science and Engineering
This group has a Framework for the Mentoring of New Faculty Members available at [www.ecf.toronto.edu/apsc/research/framework/mentoring.html](http://www.ecf.toronto.edu/apsc/research/framework/mentoring.html)

**Mid-Career**

1. How are the needs of the mid-career faculty member identified?

2. What are the benefits of developing both formal and informal mentor/mentee relationships during mid-career? What are the barriers?

3. What process is in place to facilitate peer mentoring and collaborative or co-mentoring of mid-career faculty by those inside and outside their academic community who share their interests?

4. How are mid-career faculty members supported in their endeavors to identify and test innovative pedagogies, propose new solutions to educational problems, and evolve as educators/scholars in the local, regional, national and international arenas?

5. What support is provided to those transitioning to academic leadership positions?

6. What barriers exist to impede transition to academic leadership positions in the institution?

7. In what ways does the nursing academic community promote mutual sharing, learning and growth?

8. What opportunities exist for faculty to interrupt academic ennui or keep their passion for teaching alive?

**Resources for Mid-Career**


**Late Career**

1. How are the needs of late career/seasoned faculty members identified?

2. How are the mentoring methods used by successful mentors made visible and known to others?

3. How do late career faculty members identify protégés to mentor?

4. Over the course of their careers, how have individuals shared their knowledge, wisdom, experience and values with other members of the nursing faculty?

5. How can late career faculty perpetuate the development of future leaders in nursing and nursing education?

6. How can retired faculty members continue to function as mentors?

7. How is the leadership role of late career educators transparent? How is it passed on to others in the program or institution?
8. What qualities do highly regarded late career faculty members have that others would want to emulate?

**Resources for Late Career**


**Mentoring Related Outcomes**

1. What benefits have been experienced by the mentors and mentees/protégés? How do these benefits contribute to the development of a mentoring community in the nursing unit?

2. In what ways has the work environment changed due to mentoring?

3. How have the mentor’s and mentee’s/protégé’s lives changed?

4. What outcomes and benchmarks are used to determine the effectiveness of mentor/mentee relationships?

5. What outcomes and benchmarks are used to determine the effectiveness of new faculty orientation programs?

6. How are the results of the assessment process used to improve mentoring and orientation programs?

7. How are outcomes communicated in order to enhance mentoring practices throughout nursing education?

8. What outcomes and benchmarks are used to determine the effectiveness of mentoring program theoretical frameworks or conceptual models?

**Resources for Mentoring Related Outcomes**

