Theoretical Basis for Mentoring

A recent study of newly hired tenure-track faculty utilized a cohort approach for their mentoring program. Study participants were assigned a mentor and developing a relationship with the mentor. The theme of navigating mentorship encompassed the process of being mentored and developing a relationship with the mentor. Faculty integration into their role. The theme of navigating mentorship encompassed the process of being mentored and developing a relationship with the mentor.

The theme of socialization to academia was determined based on the researchers' findings that the mentoring relationship promoted novice nurse faculty integration into their role. The theme of socialization to academia was determined based on the researchers' findings that the mentoring relationship promoted novice nurse faculty integration into their role.

Dahlke and colleagues (2021) identified two main themes of socialization to academia and navigating mentorship in their integrative review of studies on mentoring novice nurse faculty. The theme of socialization to academia was that novice nurse faculty who were mentored felt supported and some novice faculty sought advice from seasoned faculty members. The theme of navigating mentorship encompassed the process of being mentored and developing a relationship with the mentor.

Jeffers and Mariani (2017) surveyed novice nurse faculty in both undergraduate and graduate nursing programs to compare career satisfaction and intent to stay in the profession between faculty who were mentored and those who were not. Less than one-third (31%) of respondents were mentored. Although differences in career satisfaction and intent to stay in the profession were not statistically significant, qualitative data showed that faculty who were mentored felt more supported and had more positive experiences.

Mentoring or lack thereof was influential on new faculty's ability to successfully evaluate students. Faculty who did not have a mentor at the beginning of their career described feelings of loneliness and lack of community. Faculty who had positive mentoring experiences are more likely to mentor others (Con, 2013; Nowell, 2014). Mentoring engenders a sense of belonging, support, and professional identity.

In 2006, the NLN Board of Governors released a position statement titled "Mentoring of Nurse Faculty." This position statement not only supports mentoring as a primary strategy for creating healthful work environments, but it also attributes mentoring to facilitating career development of nursing faculty. In a national survey of nursing faculty, 38.8% had high levels of burnout, and 32% of faculty across all age groups within the sample had intentions to leave academic nursing within five years (Yedidia et al., 2014). Transitioning to a full-time faculty role has had high levels of burnout, and 32% of faculty across all age groups within the sample had intentions to leave academic nursing within five years.

In the most recent Future of Nursing (NASEM, 2021) report for 2020-2030, mentoring was labeled as a key strategy for faculty across the career continuum. Mentoring new faculty can mitigate some of the feelings of frustration, isolation, and dissatisfaction they experience (Dunham-Taylor et al., 2008; Jeffers & Mariani, 2017). Peer mentoring new nursing faculty may facilitate a smooth transition into this new career (Spencer, 2017). This toolkit aims to provide updated information and guidance for mentoring nursing faculty.

Shapiro (2018) identified that novice nurse faculty reported they lacked structured guidance and support in their orientation. The theme of socialization to academia was determined based on the researchers' findings that the mentoring relationship promoted novice nurse faculty integration into their role. Shapiro (2018) identified that novice nurse faculty reported they lacked structured guidance and support in their orientation.

Mentoring was identified as the most important aspect of the new position of nurse educators from prelicensure programs. Mentoring was identified as the most important aspect of the new position of nurse educators from prelicensure programs. Poorman and Mastorovich (2017) conducted a qualitative study of nurse educators from prelicensure programs. Mentoring was identified as the most important aspect of the new position of nurse educators from prelicensure programs.

In the "A Call for Nurses to Lead" section in the Future of Nursing 2010-2020 report (IOM, 2011, p.228), it was identified by novice faculty yet mentoring and orientation programs were not provided by the institution. This position statement not only supports mentoring as a primary strategy for creating healthful work environments, but it also attributes mentoring to facilitating career development of nursing faculty. In a national survey of nursing faculty, 38.8% had high levels of burnout, and 32% of faculty across all age groups within the sample had intentions to leave academic nursing within five years.

In the most recent Future of Nursing (NASEM, 2021) report for 2020-2030, mentoring was labeled as a key strategy for faculty across the career continuum. Mentoring new faculty can mitigate some of the feelings of frustration, isolation, and dissatisfaction they experience (Dunham-Taylor et al., 2008; Jeffers & Mariani, 2017). Peer mentoring new nursing faculty may facilitate a smooth transition into this new career (Spencer, 2017). This toolkit aims to provide updated information and guidance for mentoring nursing faculty.
In 2006, the NLN Board of Governors released a position statement titled *Mentoring of Nurse Faculty*. This position statement not only supports mentoring as a primary strategy for creating healthful work environments, but it also attributes mentoring to facilitating career development of nursing faculty. In a 2020-2021 academic year survey on the nurse faculty shortage, 884 schools had a total of 1,492 full-time vacancies; 136 schools did not have vacancies but needed additional faculty (Fang et al., 2020). With the national nurse faculty shortage, institutions of higher education can utilize faculty mentoring as a retention strategy for faculty across the career continuum. Mentoring new faculty can mitigate some of the feelings of frustration, isolation, and dissatisfaction they experience (Dunham-Taylor et al., 2008; Jeffers & Mariani, 2017). Peer mentoring new nursing faculty may facilitate a smooth transition into this new career (Spencer, 2013). This toolkit aims to provide updated information and guidance for mentoring nursing faculty.

**Background and Significance of Mentoring**

In the “A Call for Nurses to Lead” section in the *Future of Nursing 2010-2020* report (IOM, 2011, p.228), mentoring was listed as something experienced nurses should assume with their less experienced peers. In the most recent *Future of Nursing* (NASEM, 2021) report for 2020-2030, mentoring was labeled as a critical aspect of mitigating the loss of knowledge that results when nurses retire from the profession and new less experienced faculty replace them. Failure to meet individual needs of new nursing faculty can contribute to increased stress levels (Lewallen et al., 2003). In a national survey of nursing faculty, 38.8% had high levels of burnout, and 32% of faculty across all age groups within the sample had intentions to leave academic nursing within five years (Yedidia et al., 2014). Transitioning to a full-time faculty role has been described as chaotic, challenging, overwhelming, and tough (Shapiro, 2018). The need for support was identified by novice faculty yet mentoring and orientation programs were not provided by the organization (Shapiro, 2018). Mentoring can provide an avenue for addressing and meeting the needs of each individual faculty member.

Shapiro (2018) identified that novice nurse faculty reported they lacked structured guidance and support from the universities in which they worked. Study participants emphasized the need for both mentorship and clear guidelines about role expectations (Shapiro, 2018). Volkert (2021) selected a seasoned faculty member as a mentoring program facilitator to develop and lead the mentoring program, as well as provide guidance to the mentor-mentee pairs. Poorman and Mastorovich (2017) conducted a qualitative study of nurse educators from prelicensure programs. Mentoring was identified as the most important aspect of learning how to successfully evaluate students. Faculty who did not have a mentor at the beginning of their career described feelings of loneliness and lack of community. Faculty who had positive mentoring experiences are more likely to mentor others (Con, 2013; Nowell, 2014). Mentoring engenders a sense of community. Mentoring or lack thereof was influential on new faculty’s ability to successfully evaluate nursing students.

Jeffers and Mariani (2017) surveyed novice nurse faculty in both undergraduate and graduate nursing programs to compare career satisfaction and intent to stay in the profession between faculty who were mentored and those who were not. Less than one-third (31%) of respondents were mentored. Although the differences in career satisfaction and intent to stay in the profession were not statistically significant between the two groups, Jeffers and Mariani (2017) reported that the qualitative data showed that faculty who were mentored felt supported and some novice faculty sought advice from seasoned faculty.
suggesting that mentoring is recognized as adding value to novice faculty. Dahlke and colleagues (2021) identified two main themes of socialization to academia and navigating mentorship in their integrative review of studies on mentoring novice nurse faculty. The theme of socialization to academia was determined based on the researchers’ findings that the mentoring relationship promoted novice nurse faculty integration into their role. The theme of navigating mentorship encompassed the process of being assigned a mentor and developing a relationship with the mentor.

A recent study of newly hired tenure-track faculty utilized a cohort approach for their mentoring program (Viveiros et al., 2021). Participants described that the cohort mentor model created a safe and non-competitive environment where they could share their resources. Participants had an assigned mentor in addition to having support from the peers in their cohort. Volkert (2021) established a mentoring program for newly hired faculty and faculty preparing for tenure review. Monthly mentoring meetings were held, and mentor-mentee pairs were required to meet on a weekly basis initially, then biweekly. As a result of the mentoring program, 18 scholarly projects, including conference presentations and manuscripts, were completed. In addition, 95% of respondents were either extremely satisfied or satisfied with the mentoring program (Volkert, 2021).

**Theoretical Basis for Mentoring** - application of theories and models to mentoring of novice faculty:

- Novice nurses, according to Benner’s *Novice to Expert* theory (Benner, 1982; 2001), lack experience and must be taught how to address the various scenarios they may experience in their role. According to Benner (1982; 2001), it is experience, in addition to education, that prepares someone to develop. Although Benner’s original theory applied to practicing nurses, these principles may be applied to faculty who are new to the role, as well. Mentorship can help guide a novice nurse faculty member towards becoming competent or proficient through an expert-level faculty’s guidance.

- Jean Watson’s (2007) *10 Caritas Processes* to the principles of mentoring can also be applied: practicing loving-kindness for self and other, being authentically present, strengthening self-awareness, developing and sustaining a caring relationship, encouraging the expression of positive and negative feelings, using presence of self as part of the caring process, taking part in teaching-learning experiences, creating a healing environment, assisting with basic needs, and attending to soul care for oneself and an individual being care for.

- The Nurse Educator Transition Model (NET) (Schoening, 2013) was created from a grounded theory study conducted in the Midwest United States. The four phases of the transition from nurse to nurse educator are: the Anticipatory/Expectation Phase, the Disorientation Phase, the Information-Seeking Phase, and the Identity Formation Phase. The Anticipatory/Expectation Phase is a positive time characterized by the nurse choosing to become an educator and looking forward to making a difference in the nursing profession. The Disorientation Phase begins when the nurse starts working as an educator and has an absence of structure and mentorship, resulting in role ambiguity. The Information Seeking Phase occurs when the novice nurse educator utilizes self-directed, informal and formal information-seeking activities. Lastly, the Identity Formation Phase is characterized by the novice nurse educator integrating the identities of nurse and educator. According to Schoening (2013), mentoring is integral to new faculty orientation.
Implications of Mentoring for Role Development

Shapiro (2018) conducted a study of new full-time educators transitioning into their role and discovered a theme described as “difficulties,” in which the participants described this time of transition as chaotic, challenging, emotional, overwhelming. This emphasizes the need for mentoring new faculty to facilitate their navigation to a new role.

Mentors were interviewed as part of a research study and shared that the main purpose of a mentoring program was to foster academic success of the faculty mentees by helping the mentees fit in, get promotion and tenure, and thrive as a scientist (Swanson et al., 2017). An emphasis was placed on maintaining regular contact as important (Swanson et al., 2017).

Role play can be an example of how a mentor can assist new faculty in becoming proficient in skills like evaluating students especially when they must deliver bad news (Poorman, & Mastorovich, 2017).

The NLN Healthful Work Environment Toolkit addressed nine areas identified as important to healthful work environments based on a national study on faculty role satisfaction. Key considerations for faculty role development and mentorship from the toolkit include, but are not limited to:

- the level of preparedness of faculty for their responsibilities related to teaching, research, and service
- how faculty members are assisted in transitioning from the clinical practice role to the academic role
- ways faculty received feedback and guidance on their performance
- resources available to help develop career plans and achieve goals

Benefits

Mentoring programs have benefits for the mentor, mentee, and university. Positive outcomes included mentors receiving affirmation, mentees’ careers and reputations burgeoning, and universities employing young leaders with increasing contributions (Swanson et al., 2017). Swanson et al. (2017) surveyed mentors from the Robert Wood Johnson Foundation’s Nurse Faculty Scholars program. Almost all of the mentors (98%) surveyed believed the purpose of the program was to foster the academic success of their mentees, including helping mentees get promoted and attain tenure, fit in to the academic community, and encourage work-life balance.

Benefits for the mentee because of mentoring include greater career satisfaction, heightened productivity, better work-life balance, and professional development (Disch, 2018). Mentees who have experienced effective mentoring relationships are able to gain different perspectives, improve their network, and access new resources (Disch, 2018). Benefits of mentoring programs for organizations include an increase in faculty satisfaction and productivity, higher retention rates, and enhanced collaboration between scholars (Disch, 2018).

Fornari and colleagues (2018) used an interprofessional education framework for a faculty program called Mentoring and Professionalism in Training (MAP-IT). The program was designed for mentors in nursing and physician roles to provide them with the skills needed to guide mentees. The participants’ mentoring skills improved from pre-intervention to post-intervention scores. Qualitative data reflected that participants were most impacted by the program’s focus on developing and applying mentoring skills and how it facilitated mentorship.
Challenges

- Poorly chosen mentors can cause excessive stress and possible attrition of new faculty (Dunham-Taylor et al., 2008).

- A disconnect in the relationship between the mentor and mentee can risk the effectiveness of a mentoring program (Swanson et al., 2017).

- In a mentoring study on novice nurse faculty, Jeffers and Mariani (2017) found that some participants who were mentored experienced bullying and incivility from the person assigned as their mentor. These experiences led to feelings of abandonment, stress, and anxiety, and had some participants questioning whether they wanted to continue their career in a faculty role.

- An incompetent or inexperienced mentor may fail to fulfill their duties in the mentoring relationship (Disch, 2018). Mentor coordinators and schools of nursing should consider mid-career faculty as mentors for early career faculty to better align the needs of the mentee with the knowledge of the mentor.

Mentor Program Recommendations

- McIntosh and Thomas (2018) recommended that mentoring programs should include teaching, service, and scholarly activities.

- Essential elements of the mentoring process as described by Dunham-Taylor et al. (2008) include socialization, collaboration, operations orientation, validation, expectations, transformation, reputation/inspiration, documentation, generation, and perfection.

- During the onboarding process, include information about programs and resources available to faculty in all career stages (Chubinskaya & Virdi, 2021). In addition, have new faculty discuss their career goals and mentoring needs with senior leadership (Chubinskaya & Virdi, 2021).

- Rush University recommend various faculty mentoring programs for faculty based on what career stage they were in (Chubinskaya & Virdi, 2021).
  - Early career faculty: attend faculty development bootcamps, continuing education programs, and participate in internal and external professional development workshops.
  - Mid-career faculty continue to receive mentoring and provide resources to achieve their career goals. Invite to internal and external programs that focus on leadership development.
  - Senior Faculty continue to be supported in mentoring, as well as encourage participation in leadership programs at Harvard, Kellogg, and Executive Leadership in Academic Medicine, for example.

- Shapiro (2018) recommended that mentor programs for new faculty should include opportunities for mentees to observe experienced educators teach, to be observed teaching and receive feedback, and to provide professional development opportunities and support, such as resources to help with test question writing.

- Allow for protected time for mentors and a decreased workload for new faculty to become oriented to the role (Dunham-Taylor et al., 2008; Schoening, 2013).
Ideal characteristics of a mentor: having enthusiasm, compassion, and an interest in others. Serve as a career guide with a purpose tailored to the mentee’s needs. Commits time for regular and frequent meetings with mentees; support personal and professional balance; serve as a role model and set high expectations (Swanson et al., 2017).

What to Do and Not Do

Do

Select mentors who are interested in the role and provide them with mentorship training and support;

Match mentors and mentees based on career goals and interests;

Provide resources for both mentors and mentees to make the mentoring relationship more meaningful;

Have a mentor program advisor who can match mentors with mentees and perform “check-ins” to evaluate the effectiveness of the mentoring relationship and provide support;

Give mentors protected time to dedicate to the mentees’ career development;

Ask for feedback and perform evaluations on the mentoring program.

Don’t

Require faculty to be a mentor if they do not want to participate in the program;

Abandon mentors and mentees once the relationship has been established;

Expect mentors to evaluate the mentee.

Resources

American Association of Colleges of Nursing: https://www.aacnnursing.org/Teaching-Resources/Tool-Kits/Transitioning-Clinical-Faculty

Boston University Mentor and Mentee Self-Assessment:
https://www.bu.edu/sph/files/2019/01/Mentor-Worksheet-121718.docx
https://www.bu.edu/sph/files/2016/10/SPH-Faculty-Mentoring-Program_Mentee-self-assessment.docx


Rogers et al. (2020) Mentor/Mentee Responsibility List (Supplemental Digital Content, Table 2): http://links.lww.com/NE/A750

Sigma Theta Tau International Honor Society of Nursing: https://www.sigmamarketchplace.org/nurse-educator-mentorship-program---online-course
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**Definition of Terms:**

**Faculty Career Stages (Baldwin & Blackburn, 1981)**
- Assistant professor within the first three years of full-time teaching
- Assistant professor with more than three years of teaching experience
- Associate professor
- Full professor more than five years from retirement
- Full professor within five years of formal retirement

**Early Career Faculty (Chubinskaya & Virdi, 2021)**
- Instructors and Assistant Professors

**Mid-career Faculty (Chubinskaya & Virdi, 2021)**
- Associate Professors
- Mid-Level Leaders

**Late Career Faculty (Chubinskaya & Virdi, 2021)**
- Senior faculty

**Mentor**
- An experienced person who supports and advises someone with less experience (Cambridge Dictionary, n.d.b)

**Mentee**
- Someone who is given support and advice by a mentor (Cambridge Dictionary, n.d.a)
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