

# Formal Mentoring Program

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## PICO Question

Does the implementation of a formal mentoring program in conjunction with the Nurse Residency Program aide in the retention of bedside nurses?

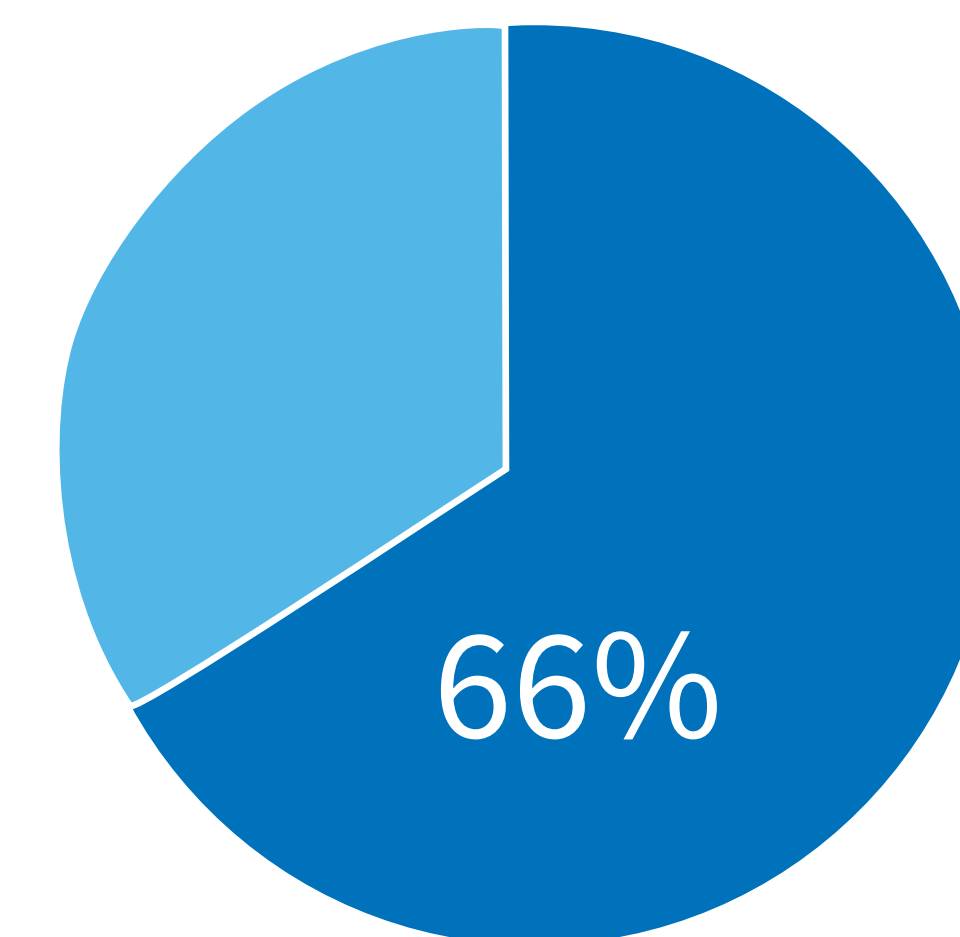
## Background

- Up to 50% of new graduate nurses change jobs during their initial year of employment (Boamah & Laschinger, 2015).
- The average cost of turnover in the first 6 months is estimated to between \$37,700 and \$58,400 (Ackerson & Stiles, 2018).
- Transitional stress in new graduate nurses is lessened by mentorship programs (Hwa Tiew, Koh, Creedy, & Tam, 2017).

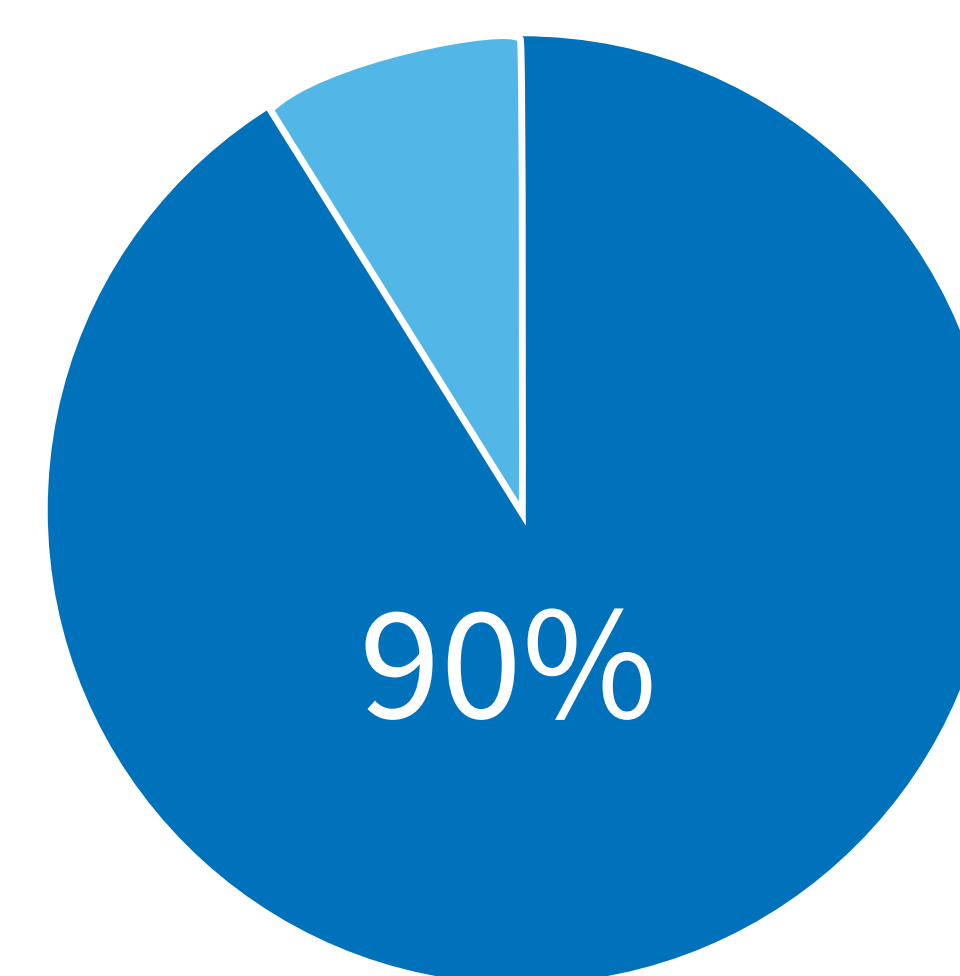
## Framework

- Benner's Theory of Novice to Expert has five distinguished levels of nursing practice which include: Novice, Advanced Beginner, Competent, Proficient, and Expert.
- This theory suggests that education and experiences over time will assist in transitioning the nurse from novice to expert.
- Benner's theory references the seven domains of an expert nurse.
- These seven domains have no beginning or end and the nurses are able to move in and out of each one, depending on what their patient needs due to their expertise level (Benner, 1984)

## Mentor Success



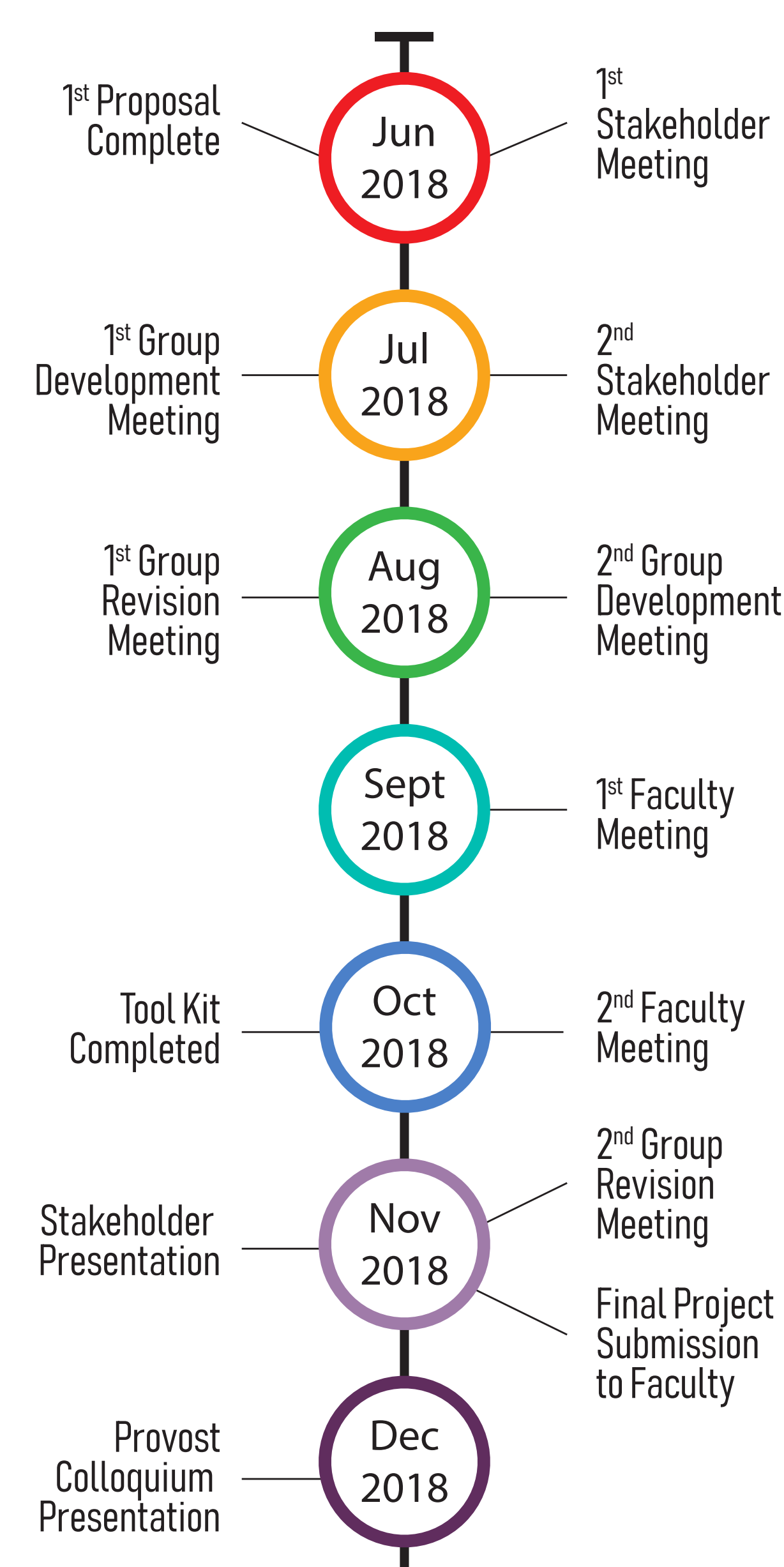
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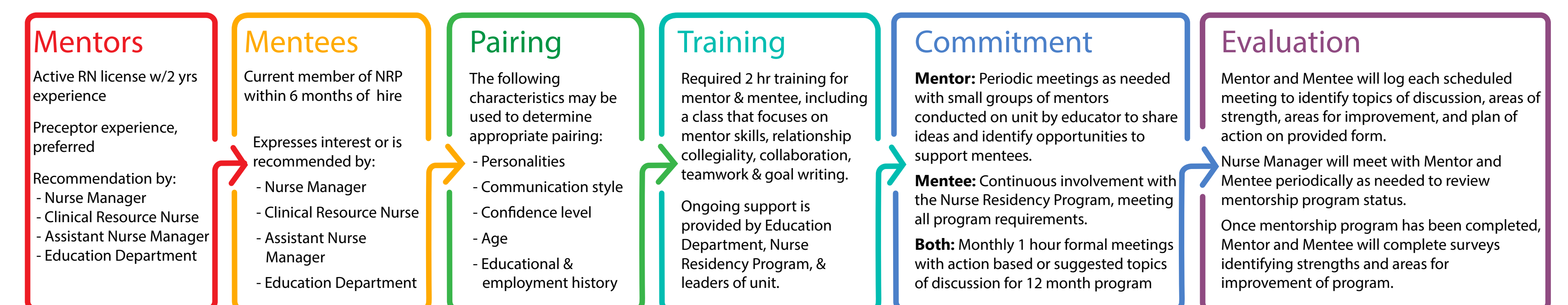
Retention rates increased by 24% by implementing mentor programs

Schroyer, C. C., Zellers, R., & Abraham, S. (2016).

## Timeline



## Mentor Program Process



## PSDA

### Smart Objective #1

**Develop a mentor/mentee toolkit to provide additional resources for the Nurse Residency Program.**

**Plan:** Review literature for best practices to develop a mentor/mentee program. Schedule a meeting with stakeholders to discuss capstone project ideas.

**Do:** Create modules and educational materials for the mentor/mentee toolkit. Present the toolkit and plan to stakeholders.

**Study:** Analyze feedback from the stakeholders.

**Act:** Revise toolkit prior to implementation. Schedule a meeting with stakeholders to review revisions.

### Smart Objective #2

**Present mentor/mentee toolkit to stakeholders on 11/6/18.**

**Plan:** Schedule meeting with stakeholders to receive feedback and input for initial proposal.

**Do:** Revise toolkit based on feedback from stakeholders

**Study:** Identify additional EBP to support a formal mentor program.

**Act:** Present formal mentor toolkit on 11/6/18 to stakeholders.

## Implications

- The increased retention of bedside nurses creates financial savings for organizations (Ackerson & Stiles, 2018).
- Mentor/mentee relationships enhance the probability of not leaving an organization early in one's career (Mills & Mullins, 2008).

## Recommendations

- Offer formal mentor/mentee program to experienced nurses new to the organization.
- Delay start time of program for new graduate nurses to month 12 to create a slight overlap with the NRP.
- Compensation details would need to be determined after acceptance to piloting the program.
- The mentor may be required to have more than one mentee based on the number of new hires during the implementation of the program.
- Mentors and mentees could be assigned outside of their assigned units, potentially involving sister units.