

RESEARCH TO ACTION

Mentorship Projects

Introduction

Evidence suggests that nurses will leave their jobs if they are not satisfied with working conditions (O'Brien-Pallas et al. 2001; Irvine and Evans 1995). Studies show that as many as 66% of new nurses experience burnout, which they associate with unfavourable working conditions. One study reported an alarming 30% turnover rate in the first year of practice for new graduates (Bowles and Candela 2005). More experienced nurses are not immune to the effects of poor work environments and similarly report high levels of burnout, absenteeism and attrition (CFNU 2011; Lasota 2009; Greco et al. 2006; Laschinger 2004).

The nursing literature also suggests that professional development opportunities, including mentorship, can help alleviate nurse burnout and thus promote retention (Ferguson-Paré et al. 2002; Messmer et al. 1995). Among other benefits, new nurses perfect their competencies and grow in confidence, while experienced nurses feel valued, increase their confidence and are more likely to continue nursing (Kilcher and Skettri 2003; Greene and Puetzer 2002; Wright 2002; McGregor 1999).

Mentorship in nursing involves pairing new nurses or new recruits with more experienced nurses. The mentor and protégé develop a personal relationship that provides a safe environment for role modelling, constructive feedback, advice and other positive means aimed at improving nursing competency (CNA 2004; UBC College of Health Disciplines 2004). Preceptorship is closely related to mentorship, but is typically aimed to help acquire competency in a particular area over a more limited period of time (CNA 2004).

Several of the *Research to Action* (RTA) pilot projects implemented mentorship programs. Some of these projects included other components and are thus considered in different sections of this journal. Two mentorship projects will be considered in the present section.

- The Manitoba project implemented a mentorship program and a series of workshops for nurses at three long-term care homes in the Winnipeg Regional Health Authority. Twenty-three nurses (RNs and LPNs) took part in mentorship, including 11 mentors and 12 protégés, while 390 staff attended the six workshops.

- The New Brunswick project implemented a new mentorship program along with its enhanced, online orientation program (both in French). A total of 28 nurses have received mentorship training, and to date, 26 protégés have been mentored.

Knowledge transfer was built into the design of these RTA projects. To this end, partners from projects with mentorship programs shared literature, mentorship guides and other resources, and also visited one another's projects. This collaboration was mutually beneficial and contributed to the creation of effective mentorship programs.

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