

# The Mentorship Program



**All Nations' Healing Hospital  
Fort Qu'Appelle, Saskatchewan  
Anna-Marie Offiah, RN, BScN, MN(c)  
Staff Health/Immunization**



# ospital



# ***Pilot Project Background***

- **Nursing mentorship acknowledged as an organizational need in 2008**
- **Staff initially participated in a mentorship program run by the Regina Qu'Appelle Health Region (RQHR) in April 2008**
- **RQHR mentorship program was cut due to budget restraints in early 2010**



# ***Pilot Project Background***

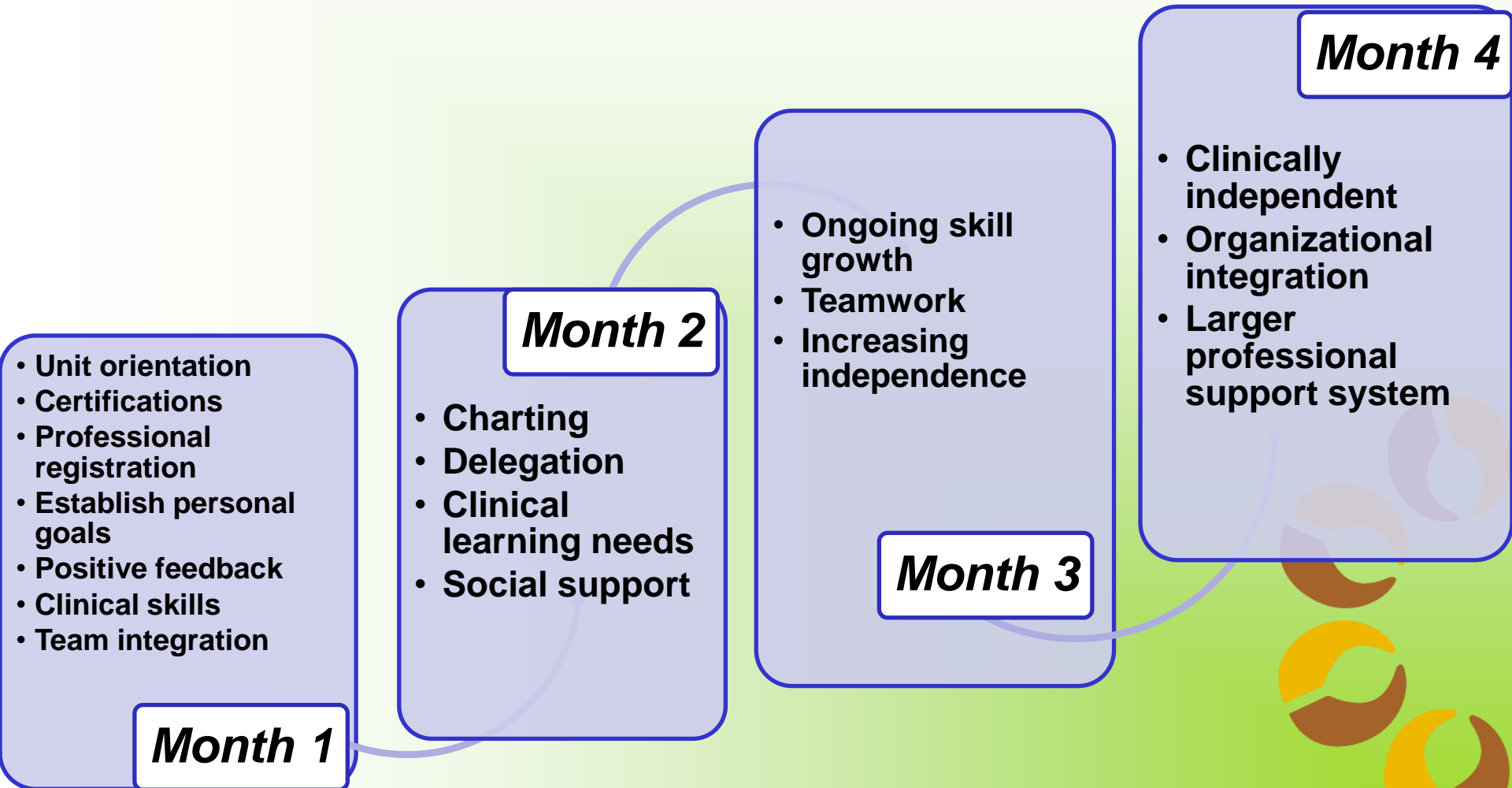
- **Leadership at All Nations' Healing Hospital (ANHH) acknowledged the importance of formalized mentorship for new graduate nurses**
- **ANHH (in partnership with SUN, PSAC, and senior management) joined together to create a facility-specific 4 month mentorship program**
- **New graduate nurses from ALL demographics are welcomed as participants**



# ***Philosophical Framework***



# Conceptual Framework



# ***Mentorship Program Logistics***

- **Every new graduate nurse is part of the mentorship program when they are hired at ANHH**
- **Paired with a mentor from their nursing demographic (RN, LPN, RPN)**
- **Supernumerary position for approximately 4 months**
- **Goal setting and reflective practice evaluation exercises**
- **Meetings held with mentorship coordinator and nurse mentor at certain points in time**



# ***Mentorship Program Pilot Project***

- **Initiated in May 2010 to trial our facility specific mentorship program**
- **2 Licensed Practical Nurses (mentor/protégé team) paired for 4 months May-August 2010**
- **Met with mentor and protégé on a monthly basis for duration of program**
- **Summative evaluation done in Nov 2010**



# ***Key Findings***

## **Benefits of program:**

- Increased NG confidence**
- Nursing skill base**
- Increased ability to prioritize and organize**
- Helped mentor understand NG experience**
- Improved mentor’s teaching ability**
- Learned procedures, techniques, skills together**
- Helped with social isolation**

**“ I don’t know where I would be without it”**

**Tiffany Cyr – New Graduate LPN**



# ***Key Findings***

## **Challenges:**

- Pace of ER/OPD made teaching difficult at times
- Difficult to provide constructive feedback  
“didn’t want to offend the NG”
- Formal conclusion of mentorship period – important
- Mentor noticed absence of the protégé

**“Felt like part of me was missing”**

**Crystal Rokosh – Senior LPN**



# ***Recommendations***

- **Crucial that mentor and protégé are well matched**
- **Informal meeting prior to mentorship program (mentor/protégé)**
- **NG should relax and ask questions**
- **Conclusion of program is important for closure**
- **Start with low acuity, stable patients and gradually move into ER/OPD**
- **Mentor needs rest period after working with NG for 4 months**



# ***Moving Forward***

- **Flexible and responsive to needs of nurses and organization**
- **Commitment to nursing mentorship at ANHH**
- **Currently have RN protégé/mentor pair in program with possibility of 2 pairs starting in April 2011**
- **VERY attractive program for new graduate nurses in Southern Saskatchewan**
- **Plan to evaluate organizational benefits in 2011 (quality of care, focus groups, patient outcomes)**



