

## Mentoring: Helping Nurses Come Together

Latoia Kidd BSN, RN

General Surgical Unit 5B

Princess Anne Hospital



### Background

Today's Healthcare industry continues to look for the best strategies to retain new nurses for as long as possible. According to the ANA (2012) the retention of new nurses is a major challenge. Many retention efforts have been tried such as improving the orientation process, formal preceptor programs, and nursing internships. Such efforts have not been successful in solving the staff retention issue that many healthcare organizations face. The nursing community recognizes the need to establish a workplace environment that promotes professional growth and builds trusting relationships amongst the staff.

A well-organized mentoring program can be an attractive tool to retain nurses. Mentoring programs show positive outcomes such as financial savings and a means to build strong, lasting relationships which are shown to promote staff retention (Burr, Stichler & Poelter, 2011). Current cost estimates to replace and train one RN range from \$82,000 to \$88,000. Therefore, improving RN retention and reducing RN turnover equates to substantial savings.

Reasons new nurses leave (ANA, 2012)

Dissatisfying relationships with peers, managers, and other professional colleagues

Low job satisfaction

Inability to handle the workload

### Goals

Improve and sustain unit level job satisfaction scores to exceed the national mean of The Jackson Group (TJG).

New grads will fully transition into their roles.

Participants will describe an increased level of confidence, supportive relationships on the unit, and a desire to remain on the unit as evidenced by a sustained decrease in the RN unit vacancy rate.

Create a network of professional relationships and support systems, which optimize a welcoming and receptive culture on the unit, as evidenced by achieving RN satisfaction scores which outperform the national mean set by TJG.

### Acknowledgements

The author would like to thank the nurses of 5B at Sentara Princess Anne Hospital. Their participation was 100% voluntary and was key to successful implementation. Thank you to Marybeth Baber MBA, MSN, RN for her support on the project. Special thanks to Berinda Bowdwin BSN, RN 5B Nurse Manager for understanding and supporting the vision and the implementation of the program

### Problem Statement

The RN satisfaction scores for a 24 bed general surgical unit ranked below the national mean in 2011 and 2012. Additionally the unit RN vacancy rate fluctuated since moving into the new hospital in August 2011. In June 2012, the unit continues to show an upward trend in open RN positions.

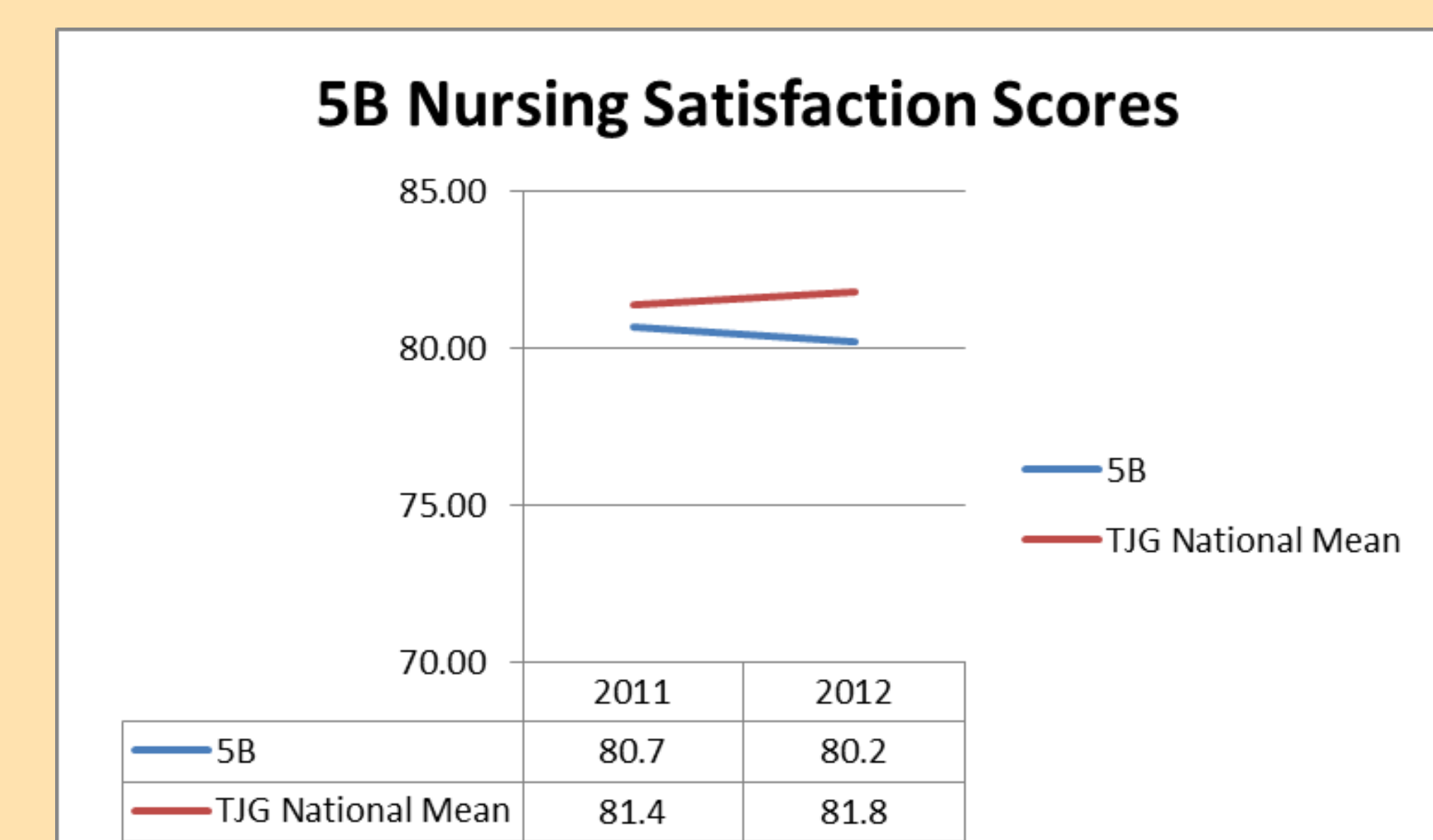
### Method

In the spring of 2013, clinical nurses on 5B, a general surgical unit at Sentara Princess Anne Hospital (SPAH) developed a formal mentorship program using the Academy of Medical-Surgical Nurses (AMSN) mentoring tools. The SPAH program identifies the qualifications, roles and, instructions for the mentor, mentee, and the program coordinator. The program is well organized and includes set time frames for the mentor and mentee to meet along with templates for documenting the meetings. Unlike the preceptor relationship that ends after orientation is over, the formal mentorship relationship lasts for at least one year and may be extended further if both mentor and mentee agree. A program coordinator is in place to assure the program structure is maintained and executed as intended. Evaluations are completed at the beginning, during, and at the end of the program to evaluate the progression of the mentee, the mentor and mentee relationship, as well as the effectiveness of the program.

### Results

Between May and June 2011, RN positions were posted to hire both experienced and new graduates in anticipation of moving into a 24 bed general surgical unit on the new SPAH campus in August of 2011. Between August 2011 and August 2012 unit patient census was below the forecasted figure. In October 2011 the patient census ran above the forecasted figure and remained elevated over the next year. In January of 2013 the unit lost 5 nurses who had been hired to work on the new unit. The nurses were new graduate RNs that indicated they were leaving the unit to work in the ICU and ED. Between April – June 2013 new RN positions were posted to accommodate the sustained higher patient census.

The 5B mentorship program kicked off in June 2013. As of September 2013, nine new nurses are participating in the program and expected to remain on the unit rather than leaving at the one year mark. The expected outcomes from the mentoring program include RN satisfaction Scores that rank above the national mean and improvement in RN unit vacancy rate.



### Conclusion

The clinical nurses on 5B recognized the importance of developing a mentoring program in an effort to improve the units RN satisfaction scores and new graduate retention rates. Mentoring can influence employee retention because it establishes a culture that is attractive and is a tangible way to show employees they are valued and the unit's future depends on them. Since the program was only recently established, final results are pending.

### References

AMSN Mentoring Program. (2012). Retrieved May 20, 2013, from Academy of Medical-Surgical Nurses: [www.amsn.org/professional-development/mentoring](http://www.amsn.org/professional-development/mentoring)  
 Burr, S., Stichler, J., & Poelter, D. (2011). Establishing a Mentoring Program. *AWHONN*, 15, 216-223.  
 Halfe, D. (2011). Job Embeddedness Factors and Retention of Nurses with 1 to 3 years experience. *The Journal of Continuing Education in Nursing*, 468-476.  
*Recruitment and Retention of Nurses*. (n.d.). Retrieved August 16, 2013, from American Nurses Association.

