

# RN Mentor Program

## SIX MONTH FOCUS ON Self-Care Activities

Meeting 1 – Self Assessment Tool in Self-Care

Meeting 2 – Self Assessment Tool Activity

Meeting 3 – Three Good Things

Meeting 4 – Mission and Me Support

Meeting 5 – Healthy Nurse/Healthy Nation

Meeting 6 – Self Care Apps

2021-2022



# Mission Health RN Mentor Program

## Table of Contents

<b>Program Overview.....</b>	<b>3</b>
<b>Program Goals and Objectives.....</b>	<b>4</b>
<b>Program Expectations.....</b>	<b>5</b>
<b>Coordinating Team Description.....</b>	<b>10</b>
<b>Mentor Description.....</b>	<b>12</b>
<b>Mentee Description.....</b>	<b>13</b>
<b>References</b>	
<b>Appendix:</b>	
A. Resident/Mentee Background Information	
B. Mentor Background Information	
C. Mentoring Meeting Agenda	
D. Meeting Timeline Agenda	
E. Adult Learning Principles	
F. Benner's <i>Novice to Expert</i> Theory	
G. Evaluation of Mentoring Program	
H. Evaluation of Relationship with Mentor	
I. Job Satisfaction Scale	
J. Self-Assessment Tool in Self-Care	

# Program Overview

---

## Overview

Substantial evidence supports the position that nurse turnover is costly. Not only are there obvious consequences associated with turnover, such as the cost of advertising, recruiting, subsequent retraining of new staff, and reliance on expensive agency and travel nurses, but there are also the hidden costs of lost productivity, and loss of organizational history from lack of staff continuity. This in turn compromises process improvement initiatives and quality patient care (Cottingham, S., DiBartolo, M., Battistoni, S., Brown, T., 2011).

The nursing shortage, hectic work environment, and statistics on the numbers of new graduate nurses who leave their first nursing position within the first year of employment, were critical factors in the decision of the Academy of Medical-Surgical Nurses (AMSN) to develop a nurse mentoring program. Designed from the principles of adult learning, and Benner's (1984) *Novice to Expert* theory of nursing skill progression (Appendix G), the AMSN program partners experienced (mentors) and new nurses (mentee's), who share a commitment and mutual accountability for goals and outcomes (AMSN, 2012).

Modeled after AMSN's mentoring program concepts, this mentoring program is a six month, structured, evidence based framework that promotes the growth of knowledge, caring, and confidence of the mentee. The program contains guidelines and tools to assist the mentor, mentee, and site coordinator throughout the relationship period. The program can be used to compliment the newly licensed registered nurse's participation in the RN Residency Program and enhance retention as well as the experienced nurse who is interested in professional development opportunities, needs additional support for workplace issues, has encountered barriers or incidents in their career leading to compassion fatigue, burnout, or low job satisfaction.

# Program Goals and Objectives

---

## GOALS

The mentor program goals are the foundation for achieving the program objectives:

- Develop supportive and encouraging relationships.
- Guide nurse in their professional, personal, and interpersonal growth.
- Promote mutuality, and sharing based on the needs of the mentor and mentee.
- Communicate information concerning expectations, learning opportunities, and stressors. (AMSN, 2012).

## OBJECTIVES

- Increase nurse satisfaction for role and responsibilities.
- Increase nurse retention.
- Development/growth of professional nurse characteristics:
  - Interpersonal skills (communication, feedback, assertiveness, conflict management).
  - Management skills (delegation, motivation, team building, self-care, networking, organizational culture).
  - Organizational skills (project management, goal setting, and time management).

# Program Expectations

---

## **CONFIDENTIALITY**

It is important to note that the relationship between the mentor and mentee is a confidential, safe place for the mentee to discuss concerns. Mentees may choose to disclose information, but the mentors should not disclose any information, with the exception of violation of hospital/agency policy, or if the mentee is not reliable in keeping appointments, or fails to participate in some other manner.

## **MATCHING MENTORS AND MENTEES**

Providing a good fit between the mentee and mentor is very important to Mission Health. A good fit occurs when mentors are caring, compassionate, genuine and willing to disclose information about themselves and what they know. Of equal importance is the mentee's ability to accept feedback, and be willing to learn more about themselves. Considerations for effective matching include skills, expertise, availability, learning/facilitation style, experience, interpersonal skills and behavior, professional interest, education, personality, and accessibility (AMSN, 2012).

Newly licensed Registered Nurses participating in the RN Residency will be invited to participate in the program and a coordinating team will match the mentor and mentee, and a meeting will be arranged for the initial introductions and program review.

## **MENTOR PREPARATION**

RNs interested in serving as mentors will review the RN Mentor Powerpoint and read selected literature as defined by the RN Mentor Committee about the role of the mentor and themes that they might encounter as they build the mentor/mentee relationship, and the nuances of the RN Mentor Program. Mentors serve as career coaches by discussing professional development opportunities (certification, advancing education) as well as the ANA's Health Nurse Initiatives (Healthy Weight, Healthy Sleep, Bullying & Workplace Violence, Burnout/Compassion Fatigue, Women's Health, Safe Patient Handling & Mobility, Needle Safety, and Environmental Health), work-life balance, and self-care.

## **MENTOR-MENTEE MEETINGS**

The purpose for the meetings is to provide an environment of open communication, where any and all aspects of the mentee's transition to their new position may be discussed. The mentee is encouraged to share

their thoughts, issues and questions openly. Mentors should use open-ended questions to develop further conversation.

The Mission Health Mentor Program requires that some of the meetings occur face-to-face, however other meetings may be facilitated by phone, video chat, or other means of communication, mutually agreed upon by the mentor and mentee.

Prior to the first meeting, the mentee will receive a welcome letter (Appendix A), and a mentee background information form (Appendix C). The mentee should complete the form and provide it to their mentor at the first meeting. Mentors will also complete a background information form (Appendix C) and provide it to their mentee at the first meeting.

**MEETING PLAN** (see Meeting Timeline Record, Appendix E).

**Monthly Meeting #1** Face-to-face within two weeks from mentor/mentee match. A welcome letter is provided. Background sheets are exchanged, program goals are identified.

**Meeting #2 -5:** Monthly meetings baseline on venue of the team's choice. This may be prior to or following work, meeting outside at a coffee shop. Teams have shared hobbies, hiked in the woods, or been creative in the venue they met at.

**Meeting #6:** Face-to-face meeting. Mentee completes Mentor Program evaluation, and Relationship with Mentor evaluation (see Appendix H and I). Evaluations are submitted by mentee to the Director of Nursing Professional Practice or team leader in sealed envelope. The Mentor/Mentee relationship may then be concluded.

**Weekly Check Ins:** The Mentor reaches out for check-ins by text, email, phone call weekly.

The Mentor will submit a completed meeting timeline to the Coordinating Committee through the Magnet Administrative Assistant for tracking purposes

## **MENTOR TIPS FOR THE FIRST MEETING**

The first meeting sets the tone of the relationship.

- Be friendly, welcoming and encouraging.
- Present the mentoring relationship as a growth and development opportunity. Use adult learning principles (Appendix F).
- Ask about their short term and long term goals.
- Ask about their immediate needs for the next few weeks/months.
- Ask about the mentee's experiences during their first week.
- Share something from your first week/month/year as a new nurse.
- Clarify your role. Describe why you are investing this time as a mentor.
- Encourage your mentee to ask questions about the mentoring program.
- Remind your mentee of her/his responsibility in keeping appointments.
- Discuss locations and time to meet that appeal to both of you (i.e. walk outside, lunch, etc.) Arrive on time.
- Discuss the confidential basis of the mentoring relationship. (AMSN, 2012).

## **MENTOR TIPS FOR SUBSEQUENT MEETINGS**

- Listed below are tips that mentors can use to facilitate subsequent meetings:
- Spend the first few minutes developing the relationship by asking how things are going, share something about yourself.
- Review the Mentor Program Timeline Agenda Checklist.
- Ask about specific behaviors/characteristics of the prior role models that helped most. What did the mentee feel they wanted to emulate but have not been able to? What gets in the way?
- Share some challenges you've had and describe how you handled them.
- Demonstrate exemplary role model behavior.
- Be interested. Don't rush
- Recognize and encourage potential.
- Meet in an environment where there will be few, if any, interruptions.
- Be clear about the necessity of meeting on a regular basis, even if no issues are identified.

(AMSN, 2012)

## **Mentor Program Coordinating Committee Description**

---

The Mentor Program Coordinating Committee is committed to and responsible for overseeing all site-based activities of the mentoring program. It consists of Nursing Professional Development Specialists, Director of Nursing Professional Development, RN Residency Coordinator, Magnet Administrative Assistant, a Nurse Manager, a Nursing Unit Supervisor, and two Clinical Nurses.

### **QUALIFICATIONS**

- Possess organizational skills and a working knowledge of the organization.
- Is familiar with group process.
- Is committed to improving retention of the first year nurse graduates and other nurses transitioning to new roles.

### **RESPONSIBILITIES**

- Familiarizes self with all the components of the Mission Health Mentoring Program.
- Assists in recruiting mentors and mentees using the program guidelines.
- Oversees the creation of mentor/mentee teams if not already paired.
- Facilitates an orientation for mentors and mentees. Reviews responsibilities with both mentor and mentee.
- Ensures timelines for periodic reviews of the mentoring progress.
- Counsels or disbands dysfunctional or nonproductive relationships and reassigns as necessary.
- Maintains the confidentiality of information shared between the site coordinator, mentors and mentees.
- As needed, provide an orientation to the mentoring program. Include the orientation for the mentor and mentee on the following topics:
  - An overview of the mentoring program, forms and materials.
  - Roles and responsibilities.
  - The evaluation (s) process and timelines.
  - Opportunity for questions and concerns.
- Collect and compile evaluation (s) data and provide a comprehensive evaluation of the mentor program initiatives/objectives, along with any future program recommendations.

## Mentee Role Description

---

The mentee is a new nurse beginning her/his first job as a professional nurse, or a nurse who is transitioning to a new role.

### QUALIFICATIONS

- A novice in the professional nurse role with untested judgement and organizational skills.
- Is flexible.
- Is willing to attend scheduled meetings with the mentor on a regular basis.
- Is able to accept constructive criticism as well as feedback and encouragement.

### RESPONSIBILITIES

- Communicates effectively with the mentor and Site Coordinator.
- Agrees to complete all materials, self-assessment tools, and required evaluation forms in a timely manner.
- Coordinates meeting times, locations, dates with mentor, and develops meeting agenda's.
- Attends mentor/mentee meetings timely and as scheduled.

## Mentor Role Description

---

The mentor is an experienced nurse, committed to helping/supporting the mentee's transition to their new professional nurse position.

### QUALIFICATIONS

- By appointment with endorsement of leader.
- At least three years of experience in nursing with a BSN degree or actively pursuing a BSN. National certification preferred.
- Proficient or expert level skill in communication.
- Has demonstrated an understanding of the science of nursing and nursing standards and principles.
- Commits a minimum of a one-year commitment to the mentoring relationship/program.
- Is successful in building caring relationships.
- Has a positive attitude.
- Performs well under stress and is even tempered.
- Demonstrates proficient or expert professional practice.

### RESPONSIBILITIES

- Keeps written records as required for program data collection.
- Conducts consistent scheduled meetings with the mentee to set goals, provide feedback and evaluate progress.
- Serves as an immediate resource person.
- Provides moral support, guidance and advice.
- Encourages the mentee to develop their own vision for the future.

## References

---

- (AMSN) Academy of Medical-Surgical Nurses, (2012). *AMNS Mentoring Program: Mentee Guide*. Pitman, New Jersey. Retrieved from [www.medsurgenurse.org](http://www.medsurgenurse.org).
- Benner, P. (1984). *From novice to expert: Excellence and power in clinical Nursing practice*. Menlo Park, CA: Addison-Wesley Publishing Company.
- Cohen, N. (1995). *Mentoring adult learners: A guide for educators and trainers*. Malabar, FL: Krieger Publishing Company.
- Cottingham, S., DiBartolo, M., Battistoni, S., Brown, T. (2011). *Partners in nursing: A mentoring initiative to enhance nursing retention*. *Nursing Education Perspectives*, (July/August); 32 (4), 250-255.
- Hess, D., Dossey, B., Southard, M., Luck, S., Shaub, B. & Bark, L. (2013). *The art and science of nurse coaching: The provider's guide to coaching scope and competencies*. Silver Spring, MD: ANA
- Knowles, M. (1980). *The modern practice of adult education: From pedagogy to andragogy*. Englewood Cliffs, NJ; Cambridge Adult Education.
- Lindeman, E. (1961). *The meaning of adult education*. Eugene, OR: Harvest House, LTD.
- Mentor, (2009). *Elements of effective practice for mentoring*, 3<sup>rd</sup> Ed. Alexandria, VA. Retrieved from: [www.mentoring.org](http://www.mentoring.org).
- Rogers, C. (1979). *Freedom to learn*. Columbus, OH: Charles E. Merrill, Publishing Company.

## Welcome Letter to Mentee

---

We are so happy you are a member of the Mission Health family. In order to provide support and guidance, further your professional development and provide resource to you for work-life balance you have indicated an interest in participating in the Mission Health RN Mentor Program. Mentors are not preceptors that help you with direct patient care or learning your job. Mentors are supportive, experienced nurses that can help you develop professionally, listen to your concerns, and provide advice about how to handle difficult situations that you may be exposed to as a nurse or in the course of your work setting.

Please fill out the *Mentee Background Information* form. You will be matched with a mentor outside your practice area that will fill out a *Mentor Background Information* form as well. Following a match facilitated by the RN Mentor Committee, you will be invited to attend an information session and your mentor will be in contact with you to set up a face-to-face meeting that should occur within the following two weeks. Check your email regularly. At the first meeting, you will share your information forms and personal information. This will be a great “get to know you” meeting.

## Mentee Background Information

---

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

**EDUCATION:** \_\_\_\_\_

Are you currently in school (if so, please list courses you are taking): \_\_\_\_\_

---

Date of Graduation: \_\_\_\_\_

Name of Institution(s): \_\_\_\_\_

Highest Nursing Degree: \_\_\_\_\_

**EXPERIENCE:** Current work area: \_\_\_\_\_

Background: \_\_\_\_\_

What areas of nursing interest you the most: \_\_\_\_\_

**PERSONAL:**

Hobbies/Interests: \_\_\_\_\_

Favorite Food(s): \_\_\_\_\_

Favorite books/movies: \_\_\_\_\_

What city do you live in: \_\_\_\_\_

Where did you grow up: \_\_\_\_\_

How do you celebrate? \_\_\_\_\_

How do you recharge? \_\_\_\_\_

Other interesting facts about you: \_\_\_\_\_

**Best days and times to meet:** \_\_\_\_\_

**By signing this the mentee agrees to be available for 12 months unless mutually agreed by both parties.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Leader validation: \_\_\_\_\_ Date: \_\_\_\_\_

## Mentor Background Information

---

Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

**EDUCATION:** \_\_\_\_\_

Are you currently in school (if so, please list courses you are taking): \_\_\_\_\_

---

**Date of Graduation:** \_\_\_\_\_

**Name of Institution(s):** \_\_\_\_\_

Highest Nursing Degree: \_\_\_\_\_

Current Certification(s): \_\_\_\_\_

**EXPERIENCE:** Current work area and role:

\_\_\_\_\_

Background: \_\_\_\_\_

What areas of nursing interest you the most: \_\_\_\_\_

**PERSONAL:**

Hobbies/Interests: \_\_\_\_\_

Favorite Food(s): \_\_\_\_\_

Favorite books/movies: \_\_\_\_\_

What city do you live in: \_\_\_\_\_

Where did you grow up: \_\_\_\_\_

How do you celebrate? \_\_\_\_\_

How do you recharge? \_\_\_\_\_

Other interesting facts about you: \_\_\_\_\_

**Best days and times to meet:** \_\_\_\_\_

**By signing this the mentor agrees to be available for 12 months unless mutually agreed by both parties.**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Leader validation:** \_\_\_\_\_ **Date:** \_\_\_\_\_

---

Mentoring Meeting Agenda

Date: \_\_\_\_\_

The following topics are suggested for your initial meeting with open ended questions that create greater insight, clarity, and/or new possibilities and learning.

1. What are your goals for professional development and lifelong learning?

---

---

---

2. How satisfied is the mentee with their role? Practice area? What strengths do they bring to their role?

---

---

---

3. What opportunities for self-care are you successful with? Where would you want to improve?

---

---

---

4. Tentative goals for the next meeting:

---

---

---

Next Meeting Date and Time: \_\_\_\_\_

(To be completed by the Mentor)

Mentor Name: \_\_\_\_\_ Mentee Name: \_\_\_\_\_

Start Date: \_\_\_\_\_

**MEETING #1 (within 1 month of start date)      DATE COMPLETED: \_\_\_\_\_**

- Give/send Welcome Letter.
- Mentor meets with mentee to exchange background information.
- Discuss program and personal goals, program agenda form, evaluation forms.
- Mentor sends weekly touch points (text/email/call) to mentee
- Establish schedule for future meetings and best method for contacting each other.
- Complete **Self-Assessment Tool Appendix J** and share/discuss

**MEETING #2 (within 2 months of start date)      DATE COMPLETED: \_\_\_\_\_**

- Mentor sends weekly touch points (text/email/call) to mentee
- Discuss adjustment to new job.
- Discuss mentoring concerns, immediate short-term needs.
- Discuss agenda.
- Discuss identified strengths and weaknesses.
- Plan one complete one self-care activity from the **Self-Assessment Tool, Appendix I**

**MEETING #3 (within 3 months from start date)      DATE COMPLETED: \_\_\_\_\_**

- Mentor sends weekly touch points (text/email/call) to mentee
- Discuss Agenda
- Discuss job satisfaction, concerns, and weaknesses.
- Identify needs.
- **Read Three Good Things: Build Resilience and Improve Well-Being**, Paige Roberts found at <https://www.myamericannurse.com/wp-content/uploads/2018/12/ant12-3-good-things-1207.pdf>
- Discuss article and share ideas for putting to use

**MEETING #4 (within 4 mos. from start date)****DATE COMPLETED:** \_\_\_\_\_

- Mentor sends weekly touch points (text/email/call) to mentee
- Discuss Agenda, concerns, and needs.
- Discuss strengths and newly acquired skills.
- Review **Mission and Me page Support and Resources for Team Members**
  - <https://missionandme.mission-health.org/scope/2020/03/30/support-and-resources-for-our-team-members-during-covid-19/>
  - Choose one activity and incorporate into a self care routine and discuss

**MEETING #5 (within 5 months from start date)****DATE COMPLETED:** \_\_\_\_\_

- Mentor sends weekly touch points (text/email/call) to mentee
- Discuss Agenda, concerns, and needs.
- Discuss strengths and newly acquired skills.
- **Healthy Nurse/Health Nation Grand Challenge**
  - Register to join “Healthy Nurse, Healthy Nation, Connect”  
<https://www.healthynursehealthynation.org/>
  - Pick your area of focus, make a commitment, and participate in healthy challenges
  - Connect with each other for support, advice and share success

**MEETING #6 (within 6 months from start date)****DATE COMPLETED:** \_\_\_\_\_

- Mentor sends weekly touch points (text/email/call) to mentee
- Discuss Agenda, concerns, and needs.
- Download one **Self-Care App** to your phone ie: CALM, Headspace, Reflectly, Shine, Sleep Cycle
  - Other suggestion <https://minimalism.co/articles/self-care-apps>
- Mentee completes Job Satisfaction Scale; Mentor and Mentee complete evaluations and submit confidentially to Shelli.Martineau@HCAHealthcare.com in a sealed envelope.

## ADULT LEARNING PRINCIPLES

---

The mentoring relationship involves the mentee as an adult learner. The astute mentor is knowledgeable of adult learning principles and applies them to the mentoring relationship.

- Adults need time to learn at their own pace. Adults have unlimited potential for growth and development. Moving from the simple to the complex gives the adult a sense of achievement.
- Learning involves moving from dependency on the teacher/facilitator to increasing self-directedness, but at different rates for different people.
- The learning environment is characterized by physical comfort, mutual respect and trust, freedom of expression, and acceptance of differences.
- Learning must be based on learner's needs. Facilitators help learners diagnose the gap between what they know and what they need to know or do.
- Adults are motivated by the desire to immediately use or apply their new knowledge or skills. When learners need to do something new, they must have a "readiness to learn". This is what is meant by the "most teachable moment".
- Adults are responsible for their own learning and take an active role in the learning process.
- Adult education is learner-centered. It begins with the learners and where they are, and takes in to consideration what will be meaningful for them.
- Adults are what they have done. They have a deep investment in the value of their life experiences. Adult education includes and builds upon the life experiences of the learners.
- Learning should begin at a level equal to the learner's comprehension level.
- Adult education is concerned with the development of the whole person, including their attitudes, feelings, and emotions.
- Learning can happen anywhere, and is enhanced by repetition and "doing".
- A positive or negative self-concept can promote or inhibit learning respectively.
- Stress reduces one's ability to learn.
- Learners need to know how they are progressing. This is accomplished through self-evaluation and feedback from others.

(AMSN, 2012; Cohen, 1995; Knowles, 1980; Lindeman, 1961; Rogers, 1979)

**Advanced Beginner**

Advanced beginners demonstrate marginally acceptable performance. They have encountered enough real situations to realize there is recurrent meaning in the components of the situation. Nurses at the advanced beginner stage need assistance in determining priorities because they cannot readily sort out what is significant in complex situations. Their work centers on organizing and completing tasks. They become anxious when they feel they are losing control of the task environment. They are concerned with the current situation with little regard for the past or future. They rely on protocols or procedures to guide their actions and believe the protocols are appropriate for all contexts. Advanced beginners are often working at the edges of their safety and knowledge. They are fully responsible for their actions, while at the same time feel largely dependent on more experienced individuals such as the mentor. Guidelines and applicable examples are helpful to them.

**Competent**

Nurses at the competent stage feel they have mastered their role, and begin to see their role in terms of long-range plans or goals. They focus their energy on accomplishing what they planned and controlling the activities and events in the situation. They are able to differentiate between important and insignificant components of a situation. These nurses are able to set priorities. They feel responsible for and emotionally attached to the decisions they make. Decisions are analytical and they are invested in the outcome. Successful outcomes can be very satisfying, while unsuccessful outcomes are not easily forgotten. Nurses at this stage are emotionally invested in their decisions, so it is important to encourage them to talk about their feelings and anxieties and verbalize the questions they have. This stage is characterized by not needing help, putting tasks in order, and planning based on goals and predictions. The nurses' ability to view the whole situation may be hampered by their emphasis on structuring their work by specific plans and goals. They may lack speed and flexibility.

**Proficient**

This stage is characterized by the ability to recognize the big picture and think systematically. Proficient nurses are guided by their experience to anticipate what to expect in a given situation and how to modify their plans to respond to these events. Systems thinking improves their decision making ability. Proficient nurses are able to organize and analyze, interpret and understand, and manipulate the environment to

respond to the situation at hand. Their actions are now ordered by the situation as it unfolds rather than by preset plans. Proficient nurses read situations well and are able to set priorities. Leaving things out is no longer a worry because they are confident in their ability to notice important things and filter out those that are unimportant.

### **Expert**

Not all individuals will attain the expert level of practice. This may be a matter of choice or a matter of ability. Experts function much differently from the other stages of development. For the expert, important aspects of a situation stand out, and they are able to readily dismiss those that are unimportant. They know when they have a firm grasp of the situation and when they don't. Expert nurses are often great historians and can explain why decisions were made in the past. They are often a rich source of information and quite capable of providing sound advice. They possess a sense of intuition about certain situations as a result of extensive experience. Experts are quick and skillful in their actions. They zero in on problems and are fluid, flexible, and highly proficient. They are able to manage a variety of tasks or activities at the same time. They display a sense of calmness and control. Experts selectively filter information and pass on the important aspects to appropriate individuals. They no longer rely on rules to govern their practice. It is often difficult for experts to explain the thinking process they use in reaching a decision. They do not think in steps or increments. Often, the expert nurse is not the best teacher for the novice because it is difficult for the expert to explain decisions or actions in enough detail for the novice to grasp and learn. (Benner, 1984).

**Appendix G Evaluation of Mission Health Mentoring Program**

**EVALUATION OF .....MENTORING PROGRAM (for mentee)**

**Mentee:** \_\_\_\_\_

**Date:** \_\_\_\_\_

To what degree has your mentor.....	Not at all 1	A little 2	Somewhat 3	Quite a bit 4	Very much 5	N/A 6
Been available to talk/meet with you when you wanted to talk/meet?						
Talked with you about professional development?						
Allowed you to openly express your feelings about your current work?						
Been non-judgmental when listening to your evaluation of the workplace?						
Enhanced your ability to handle difficult patient situations?						
Provided advice on ways to handle difficult situations with coworkers?						
Provided advice on ways to handle challenging situations with physicians?						
Provided advice on how to handle difficult situations with your unit manager?						
Been a role model for you?						
Been helpful in transitioning you to your new roles as an RN?						
This mentoring program satisfied your needs.						
Additional comments/suggestions to make our program better:						

## Appendix H Evaluation of Mission Health Relationship with Mentor

### EVALUATION OF RELATIONSHIP WITH MENTOR (for mentee to complete at 3, 9 and 12 mos.)

Mentee: \_\_\_\_\_

Date: \_\_\_\_\_

*Complete this survey by placing and "X" in the square that best describes your perception about your relationship with your mentor. Return in a sealed envelope to the Site Coordinator or Director of Education.*

To what degree has your mentor.....	Not at all 1	A little 2	Somewhat 3	Quite a bit 4	Very much 5	N/A 6
Been available to talk/meet with you when you wanted to talk/meet?						
Talked with you about professional development?						
Discussed with you ways to handle difficult situations with physicians?						
Allowed you to openly express your feelings about your current work environment?						
Enhanced your ability to handle difficult patient situations?						
Discussed with you ways to handle difficult situations with coworkers?						
Expressed confidence in you and your abilities as a nurse?						
Provided advice on how to handle difficult situations with your unit manager?						
Been a role model for you?						
Been helpful in transitioning you to your new roles as an RN?						
Demonstrated that she/he cared about you?						
Fostered your independence as a nurse?						
Guided you in assessing your immediate learning needs?						
Offered you insight into human behavior in the workplace?						
Guided you in assessing your future potential?						
Advocated for you in the workplace?						

Appendix I

## Job Satisfaction Scale

Job Satisfaction Scale (for mentee to complete at 6 mos.)

Mentee: \_\_\_\_\_

Date: \_\_\_\_\_

*Complete this survey by placing and "X" in the square that best describes your personal feelings about the aspects of your job. Return in a sealed envelope to the Site Coordinator or Director of Education.*

ITEM.....	Low 1	Fair 2	Average 3	Above Average 4	Extremely High 5
Morale of my co-workers is good.					
I have an appropriate level of responsibility.					
I have plenty of opportunities to use my skills.					
I have the ability to influence decision making about patient care.					
I have autonomy in my practice.					
My unit is staffed appropriately for the workload.					
I receive recognition for work performed.					
I have opportunities for professional development.					
I have developed professional relationships with co-workers.					
I have a good professional relationship with my unit manager.					
I enjoy my working conditions.					
I feel like our hospital provides excellent patient care.					
I am treated with respect.					
Hospital follows core values.					
I enjoy my work.					
There is variety and complexity in my work.					
Additional Comments:					

# SELF-ASSESSMENT TOOL: SELF-CARE\*

## ▶ ABOUT THIS ACTIVITY

- 🕒 **Time:** 15 minutes
- ➔ **Objectives:** By the end of this session, participants will be able to:
  - Use a self-assessment tool to rate their physical, psychological, emotional, spiritual, and workplace self-care
- ★ **Training Methods:** Individual Activity, Large Group Discussion
- ✓ **In This Activity You Will...**
  - Facilitate participant completion of a self-care assessment tool (7 minutes)
  - Lead a group discussion on self-care strategies or activities (8 minutes)
- ✂ **Materials:**
  - Handout- Self-Assessment Tool: Self-Care
- 🔪 **Preparation:**
  - Complete the self-assessment tool yourself and think about your responses to the follow-up questions listed below.
  - Make enough copies of the self-assessment tool for each participant.

## Instructions

1. Distribute a copy of the self-assessment tool to each participant and request that everyone takes about five to seven minutes to complete it. Emphasize that this is a representative list of self-care activities, not an all-inclusive list. In addition, inform participants that no person is expected to be doing all of the things mentioned on the list. This tool simply provides a snapshot of a person's current attention to personal wellness.
2. Once participants have completed the self-assessment, ask them to discuss the ideas and issues it raised. You can ask participants to discuss this in pairs, in small groups, or in the entire group. If you wish, you may prompt the participants with questions such as the following:
  - Were there any surprises? Did the assessment present any new ideas that you hadn't thought of before?
  - Which activity ideas seem like they would be more of a burden than a benefit to you?
  - What are you already doing to practice self-care in the physical, psychological, emotional, spiritual, and workplace realms?
  - Of the activities you are not doing now, which particularly sparks your interest? How might you incorporate them into your life sometime in the future?
  - What is one activity or practice you would like to "try on for size" starting now or as soon as possible?

## Summary

Wrap up session.

\* This module is part of the online toolkit Building Blocks to Peer Success. For more information, visit [http://www.hdwg.org/peer\\_center/training\\_toolkit](http://www.hdwg.org/peer_center/training_toolkit). This module comes from A Kaleidoscope of Care: Responding to the Challenges of HIV and Substance Use, 2004, <http://www.hdwg.org/kaleidoscope>.

# SELF-ASSESSMENT TOOL: SELF-CARE

## SELF-ASSESSMENT TOOL: SELF-CARE

Rate yourself, using the numerical scale below, to fill in the empty boxes:

5 = Frequently, 4 = Occasionally, 3 = Sometimes, 2 = Never, 1 = It never even occurred to me

How often do you do the following activities?

### Physical Self-Care

- Eat regularly (that is, breakfast, lunch, and dinner)
- Eat healthfully
- Exercise or go to the gym
- Lift weights
- Practice martial arts
- Get regular medical care for prevention
- Get medical care when needed
- Take time off when you're sick
- Get massages or other body work
- Do physical activity that is fun for you
- Take time to be sexual
- Get enough sleep
- Wear clothes you like
- Take vacations
- Take day trips or mini-vacations
- Get away from stressful technology such as pagers, faxes, telephones, and e mail
- Other: \_\_\_\_\_

### Psychological Self-Care

- Make time for self-reflection
- Go to see a psychotherapist or counselor
- Write in a journal
- Read literature unrelated to work
- Do something at which you are a beginner
- Take a step to decrease stress in your life
- Notice your inner experience – your dreams, thoughts, imagery, and feelings
- Let others know different aspects of you
- Engage your intelligence in a new area – go to an art museum, performance, sports event, exhibit, or other cultural event
- Practice receiving from others
- Be curious
- Say no to extra responsibilities sometimes
- Spend time outdoors
- Other: \_\_\_\_\_

# SELF-ASSESSMENT TOOL: SELF-CARE

## SELF-ASSESSMENT TOOL: SELF-CARE (CONT.)

### Emotional Self-Care

- Spend time with others whose company you enjoy
- Stay in contact with important people in your life
- Treat yourself kindly (for example, by using supportive inner dialogue or self talk)
- Feel proud of yourself
- Reread favorite books and see favorite movies again
- Identify comforting activities, objects, people, relationships, and places, and seek them out
- Allow yourself to cry
- Find things that make you laugh
- Express your outrage in a constructive way
- Play with children
- Other: \_\_\_\_\_

### Spiritual Self-Care

- Make time for prayer, meditation, and reflection
- Spend time in nature
- Participate in a spiritual gathering, community, or group
- Be open to inspiration
- Cherish your optimism and hope
- Be aware of intangible (nonmaterial) aspects of life
- Be open to mystery and not-knowing
- Identify what is meaningful to you and notice its place in your life
- Sing
- Express gratitude
- Celebrate milestones with rituals that are meaningful to you
- Remember and memorialize loved ones who are dead
- Nurture others
- Have awe ful experiences
- Contribute to or participate in the causes you believe in
- Read inspirational literature
- Listen to inspiring music
- Other: \_\_\_\_\_

# SELF-ASSESSMENT TOOL: SELF-CARE

## SESSION HANDOUT (cont.)

### SELF-ASSESSMENT TOOL: SELF-CARE (CONT.)

#### Workplace/Professional Self-Care

- Take time to eat lunch with co-workers
- Take time to chat with coworkers
- Make time to complete tasks
- Identify projects or tasks that are exciting, growth promoting, and rewarding for you
- Set limits with clients and colleagues
- Balance your caseload so that no particular day is 'too much!'
- Arrange your workspace to make it comfortable and comforting
- Get regular supervision or consultation
- Negotiate for your needs, such as benefits and pay raises
- Have a peer support group
- Other: \_\_\_\_\_

This handout was adapted from Transforming the Pain: A Workbook on Vicarious Traumatization by Karen Saakvitne and Laurie Anne Pearlman, published in 1996 by TSI Staff.