Efficacy of a Mentoring Program on Nurse Retention and Transition Into Practice
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Abstract
Background: The United States and countries around the world are often faced with a nursing shortage. Studies indicate the reasons for the shortages include low job satisfaction and other factors leading to decreased retention rates.

Purpose: The purpose of this study was to determine if participating in a mentor program impacted the transition into practice and retention rates of new graduate nurses at a small community hospital in northern Indiana.

Method: This was a retrospective, descriptive, quasi-experimental study. A total of 20 new graduate nurses were studied to determine whether participation in a mentoring program had any impact on their retention at the facility. The participants who completed the mentoring program were asked to complete a questionnaire which examined their perception of the correlation between their completion of the program and their transition into practice.

Results: This study determined that participating in a mentor program impacted the transition into practice and retention rates of new graduate nurses at a small community hospital in northern Indiana. The questionnaire results indicated that participation in the mentoring program helped with the new graduate nurses’ transition into practice. This study was guided by Benner’s novice to expert theory.

Keywords: retention, mentoring, job satisfaction, transition into practice, and new graduate nurses

1. Introduction
Those entering the nursing profession do so for a variety of reasons, including a desire to serve and care for others, and financial security. Completion of nursing school requires a level of commitment and long hours of study. As new graduate nurses enter the workforce; however, many have found that the demands of professional nursing are more than they realized (Burr, Stichler, & Poetler, 2011).

Recruitment and training of new graduate nurses require not only a financial obligation but also a time commitment. These investments help ensure that new graduate nurses receive the training they need to provide quality care to their patients. In a study conducted by Friedman, Delaney, Schmidt, Quinn, and Macyk (2013), a net cost savings of $597,778 was achieved after the implementation of the mentoring program for the facility. The decreased turnover rate of new graduate nurses yielded a potential savings of $1,816,500 for the pediatric intensive care unit and $367,500 for the emergency department in the study (Friedman et al., 2013). Cottingham, DiBartolo, Battistoni, and Brown (2012) found that the minimum cost of using mentors with new graduate nurses costs the hospital $10,000, while the cost of turnover could reach $42,000 to $64,000. Ongoing training and a supportive environment are important to help the new graduate nurse transition into a long-term professional nursing role.

This study was initiated because after reading the literature on mentoring it was found that the time invested in mentoring a nurse transitioning to a new role is time well spent for the hospital and the mentee. Many new nurses leave in their first year of work. This study will further examine if mentoring will retain new nurses at least in the first year of nursing.
2. Problem and Purpose Statements

2.1 Problem

Studies have shown that new graduate nurses experience a high rate of low job satisfaction and burnout as they embark on their first nursing role. Cottingham et al. (2012) found that an estimated 13% of new graduate nurses were at risk of leaving their current job. This not only had potential complications of impacting staffing and patient care but also costing the facility up to $74,888 to train and replace these nurses (Cottingham et al., 2012). The new graduate nurses often feel overwhelmed and unequipped to handle job stressors and do not feel they have the support of experienced nurses. Gazaway, Schumacher, and Anderson (2016) found that new graduate nurses often become discouraged due to the feeling that their new position is “stressful, demanding, and fundamentally disempowering” (p. 9). Stam, Laschinger, Regan, and Wong (2013) further found that new graduate nurses have high levels of burnout, resulting in higher turnover rates. In addition, they have to lower job satisfaction as a result of experiencing difficulty in their transition into the healthcare setting. Helping new graduate nurses become acclimated to their new role is crucial for them to develop the skills necessary to care for their patients (Stam et al., 2013).

Blegen et al. (2015) found that the use of preceptors impacted the successful transition of new graduate nurses and emphasized the importance of developing effective preceptors through the use of proper training, rewards, and recognition of the preceptors. This resulted in increased retention rates and competence as self-reported by the new graduate nurses (Blegen et al., 2015). Furthermore, the authors found that supporting preceptors impacted the transition experiences for the new graduate nurses (Blegen et al., 2015). Silvestre, Ulrich, Johnson, Spector, and Blegen (2017) found that the costs associated with training new graduate nurses may result in the reluctance of organizations to implement the transition to practice programs. This, however, has also led to problems with retention and turnover of new graduate nurses (Silvestre et al., 2017). These turnover rates have a negative financial impact on these institutions, often resulting in an average replacement cost for a full-time registered nurse (RN) of up to $60,102 (Silvestre et al., 2017). The authors further found that completing a transition to practice program resulted in a decrease in the turnover rate of new graduate nurses, thus decreasing the need for replacement of these RNs (Silvestre et al., 2017).

2.2 Purpose

The purpose of this study was to determine if participating in a mentor program impacted the transition into practice and retention rates of new graduate nurses at a small community hospital in northern Indiana.

3. Literature Review

A comprehensive review of the literature was conducted using the key words retention, mentoring, job satisfaction, the transition to practice, and new graduate nurse. A total of 48 articles were found related to new nursing graduates, job satisfaction, and mentoring programs using the Cumulative Index for Nursing and Allied Health Literature (CINAHL) as the database. Of these articles, 13 were found relevant for this study. The inclusion criteria for the articles included: published within the past 7 years; the studies were completed in English speaking countries and the articles were published in academic journals.

3.1 Empirical Literature Review

Stam et al. (2013) voiced concern that many new graduate nurses become discouraged as they dealt with stress in the work environment. The authors stated that new graduate nurses often have difficulty transitioning in the healthcare setting, which results in lower job satisfaction and low retention rates. Stam et al., described new graduate nurses as “a health human resource that must be retained for the replacement of retiring nurses, and to address impending shortage” (p. 190). The researchers collected data from 205 new graduate nurses using a self-reported questionnaire. The purpose of the study was to “examine the influence of new graduate nurses, personal resources (psychological capital) and access to structural resources (empowerment and staffing) on their job satisfaction” (p. 190). Stam et al. found that although personal and structural resources played an important role in job satisfaction, structural empowerment strongly correlated with positive job satisfaction. Those graduate nurses who worked in environments that were supportive and were offered opportunities to gain competence and confidence were found to be more satisfied with their job and experienced lower burnout rates (Stam et al., 2013).

One way to help new graduate nurses gain more confidence and be more satisfied with their job may be through the use of a mentoring program (Cottingham et al., 2012). Kovner (as cited in Cottingham et al.) estimated that 13% of new graduates were at risk of leaving their current jobs because of many factors including feelings of lack of appreciation, diminished sense of value, and stress. The cost of retraining new graduate nurses can have a huge impact on the facility, as well as a negative impact on patient care. Cottingham et al. (2012) described a
community-based mentoring program, Partners in Nursing (PIN), which was created, in part, to increase the retention rates of new graduate nurses. Mentors of the PIN program attended weekly meetings to coach, support, and offer feedback to the new graduate nurses. The mentors were also encouraged to meet with the new graduate nurses on a weekly basis. In addition, the mentors and new graduate nurses were able to attend monthly professional development programs which offered the opportunity to earn continuing education credits and network with other professional nurses. The mentoring program was found to increase the retention rates of new graduate nurses and was positively accepted by the participants (Cottingham et al., 2012).

Gazaway et al. (2016) explored if mentoring was successful in retaining new graduate nurses. Gazaway et al. found that cost constraints and lack of resources may contribute to rural organizations not being able to provide adequate orientation to their new graduate nurses. Inadequate orientation can result in rural and small organizations losing their new graduate nurses within a few months of hire due to stress, lack of support, and low job satisfaction. The researchers found that a mentoring program could help reduce stress for the new graduate nurse by providing a mentor who can listen to the new graduate nurse while encouraging and guiding them into their new role of professional nurse (Gazaway et al., 2016). Furthermore, the mentor may significantly influence the new graduate nurse’s career development and job satisfaction.

D’Ambra and Andrews (2014) examined the role of civility in the retention of new graduate nurses. The authors found that mentoring or transition programs may be associated with improved job satisfaction and retention. The researchers reported that 94% of the new graduate nurses who met with their mentors on a regular basis found that the mentors provided guidance and feedback and facilitated feelings of acceptance, which allowed the new graduate nurses to become more comfortable in their new position as a professional nurse. D’Ambra and Andrews also found that mentoring programs, which supported acculturation to the nursing unit, affected on new graduate nurse’s job satisfaction and retention. This may suggest that helping the new graduate nurse feel that they are a vital part of the organization can have a huge impact on job satisfaction and retention, which may be accomplished by establishing a positive relationship with a mentor (D’Ambra & Andrews, 2014).

Friedman et al. (2013) found new graduate nurse retention in the first year of employment can be a problem in some hospitals, as indicated by retention rates ranging from 25% to 64%. The authors conducted a retrospective study to determine nurse retention rates prior to and after the implementation of a yearlong Pediatric Nurse Fellowship Program (PNFP). Also reviewed were the costs associated with the implementation of the PFNP. The researchers found nurses’ participating in the PNFP program had an improved 94% retention rate. The data also supported an annual cost savings related to the decreased turnover rates. Friedman et al. concluded that the use of specialized orientation programs positively impacted new graduate nurses, as well as the health care institutions that employ them.

D’Addona, Pinto, Oliver, Turcotte, and Lavoie-Tremblay (2015) explored the perceptions of nurse leaders involved in helping to develop new nurses and found that most of these nurse leaders were satisfied with the role they played in their mentoring program. A positive attitude was found to be crucial for those involved in the mentoring program to provide the best possible support system and guidance for these new nurses. Burr et al. (2011) noted that an estimated 35-60% of new nurses leave their job within the first year of employment. This prompted the creation of a mentoring program designed to pair new graduate nurses with experienced nurses for their first year of employment. The researchers found that the existence of the mentoring program not only decreased the turnover rate of new graduate nurses but also had a financial savings for the institution implementing the program (Burr et al., 2011).

The importance of a healthy work environment was studied by Cochran (2017), who found that providing a supportive learning environment, along with effective communication and promotion of inter-professional care, had an impact on the success of new graduate nurses. Cochran further found that the support of trained preceptors and mentors helped to guide the new graduate nurses in their professional development. In addition, the support of preceptors and mentors can help the new graduate nurses in their transition to practice, thus improving patient care (Cochran, 2017).

The high turnover rate of new graduate nurses during their first year of practice can range from 17% to 22% (Spiva, 2013). These high turnover rates have been associated with an increase in hospital-related mortality, hospital-acquired pneumonia, medication errors, hospital associated falls and pressure ulcers, readmissions, and hospital-acquired urinary tract infections (Spiva, 2013). As new graduate nurses enter the workforce at a novice or beginning level, their lack of critical thinking skills may attribute to these issues. Although many topics are covered during orientation, thus helping to ease the transition into practice, the use of a preceptor has shown to assist the new graduate nurse link the knowledge gained in the classroom and clinical setting with the workplace.
Participation in a preceptor or mentoring program can also increase the new graduate nurse’s job satisfaction, enhance their confidence, and increase retention rates (Spiva, 2013). Berman et al. (2014) found that only slightly more than 10% of new graduate nurses studied were fully prepared to provide safe and effective inpatient care as they began their new professional role. Furthermore, only 25% of the nurse leaders were satisfied with the clinical skills of these new graduate nurses (Berman et al., 2014). Gaps in competence were found in many of the new graduate nurses, including critical thinking, communication, time management, physical assessment, and teamwork, which suggested that the new graduate nurses need further education and support (Berman et al., 2014).

3.2 Theoretical Literature Review

The most prevalent theory referenced for this study is Benner’s novice to expert theory which describes the premise that new graduate nurses have no experience being nurses and are best guided by more expert or experienced nurses (Benner, 2015). In addition, Kanter’s theory of structural power in organizations, as noted by Stam et al. (2013), states that organizational resources, such as structural empowerment and staffing adequacy, along with personal resources, such as psychological capital, lead to job satisfaction. This includes access to advancement and access to information as motivating factors in ensuring job satisfaction in new graduate nurses (Stam et al., 2013).

It is also important to remember that there are cultural differences in the nurses who need to be mentored. Giger’s (2013) trans-cultural assessment model propagated that time and environment must also be considered. Furthermore, it is important that new nurses are given guidance at a time and place in which they can absorb information. Culture may affect time and environmental beliefs of the new graduate nurse. Examples include the timing of certain nursing tasks and what is acceptable behavior between the nurse and the patient and family members. Additionally, some cultures have a laissez-faire approach to time and may not see the importance of taking medications at a set time. Other cultures may find a hug or touch by the patient or other caregivers as offensive. Being aware of these cultural differences can be very important for both the mentor and the new graduate nurse (Giger, 2013).

3.3 Summary of Literature Review

For a mentoring program to be successful, it is important for those providing the mentoring to not only be willing to participate in the program but to display an enthusiasm for learning and a desire to help nurture new nurse graduates. As the research has shown, a successful mentoring program may aid in the overall job satisfaction and retention rates of new graduate nurses (Stam et al., 2013). Furthermore, the use of a mentoring program may help with patient care as the new graduate nurses learn from those who are mentoring them.

4. Theoretical Framework

Benner’s (2015) novice to expert theory provides a theoretical basis for this retrospective descriptive quasi-experimental study examining the effect of a mentoring program on the transition into practice and retention rates of new graduate nurses. Benner’s theory is based on the premise that an individual begins a journey as a novice and advances to new and higher levels based on education and experience. As these criteria are met, the individual eventually moves on to the expert level over a period of time. For new RNs to develop the necessary skills needed to provide optimal care to their patients, they need to not only learn new skills but be provided with the necessary tools and mentorship to enhance and nurture these skills. Providing a mentoring program may improve these new graduates’ transition into and provide the framework to increase and utilize these skills.

Benner’s novice to expert theory was utilized as a framework for this study by using experienced nurses to mentor new nurses. Benner (2015) stated that while student nurses learn a tremendous amount of new information, they also need to apply this knowledge in actual clinical situations. Nurses should know about the personal aspects of patients and families, including family dynamics, patient/family concerns, and the patient’s illness experience to provide optimum care to patients. Pairing a new graduate nurse with a mentor is a way that these interpersonal skills can be demonstrated as well as guiding the new graduate nurse to develop the critical thinking skills needed to provide the best possible care to patients and their families. A mentor may serve as a role model for the new graduate nurse as they transition into their new role as a professional nurse (Burr et al., 2011).

5. Hypothesis

5.1 Null Hypotheses

Participation in a mentoring program will have no effect on new nurse retention. Participation in a mentoring program will have no effect on the transition into the new graduate role.
5.2 Alternate Hypotheses
Participation in a mentoring program will have an effect on new nurse retention. Participation in a mentoring program will have an effect on the transition into the new graduate role.

5.3 Variables

5.3.1 Independent Variable: Mentoring Program

5.3.2 Dependent Variables: Nurse Retention and Transition into Practice

6. Definition of Terms

**Graduate nurse/Mentee:** Conceptually, a graduate nurse or mentee was a new nurse beginning his/her first job as a professional nurse or a nurse who was transitioning to a new role (Academy of Medical-Surgical Nurses [AMSN], 2012). Operationally in this study new graduate nurses must have had received their license within the previous 6 months of participation in the mentor program and beginning their nursing career at the hospital.

**Mentor:** Conceptually, the mentor was an experienced nurse committed to helping the mentee transition to a new position (AMSN, 2012). Operationally in this study, a mentor was an experienced nurse who had agreed to mentor a graduate nurse.

**Mentor Program:** Conceptually, a mentoring program was designed to help new graduate nurses in their professional development as they assume their new role in nursing (AMSN, 2012). Operationally, for this study, a mentoring program was one in which a graduate nurse was assigned to a mentor who helped the graduate nurse in their transition to becoming a competent professional nurse.

**Site Coordinator:** Conceptually, the site coordinator was committed to and responsible for overseeing all site-based activities related to the mentoring program (AMSN, 2012). For this study, the site coordinator was a staff nurse who facilitated the coordination of the graduate nurse and mentor and provided the mentor with the educational framework for the mentor program.

**Retention Rate:** Retention rate was defined conceptually as a means to determine the numbers of employees who are still employed after a certain period of time (Mehar, 2013). Operationally, the retention rate for this study was defined as the percent of nurses who remained employed 1 year after their hire date.

7. Assumptions
For this study, it was assumed that new nurses need guidance and direction in their role as a professional nurse. It is further assumed that for the graduate nurse to develop the necessary skills to perform their job adequately, they would benefit from having the guidance of an experienced nurse. Finally, it was assumed that if the graduate nurse had these resources, they were more likely to make a smooth transition into their new nursing position and remain employed at the facility.

8. Methodology and Procedures

8.1 Design
This research was a retrospective descriptive quasi-experimental study that examined the effectiveness of a mentoring program in improving transition into practice and retention of new nursing graduates. The strength of this study was that the new graduate nurses participated in a mentoring program which included being assigned a mentor who was available to guide the new graduate nurse in their new role. Utilizing a retrospective descriptive quasi-experimental design allowed the collection of quantitative data to determine retention rates prior to and after the implementation of a nurse mentor program for all new graduate nurses. A questionnaire was used to gather qualitative data that explored new nurse transition into practice following participation in the mentor program. Type I and Type II errors in this study were controlled by providing each participant with the same opportunities for success in the mentoring program; this included a qualified mentor who oversaw their progress in the program as well as providing opportunities for interaction with the site coordinator to make any necessary adjustments to enhance their learning experience. In addition, each participant had the opportunity to complete a survey at the end of the mentoring session to express their views and concerns about the program. This helped to alleviate any erroneous interpretation of the quantitative results received in the study.

8.2 Setting
The research took place at a small, community hospital in northern Indiana. The study participants worked in the Intensive Care Unit, Medical/Surgical Units and the Emergency Department. The Intensive Care Unit included 14 beds and was managed by RNs and a Unit Manager. The Medical floor included 26 beds and was staffed by RNs, a charge nurse, department manager, and director. The Surgical floor included 20 beds and was staffed by RNs, a
charge nurse, a department manager, and director. In the Intensive Care Unit, there was typically a 3:1 nurse to patient ratio. On the Medical and Surgical floors, there was typically a 5:1 patient to nurse ratio. The Emergency Department included 20 patient rooms and was staffed by RNs, a charge nurse, a department manager, and director. The patient to nurse ratio varied depending on the acuity of the patients but ranged from a 2:1 to 4:1 ratio.

8.3 Sample

The sample included new graduate nurses 18 years of age or older who were registered nurses and were hired within the previous 6 months of the mentoring program on one of the 4 units included in the study. The exclusion criteria included any nurses who had their nursing license for more than 6 months and were working in other departments within the facility. The sample size of the mentored nurses included 14 new graduate nurses, one male, and 13 female. These were compared to the six non-mentored nurses from the previous year.

8.4 Ethical Considerations

Permission to conduct the study was obtained from the Institutional Review Board (IRB) of the college. Permission was also obtained from the hospital administrators for conducting the study. Participation in the study was strictly voluntary. Prospective volunteers were given information about the study and had all questions answered. Each of the mentors were given detailed information about the expectations of the mentoring program and their role. There was no compensation for participation in the study. Those agreeing to participate in the study signed informed consent. Signed consents were maintained in a secure location.

All data collected during the study was anonymous. Completed questionnaires were maintained in a secure place and separate from the consent forms. Upon completion of the study, the questionnaires and consent forms were submitted to the College School of Nursing to be stored electronically for at least three years.

8.5 Description of the Intervention

All participants in the study completed the six-month mentoring program. The AMSN (2012) Mentoring Program was adapted and used to guide the development of the mentoring program. The program guide described the roles of the mentor, mentee, and site coordinator. For this study the site coordinator provided the mentor with the educational tools which were given to the mentee. The mentor was then available to the mentee to answer any questions that the mentee had. The site coordinator oversaw the mentoring and was able to make any necessary adjustments to the content being provided by the mentor.

The mentoring program was a program in which a graduate nurse was assigned to a mentor who helped the graduate nurse in their transition to becoming a competent professional nurse. This was accomplished with the guidance of a site coordinator who provided educational assistance to the new graduate nurses. This assistance included aspects of the professional nurse, such as policies and procedures of the facility, as well as reinforcing nursing skills and information obtained during orientation at the facility.

The mentors were recruited by recommendation of each department director and were approached by the site coordinator who explained the mentor program. An outline of the material to be covered was designed by the site coordinator and was given to the mentor. This material was then given to the new graduate nurse, and the mentor was available to answer any questions the graduate nurse had.

8.6 Measurement Instrument and Methods

Upon approval by the IRB, each new graduate nurse who completed the mentoring program was given the Mentoring Program Evaluation to complete. The AMSN gave permission for the use of the “Academy of Medical-Surgical Nurses model for Mentor Program tool” as expressed on their website (www.amsn.org/professional-development/mentoring). This questionnaire asked for each participant’s comments regarding the mentor program and whether they felt that their participation improved their transition into the new graduate role. The questionnaires were given to each participant via e-mail, postal service, or hand delivered, regardless if they continued their employment at the hospital.

8.7 Data Collection

The data regarding retention was collected by contacting the Human Resources and asking for the number of new graduate nurses who were hired one year before the mentor program began, including whether or not they were still employed at the facility one year after their hire date. The Human Resources Department was also asked how many new graduate nurses who participated in the mentor program continued to be employed at the facility one year after hire. Prior to the implementation of the mentoring program, there were 6 new graduate nurses hired in 2014. One year after hire, only 1 of these graduate nurses was still employed at the facility.
Following implementation of the mentoring program, there were 14 new graduate nurses hired in 2015. One year after hire, there were 9 graduate nurses still employed at the facility one year after hire.

9. Results

The quantitative data gathered pertaining to retention rates was examined using chi-square statistical analysis. The statistical analysis allowed for the comparison of retention rates prior to and after the implementation of the mentor program for all new graduate nurses hires. This was completed by reviewing the number of new nursing graduates employed and retained one-year post-hire before the implementation of the mentoring program and the number of new nursing graduates employed and retained at one year after hire who participated in the mentoring program.

The use of a Chi-Square statistical analysis determined that there was a significant difference in the retention rates of the new graduate nurses who participated in the mentoring program and those who did not although the validity of the study was not absolute, as demonstrated by the p-value of 0.0003 (see Table 1). This was completed by entering the data collected into an EXCEL spread sheet and then transferring the data to the WINKS SDA 7 statistical program and analyzing use a Chi-Square Test of Independence. The use of this test assumes that the sample was random, the data is measured at the nominal level, and the cells in the contingency table have an expected value of 5 or more. Although a statistical difference was found, the validity of the findings are questionable as all 3 assumptions were not met.

<table>
<thead>
<tr>
<th>Frequency</th>
<th>No longer employed one year after hire date</th>
<th>Employed one year after hire</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Without Mentoring</td>
<td>5</td>
<td>1</td>
<td>6</td>
</tr>
<tr>
<td>With Mentoring</td>
<td>2</td>
<td>12</td>
<td>14</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>7</strong></td>
<td><strong>13</strong></td>
<td><strong>20</strong></td>
</tr>
</tbody>
</table>

The qualitative component of the study was completed with the use of open-ended questions provided to the mentees to determine their satisfaction and benefits of the mentoring program. Participant responses to the open-ended questions were analyzed for repetitive themes and ideas which reflected transition into the new graduate role. The questionnaire and informed consent were provided to each participant either in person or via email and returned to the researcher for analysis. Of the 14 new graduate nurses who completed the mentoring programs, 9 completed the Mentoring Program Evaluation. Of these, all 9 stated that they felt the mentoring program was beneficial and helped them transition into their role of a new graduate nurse. Furthermore, they stated that they felt that having a mentor helped their transition by providing them with someone they felt comfortable going to for guidance and assistance when needed. Those who stated that the mentoring program impacted their intent to stay employed at the facility found that having a mentor helped them to feel a part of the facility which positively impacted their transition into practice.

10. Discussion of Findings

Following data analysis, the results were shared with the administrative staff of the hospital and college faculty including peers. The study implies that the utilization of a mentoring program may have an impact on retention and transition into the practice of new graduate nurses. Being able to provide new graduate nurses with a mentor to oversee transition into practice may not only improve retention rates but also provide the guidance to new graduates, so they can provide quality care to their patients. The results of this study showed that while new graduate nurses may feel estranged from more experienced nurses, having an assigned mentor helped the new graduate nurses feel that they were an important addition to the hospital staff and that there was someone who was interested in their success in their new role. The new graduate nurses who completed the questionnaire agreed that being a part of the mentoring program helped transition to practice by providing someone they felt comfortable going to with questions and concerns. The majority of the participants also stated that being a participant in the mentoring program strengthened their intent to remain employed at the hospital. Overall, providing a mentor to the new graduate nurse was seen as a positive addition to transition into practice and helped the new graduate nurse feel welcomed and appreciated at the facility.

Having quality nursing care is paramount in providing optimum patient care. Ensuring that new graduate nurses are competent in caring for patients includes providing them with ongoing educational opportunities. Pairing a new graduate nurse with a qualified mentor may help with the transition into practice by giving them a safe haven in which to ask questions and be assured that guidance is available when needed. The research obtained for this
study shows that providing a structured mentoring program may not only improve the quality of care given to patients but may also aid in the new graduate nurse’s transition into practice.

11. Limitations of Study

A limitation of the study is that it was at a small community hospital and the results may not be generalizable to a larger hospital in a bigger city. Therefore, the results may not accurately reflect new graduate nurse retention and transition into practice in a larger hospital. Further, the study was limited to a small number of participants. In addition, the mentoring program is in the early stages of use, which may alter the effectiveness of the program.

A further limitation of the study was that consistent feedback was not provided to the site coordinator during the 6-month mentoring program by the mentors. Having feedback about the program during its implementation, both positive and negative, could have afforded the site coordinator opportunity to make adjustments that may have had an impact on the results and experience for the mentees. Furthermore, time constraints prevented the site coordinator from having personal contact with all participants on a structured basis.

12. Implications for Nursing

The results of this study may imply that the use of a mentoring program for new graduate nurses improves retention and job transition into practice. This program may also enhance quality nursing care by providing new graduate nurses with resources that can positively impact their transition into practice. Improving transition into the practice of new nurse graduates may result in improved patient care, which may, in turn, improve patient satisfaction and health wellness outcomes. Providing the new graduate nurses with positive role models, such as mentors, may provide financial benefits to the hospital by improving retention rates. This could substantially reduce the cost of training new staff members needed to replace new hires who do not maintain their employment beyond orientation.

13. Recommendation for Future Research

Further research could include examining the effects of a mentoring program at other hospitals. In addition, it may be beneficial to re-examine the effects of the mentor program long term to improve its effectiveness. Conducting the study with a larger number of participants may produce a more reliable analysis of the benefits of a mentoring program. In addition, instituting a training program for the mentors may also aid in assuring that each participant in the mentoring program is receiving structured information and guidance. Having on-going opportunities for the mentors and site coordinator to meet and discuss the progress of the mentoring program could also prove beneficial to providing the mentees with the best possible experience and may result in increased retention rates and transition to practice for the new graduate nurses.

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