



# Fact Sheet

## Mentoring matters

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The Primary Health Care Research Evaluation and Development Strategy (PHCRED) supports primary health care providers to develop high quality research and evaluation knowledge and skills. One of the many ways this is being achieved is through mentoring. This fact sheet lists key information about mentoring matters.

### What is mentoring?

Mentoring involves multiple roles depending on the needs of the mentee (the person being mentored). It includes some or all of the following:

- ▶ a mutual relationship where participants share experiences, knowledge and information
- ▶ a developmental process where the mentee grows in skills, knowledge and confidence
- ▶ a strategy to share intellectual and other resources
- ▶ informal or formal support by a more experienced and skilled person
- ▶ guided learning by the mentor
- ▶ traditionally a one-to-one relationship but group mentoring may be a beneficial option.

### Who needs mentoring?

Just about everyone, but usually someone new to the field. Mentors also need mentoring.

### What does a mentor do?

A mentor:

- ▶ supports and encourages
- ▶ is interested in the mentee
- ▶ listens actively
- ▶ shares skills, knowledge and experience
- ▶ provides insight
- ▶ is available, open, respectful, accepting, willing to share and learn
- ▶ gives guidance and constructive feedback
- ▶ assists with career planning
- ▶ motivates by setting example
- ▶ promotes the development of contacts and networks
- ▶ advocates for the mentee.

### What does a mentee do?

A mentee:

- ▶ enters into a relationship or agreement and develops explicit outcomes and objectives
- ▶ meets with mentor (preferably face to face)
- ▶ initiates meetings and demonstrates commitment.

### Features of a good mentoring relationship

In a good mentoring relationship:

- ▶ the mentor and mentee have shared interests and values
- ▶ both mentor and mentee have a clear shared understanding of what their mentoring relationship will provide and how this will be done
- ▶ mentors are interested in the mentee's progress
- ▶ the mentee feels accepted
- ▶ mentees trust their mentor and value their input
- ▶ a mentoring agreement is reached that is flexible and suits both mentor and mentee
- ▶ protected time is provided to support the mentoring process
- ▶ goals are set by both parties that are reviewed regularly in order to monitor progress
- ▶ mentoring is supported by the organisation.

### Benefits of mentoring

**Mentor:**

- ▶ Opportunity to share one's experience and wisdom
- ▶ enhances communication and leadership skills
- ▶ supports ongoing learning and growth in the field
- ▶ provides high levels of personal satisfaction
- ▶ encourages reflective practice
- ▶ contributes towards succession planning and workforce retention.

## Mentee:

- ▶ Increases skills and knowledge
- ▶ receives support for setting and achieving goals
- ▶ increases confidence and self-esteem
- ▶ extends networks and support systems
- ▶ improves communication skills
- ▶ expands vision
- ▶ reduces isolation
- ▶ promotes career advancement.

## Organisation:

- ▶ Increases professional development and organisational capacity
- ▶ enhances organisational culture and image
- ▶ recognises values of individual contributions
- ▶ increases ability to attract and retain people
- ▶ seen as a leadership organisation
- ▶ provides support networks
- ▶ retains corporate knowledge.

## How is it different from supervision?

- ▶ Mentoring does not involve assessment, supervision does.
- ▶ There is an equality in the relationship which separates it from a supervisory relationship. The mentor may be more experienced but is not necessarily in a supervisory capacity or higher academic level.
- ▶ Mentoring relationships may exist for various periods of time from a few weeks up to years depending on mentee needs.
- ▶ Mentoring may be independent of the workplace.
- ▶ Mentoring is self-paced.

## Finding a mentor?

Identify what is required from mentoring and who would be the best mentor to achieve this. Approach is usually by the mentee (self selection).

PHCRED has a networking function to assist with this process. Contact local PHCRED university departments (<http://www.phcris.org.au/phcred/contacts.php>) or view primary health care researcher profiles at <http://www.phcris.org.au/roar/>

Universities, professional and employing organisations may provide contacts to approach.

## Resources

Australian Mentoring Centre - Retrieved January 2009, from <http://www.australianmentorcentre.com.au>

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Mentoring Fact Sheets for Nursing in General Practice – Retrieved January 2009, from <http://www.health.gov.au/internet/main/publishing.nsf/Content/work-pr-nigp-res-ment>

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Morton-Cooper A, Palmer A. (2000). Mentoring, Preceptorship and Clinical Supervision: A Guide to Professional Roles in Clinical Practice. **Oxford: Blackwell Science.**

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Spencer C. (2004). Mentoring Made Easy: A Practical Guide for Managers. Retrieved January 2009, from [http://www.dpc.nsw.gov.au/public\\_employment/working\\_in\\_the\\_nsw\\_public\\_sector/mentoring](http://www.dpc.nsw.gov.au/public_employment/working_in_the_nsw_public_sector/mentoring)

Walker W, Kelly P, Hume R. (2002). Mentoring in the new millennium. *Medical Educ Online* 7:15. Retrieved January 2009, from <http://www.med-ed-online.org/f0000038.htm>



## To contact PHC RIS:

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