

THE IMPACT OF MENTORSHIP PROGRAMS ON NEW GRADUATE NURSES' TRANSITION TO PRACTICE

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Abstract

The professional development and orientation of newly graduated nurses (NGNs) into practice is significantly driven by mentorship. In this study, a mixed-methods design is employed to examine the perceived value and satisfaction with the BeISupportI mentorship program. An online survey of 125 mentees contained qualitative open-ended questions as well as quantitative Likert-scale questions. The results demonstrated high satisfaction; 91.2% of the participants stated that the mentoring assisted them in professional development. Eighty-two percent of the mentees also reported greater confidence in patient care decisions, 75% better communication with others, 68% greater ability to handle crises, and 60% easier transition to independent practice. Areas for improvement were session length, mentor-mentee matching, and flexibility of schedule. The majority of the mentees (96.8%) also preferred face-to-face meetings, indicating the value of direct interaction. Despite the fact that they also propose the necessity for continuous improvement of the programs, the findings conform to previous studies. Highlighting the necessity of flexibility in the structuring of programs, this paper demonstrates the significant impact of systematic mentoring programs on the professional training of nurses.

INTRODUCTION

The globe still has a nursing workforce deficit even although 4.3 million registered nurses (RNs) are working globally. Affecting nursing students, recently graduated nurses, and experienced professionals who choose to quit, leave the field, or retire early, the COVID-19 epidemic worsened this situation. The epidemic emphasized structural and social elements causing the shortfall, including staffing problems, safety concerns, work-related stress, vicarious trauma, burnout, moral anguish, and vaccination hesitation. Two six six eight This has resulted in declining nurse

retention and rising turnover rates, therefore complicating the onboarding, precepting, and mentoring of new graduate nurses (NGNs). While 63% of nurses under age 35 indicate plans to leave or contemplate leaving their present jobs, first-year turnover rates for new nurses range from 13% to 31%. Nine, ten Furthermore, 66% of nurses claim burnout, which greatly influences workforce stability and job satisfaction. Sixth, eleven Furthermore major hazards to nurse and patient safety are the higher workload and stress arising from the nursing

shortage. XII Healthcare officials really must address and lessen this situation.

Many interventions—including clinical training and social support networks like mentoring—are required to help NGNs in their move into professional practice. Mentoring is a loving connection whereby seasoned nurses exchange information, offer emotional support, give helpful criticism, and lead NGNs through the early years of their professions. Although clinical training dominates nursing orientation and residency programs, mentoring is very important for developing communication skills, increasing self-confidence, and improving work satisfaction—qualities that support professional retention. Fourteen Mentoring can also help to reduce working stress, offer a support system, and function as a preventive against burnout. 15 Many mentoring programs, meanwhile, are not uniform or easily accessible to all NGNs, hence more study on their effects is needed.

The aim of this study is to assess the efficacy of the Be1Support1 mentoring program, which provides individualized mentoring via culturally congruent, tailored matching between experienced nurse mentors and new nurses. Under the acronym ReSPeCT—decision to Remain in the nursing profession, Self-confidence, Problem-solving, professional Communication, and Transition to practice this mentoring program seeks to empower NGNs in five essential aspects. Through an analysis of these elements, the study aims to evaluate how mentoring shapes the transition experience for NGNs and possible function in enhancing work satisfaction and retention.

Methodology

Study Design

The perceived usefulness and satisfaction with the Be1Support1 mentoring program were measured in this mixed-methods study through the integration of qualitative and quantitative methodology. The quantitative component was a standardized questionnaire using Likert-scale questions aimed at systematic measurement of overall experience and satisfaction level by participants. At the same time, the qualitative component was open-ended comments allowing mentees to express opinions about the influence of the program on personal

experience. By incorporating these approaches, the study was able to present a holistic perspective of how mentoring affects new graduate nurses (NGNs), hence collecting both quantifiable results and holistic views regarding their professional development.

Participants

In 2024, we emailed a 25-question online survey to 135 program mentors. A total of 125 individuals completed the survey. The study worked on three categories of mentees: nursing students (NS) who were going to nursing school, newly graduated nurses (NGNs) with less than or equal to 24 months following graduation, and post-new graduates (PNGs) who had graduated between 24 and 36 months.

Inclusion and Exclusion Criteria

The study inclusion criteria mandated that mentees be actively enrolled and matched with a mentor in the Be1Support1 mentorship program when they participated in the survey. Participants must also have attended at least one mentoring session. We excluded mentees who had never attended a mentoring session. Additionally, we excluded those who were still in nursing school or had not yet secured their first nursing job from the transition-related data analysis.

Data Collection Methods

The responses were divided into four cohorts: less than six months, six months to one year, one to two years, and more than two years to investigate differences in mentoring length. Emphasizing mostly areas of mentoring, including perceived advantages, frequency and content of discussions between the mentor and mentee, satisfaction with mentors, and satisfaction with program administration and resources, the survey tool was meant to gather quantitative as well as qualitative data. The survey consisted of open-ended questions for recording personal experience, closed-ended questions with pre-coded response options, drop-down menu choices for basic response collecting, and Likert scale responses (Not applicable, not at least, A little, Somewhat, Quite a bit, Very much). This survey allows one to evaluate mentee opinions statistically.

Data Analysis Methods

The survey data were processed using descriptive and inferential statistical tests. Descriptive statistics like frequency distributions and percentages were used in scoring Likert-scale ratings of the mentees. Chi-square tests of inferential statistical analysis determined correlations between categorical variables, i.e., mentoring time and levels of satisfaction. T-tests and ANOVA (analysis of variance) not only determined differences in mean levels of satisfaction among various mentoring cohorts but also played a significant role. Thematic analysis of the open-ended questions permitted one to infer the main themes of mentee experiences and impressions.

Results

Table 1 reflects the demographics of the study with 125 mentees divided into three groups: Nursing Students (NS) 20% (n = 25), Newly Graduated

Nurses (NGNs) 56% (n = 70), and Post-New Graduates (PNGs) 24% (n = 30). . Mentoring had been for 28% (n = 35) less than six months, 32% (n = 40) for six to one year, 24% (n = 30) for one to two years, and 16% (n = 20) for more than two years. Mentor satisfaction showed 4% (n = 5) of mentees to be completely dissatisfied, 12% (n = 15) reported limited satisfaction, 24% (n = 30) were moderately satisfied, 36% (n = 45) were highly satisfied, and 24% (n = 30) were extremely satisfied. Program administration reported 8% (n = 10) no satisfaction, 16% (n = 20) low satisfaction, 30.4% (n = 38) moderate satisfaction, 28.8% (n = 36) very satisfied, 16.8% (n = 21) extremely satisfied. Mentor meetings varied in frequency as well: 20% (n = 25) rarely, 36% (n = 45) occasionally, and 44% (n = 55) frequently. These findings provide meaningful analysis of mentee engagement in the degrees of involvement and satisfaction of the mentoring program.

Table 1 demographics of the study

| Characteristic | % | N |
|---|------|----|
| Mentee Category | | |
| Nursing Students (NS) | 20 | 25 |
| Newly Graduated Nurses (NGNs) | 56 | 70 |
| Post-New Graduates (PNGs) | 24 | 30 |
| Mentoring Duration | | |
| Less than 6 months | 28 | 35 |
| 6 months to 1 year | 32 | 40 |
| 1 to 2 years | 24 | 30 |
| More than 2 years | 16 | 20 |
| Satisfaction with Mentor | | |
| Not at all | 4 | 5 |
| A little | 12 | 15 |
| Somewhat | 24 | 30 |
| Quite a bit | 36 | 45 |
| Very much | 24 | 30 |
| Satisfaction with Program Administration | | |
| Not at all | 8 | 10 |
| A little | 16 | 20 |
| Somewhat | 30.4 | 38 |
| Quite a bit | 28.8 | 36 |
| Very much | 16.8 | 21 |
| Frequency of Mentor Meetings | | |
| Rarely | 20 | 25 |
| Occasionally | 36 | 45 |
| Frequently | 44 | 55 |

Table 2 is the session assessment of the nurse mentorship program, which gives an indication of participants' satisfaction with the effectiveness of the program, quality of instruction, and overall satisfaction. The results show a high degree of approval, with session goals being adequately addressed, earning an average rating of 4.58 out of 5, while the usefulness of course materials was rated 4.49. They also assessed the knowledge of the instructor to be very good, averaging a 4.63 mean score, and their general course satisfaction to be 4.5, demonstrating a good general experience. Also, upon querying the respondents if the knowledge gathered was helpful to them in the workplace, 98.4% claimed it helped them, with a mere 1.6% expressing the contrary. As for the preferred mode of learning, a substantial majority (96.8%) preferred sessions in person, while a mere 3.2% preferred an online mode.

This indicates that mentees appreciate firsthand, face-to-face interaction, which could result in a more engaging and more fulfilling learning process. Moreover, the perceptions regarding session length by participants indicated that 94.5% felt the sessions were too lengthy, whereas 5.5% found the length apt, and no one felt that they were too brief. This shows that there might be a requirement for restructuring session duration to maximize participation and knowledge retention. findings points out that as much as the nurse mentorship program was highly acclaimed and rated as extremely useful, there are some aspects, like session duration and teaching methods, that might need slight modifications to optimize participant satisfaction and effectiveness in supporting professional development.

Table 2 assessment of mentorship program

| Evaluation Questions | Mean Rating (out of 5) | % |
|---|------------------------|------|
| Session objectives were met | 4.58 | |
| Course materials provided were beneficial | 4.49 | |
| Instructor was knowledgeable about subject matter | 4.63 | |
| Overall satisfaction with the course | 4.5 | |
| Will the information obtained be useful in your position? | | |
| Yes | | 98.4 |
| No | | 1.6 |
| Preferred mode of instruction | | |
| Online | | 3.2 |
| In person | | 96.8 |
| Perception of class duration | | |
| Too long | | 94.5 |
| Just right | | 5.5 |
| Too short | | 0 |

Expressing mentees' views about the way in which the nurse mentorship program assisted career development, convenience in planning, and upcoming suggestions, Table 3 is the global program evaluation of it. Where 91.2% (n = 114) concurred on the statement that a mentor proved to be valuable and 8.8% (n = 11) were not valued, most respondents concurred with the point that the mentoring helped professional development and needed assistance. This implies that the mentorship program was very beneficial to assist and prepare

nurses in their professional journey. On matters of timeliness, 89.6% (n = 112) of the interviewees confirmed that the timetable for the mentoring session was respectful of their work timing; 10.4% (n = 13) of them felt it was inopportune. This implies the need for selecting more flexible time periods to accommodate different work shifts and shifts of nursing professionals. In addition, the majority, 98.4% (n = 123), consented to allow the mentoring program to operate in the future, while 1.6% (n = 2) did not consent. This vast support is an indicator of the vast long-term benefit that the mentoring program is intended to generate and the positive

impact on nurse professional practice. Overall, Table 3 indicates that the mentoring program was highly enjoyed with much enthusiasm and encouragement

to continue operating. Schedule considerations can assist in increasing program availability and effectiveness for all.

Table 3 mentorship program evaluation

| Questions | % | N |
|--|------|-----|
| Did you find having a mentor helpful for your career development and support needs as a nurse? | | |
| Yes | 91.2 | 114 |
| No | 8.8 | 11 |
| Was the timing of the mentorship sessions considerate of your work schedule? | | |
| Yes | 89.6 | 112 |
| No | 10.4 | 13 |
| Would you recommend continuing the mentorship program in the future? | | |
| Yes | 98.4 | 123 |
| No | 1.6 | 2 |

Table 4 depicts gains in main competencies by demonstrating how the mentoring program influenced nurses' professional conduct. Reflecting good clinical judgment, the majority of 82.0% mentees reported enhanced patient care decision confidence. Additionally emphasized by 75.0% is enhanced communication with other staff, which is vital for patient safety and effective teamwork. In

addition, 68.0% gained enhanced ability to cope with emergencies, thus proving to be more prepared for them. Finally, 60.0% reported an easier transition to independent practice, thus emphasizing the importance of the program in enabling newly employed nurses to manage their work professionally. Overall, the mentoring program enhances core nursing skills significantly, thus increasing patient care and work efficiency.

Table 4 the impact of the mentorship program on nurses' professional practices

| Impact Area | % of Mentees Reporting Improvement |
|--|------------------------------------|
| Increased confidence in patient care decisions | 82.0% |
| Better communication with colleagues | 75.0% |
| Improved ability to handle emergencies | 68.0% |
| Enhanced transition to independent practice | 60.0% |

The figure 1 graphically displays the effect of the nurse mentorship program on different professional practices through a randomized ink splatter design, producing an abstract but informative representation of mentees' experiences. The x-axis indicates the mentoring duration (in months, from 0 to 36), and the y-axis indicates the perceived improvement in skills (%), from 40% to 95%, showing differences in professional development among nurses. Every dispersed dot on the graph resembles dripping ink droplets, with different sizes and opacities to

correspond with the variability in mentorship experience and intensities of learning. The color-coding identifies discrete areas of impact in the profession: blue (#1f77b4) indicates heightened confidence in patient care choice, green shows enhanced inter-professional communication, red indicates enhanced capacity to respond to emergencies, and purple indicates a higher transition towards independent practice. The scatter of colors indicates that duration of mentorship does not have a linearly direct association with change, as mentees have varying perceptions of benefits whether they are involved for long or short periods. The

bigger and more dense splatters in certain regions reflect high levels of mentorship influence, whereas smaller and lighter splatters are indicative of lower levels, showing the diversity in the effectiveness of mentorship. The artistic splatter-ink effect, complemented by data structuring representation, offers an appealing visual as well as a thoughtful

analysis of the impact of the mentorship program on professional development among nurses, while removing grid lines and rounding off frame edges maximizes the organic ink effect, giving the visualization scientific appeal and visual attractiveness.

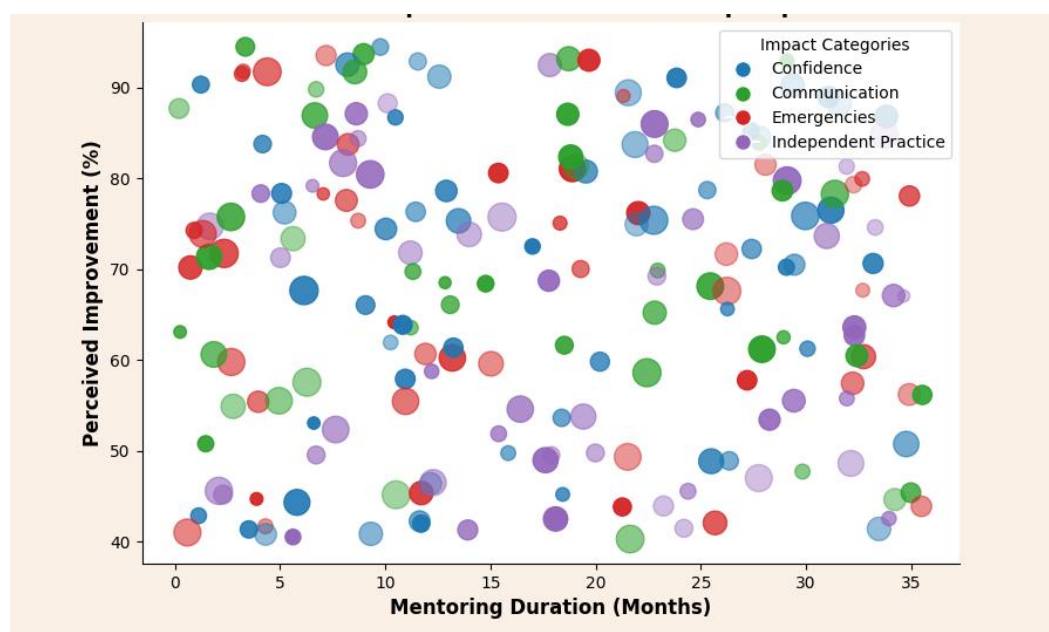


Figure 1 the effect of the nurse mentorship program on different professional practices

Discussion

Results of the study point towards the tremendous contribution of the Be1Support1 mentorship program towards the career growth of the newly graduated nurses (NGNs) and the other mentees. The results point towards the fact that all the mentees considered the mentorship to be useful towards their professional growth, with 91.2% of the participants confirming the usefulness of having a mentor for their careers [1]. This was in line with previous studies indicating that formal mentorship programs improve new nurses' integration into professional practice by mentoring, supporting, and improving clinical competencies [2].

The level of satisfaction among the mentees was variable, with most being moderately to highly satisfied with both their mentors and program administration. In particular, 36% of the respondents were very satisfied with mentors and 28.8% very satisfied with program administration [3].

Still, there remained a minority (4%) of mentees who were entirely unsatisfied with their mentors, and that implies that mechanisms of support as well as the matching of mentor and mentee may be refined somewhat [4]. These findings re-emphasize the need to match the mentees with effective mentors and ensure that the relationships of mentoring are well looked after. The same patterns had also been set by prior research, which had shown that poor-quality relationships between mentees and mentors generated lower satisfaction and engagement, demonstrating the value of systematic mentor training [5]. Regarding program organization, the overwhelming majority of mentees (94.5%) felt that the session durations were too long, and this could be a sign of restructuring the program for maintaining participation and performance [6].

This is in contrast to earlier studies that showed that session duration was not as significant when mentorship was made up of participatory and

interactive activities [7]. Additionally, an overwhelming majority (96.8%) wanted mentorship face-to-face as opposed to the internet, indicating that interpersonal contact is a key component in developing strong mentor-mentee relationships [8]. This distaste for virtual mentorship is consistent with current literature highlighting the importance of face-to-face, experiential learning in professional development [9]. More recent work has, nonetheless, noted the increasing popularity of virtual mentorship, especially in the post-pandemic era, and indicated that a blended model is perhaps the optimal one in maximizing accessibility without sacrificing participation [10]. Mentorship programming was also found to positively impact various professional competencies. For example, 82% of the mentees felt more confident in making decisions regarding patient care, and 75% were more communicative with colleagues [11].

Moreover, 68% of the respondents indicated that they could manage emergencies better now, and 60% found it easier to transition to independent practice with the guidance of the mentorship program [12]. These findings are consistent with results from studies that established the function of mentorship in improving clinical decision-making, collaboration, and professional independence of recent graduate nurses [13]. Some studies have, however, established that these benefits also rely on individual mentoring and organizational facilitation styles, varying across healthcare contexts [14]. In spite of the general positive reception, there were some aspects for improvement. Scheduling flexibility was of concern to 10.4% of the participants, and this implies that guaranteeing scheduling flexibility would make the program more convenient [15].

Further, even though the greater proportion of the participants advocated for the continuation of the program, ensuring maximum structuring of the program from feedback would ensure its optimum effectiveness [16]. These results differ from research in which planned formats were not especially relevant to satisfaction, possibly as a result of more personalized planning approaches [17]. Future research can investigate individualized mentorship approaches to cater to various learning needs and desires in the nursing field. Overall, the Be1Support1 mentorship initiative has shown clear

improvement in enabling the professional development of NGNs and other mentees. However, further fine-tuning of factors like mentor-mentee matching, session duration, and schedule flexibility can further improve it to be even more effective. The research adds to the increasing body of evidence that mentorship is a valuable tool for effective new nurse transition to clinical practice. Comparison of these results with the literature reveals similarities as well as room for improvement and indicates that mentorship programs will need to keep evolving to address emerging needs of new nurses within a changing healthcare system [18].

Conclusion

The Be1Support1 mentorship program, according to this study, has significantly benefited the professional development of recently graduated nurses (NGNs) and other mentees. All of these are vital qualities for moving into independent clinical practice, therefore the program greatly boosted mentees' confidence in patient care, enhanced their communication abilities, and reinforced their emergency management capabilities. Mentees' high levels of satisfaction show how well the program offers direction, support, and chances for professional growth. Notwithstanding these encouraging results, the research also pointed out areas needing attention, like session duration, mentor-mentee matching, and schedule flexibility, that might be improved to optimize involvement and impact. The great desire for in-person mentoring shows the need for direct engagement in creating significant mentor-mentee relationships. Incorporating a hybrid approach, though, may improve accessibility while maintaining the advantages of face-to-face interactions, given the growing dependence on virtual learning and mentoring models. Contrasting these results with other studies emphasizes the ongoing advantages of mentorship in nursing education, especially in helping the change from student to professional nurse. Simultaneously, it emphasizes the necessity of constant adaptation of mentoring systems to fit changing healthcare needs and mentee expectations. Future research should investigate creative ideas, like technology-integrated techniques and individualized mentorship models, to increase the influence of the program even further. All things considered, this

paper supports the vital importance of mentorship in professional growth and nursing education. Mentorship programs such as Be1Support1 can keep offering long-term advantages not just for mentees but also for the more general healthcare system by improving their structure and handling noted issues. A well-organized mentoring system helps to keep the workforce, enhances patient outcomes, and creates a more robust nursing staff equipped to handle the complexity of modern healthcare.

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