

Examining the Effects of a Structured Mentorship Program on the Nurse Mentor: A Pilot Study Engaging Oncology Nurses

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Mentorship programs are an emerging strategy in the nursing profession to support and develop new staff in the field; this 12-month structured program found those in the mentoring role benefit, too. The sample included 11 oncology RNs working in the inpatient acute hospital setting, serving as mentors in the oncology nurse residency program. The results were statistically significant for compassion satisfaction, and burnout scores decreased. Qualitative analysis of the open-ended questions revealed mentors felt confident they make a difference, enhanced professional growth, and reduced burnout.

AT A GLANCE

- Mentorship programs can combat nursing turnover, providing a possible solution to the United States' nursing shortage.
- Mentorship programs may increase compassion satisfaction, job satisfaction, and workplace cohesion for the mentor.
- Mentorship programs can decrease compassion fatigue, burnout, and secondary traumatic stress for the mentor.

KEYWORDS

mentoring; oncology nurses; compassion fatigue; burnout; nursing shortage

DIGITAL OBJECT IDENTIFIER

10.1188/22.CJON.27-30

The United States is facing a substantial nursing shortage. According to the U.S. Bureau of Labor Statistics (2021), this shortage could reach 1.09 million open nursing positions by 2024. In oncology, there are multiple contributing factors affecting the nursing shortage, including a high turnover rate due to poor job satisfaction, high stress levels, and compassion fatigue (Gillet et al., 2018). Insufficient nurse staffing affects multiple domains within the healthcare system.

Nursing vacancies put additional stress on the existing staff (Gillet et al., 2018). Senior staff may be required to fill additional shifts or take a higher volume of patients. Experienced nurses are becoming discouraged with the increasing job demands caused by staffing shortages, which may encourage them to leave the workplace (Gillet et al., 2018). Nurses who experience high levels of stress for long periods of time may become apathetic, depressed, or angry (Yang & Kim, 2016).

Oncology nurses deserve special focus when it comes to workplace stress. This unique nursing population is in daily contact with patients diagnosed with cancer, must communicate bad news, and is exposed to ethically complex situations (Cañadas-De la Fuente et al., 2018). The chronic stress associated with working in oncology predisposes individuals to burnout and secondary traumatic stress. Burnout manifests as emotional exhaustion, apathetic attitude, and a decrease in a sense of accomplishment, along with feeling hopelessness toward one's workload (Kutluturkan et al., 2016). Secondary traumatic stress is a temporal event that occurs after repeated primary or vicarious exposure to emotionally draining, extremely stressful, or traumatic events (Hudnall Stamm, 2009).

Work-related factors like stress, value discord, and a lack of institutional support can negatively affect job satisfaction, which leads to increased turnover rates within oncology nursing (Gillet et al., 2018). Conversely, an increase in job satisfaction has a positive impact on the quality of care oncology nurses provide, while preventing turnovers. To foster an environment of support, workplace cohesion, and job satisfaction, it is