Implementation of Mentorship Preceptorship Method in Internship Nursing Students

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**ABSTRACT**

Nurses are responsible to improve their capability and knowledge in giving nursing care, including sharing their skills and knowledge to junior nurses and nursing students. This professional development can be done by applying mentorship and preceptorship method supported by management. Mentors and preceptors having big roles in this method can help nursing students in transition and integration process into clinical setting and working area. They also support nursing students to achieve competencies and self confidence, and to be involved in professional life.

The objective of this research is to know the experiences of mentors, preceptors, and nursing students when they apply this method during learning process in internship program.

The study design was an evaluation study which focused on implementation of a method. The data was collected by using focus group discussion from seven participants; they are 1 mentor, 2 preceptors, and 4 students.

The result show that each component knows well about their roles even though there are obstacles during conduct the method, such as: the number of mentors and preceptors is limited, and the number of students in each of shift is not same. Since they feel that this method is effective, they have solving problem which will be done, for instance: adding the number of mentor and preceptors, using co-preceptors in order to make the number of students in each shift equally. This method also helps students to achieve their competencies easily, and they feel more confident during giving nursing care for the patients.

It is important for clinical instructors (CI) to get skills how to implement mentorship perceptorship method in order to apply it in internship learning process by joining training and scientific meeting how to applying this method in better way.

**INTRODUCTION**

Focus on learning process in nursing education is to increase students’ capability as professional nurses. The result is a nurse who is capable to improve community health level1. In order to do that, Nursing School Medical Faculty Diponegoro University (PSIK FK Undip) as one of nursing education institution in Indonesia conducts profession programme which give chance for students to implement the theory in to clinical setting. After finishing the profession programme for two semesters, students will join advance programme which encourage students to be specialities by practicing in one specific area, for instance: maternity nursing, paediatric nursing, medical nursing, surgical nursing, community nursing, psychiatric nursing, and nursing management. By joining two phases during learning process, students will get chance to apply nursing care individually based on the theory.

For that reason, there must be a proper supervision method which will guide students to conduct learning process in clinical setting and achieve their competencies. One of the methods is mentorship-perceptorship method which is constructed by two methods, mentorship and perceptorship. Student-centred learning and the principle of adult learning are used as bases of this method (Sachdeva, 2009). Furthermore, it can be combined during the application.

Mentorship is relationship between two persons which results on reflection, support, trust, reward, and wish to learn and to share (Werdati, 2007). Mentorship is also defined as learning process which mentor help mentees to be independent in their learning process Nurrachmah, 2007). Students as mentees will get their experiences and find the nursing phenomena which will help them to build their self esteem, confidence, and self-awareness in problem solving skill.

Perceptorship is focusing on the transfer knowledge and skill to junior nurse or students 5. In this method novice students are guided in transition process or to be integrated in clinical setting. Benefits will be gained when this method is applied, such as: achieving the clinical competences, transferring the knowledge and skills, and building the confidence.

Both mentorship and perceptorship are chosen as supervision methods because those give advantages for learning process particularly in nursing. It is mentioned by Block & Korow (2005) that mentorship helps to solve lack of nurses, to increase nurses’ satisfaction, and to develop caring quality. Furthermore this study stated that mentorship which is applied in medical surgical ward is improving achievement of nursing competences, confidence, self-esteem, and self awareness. Then this method is recommended to be implemented in nursing internship (Huriani & Malini, 2006).

Advance programme of maternity nursing, PSIK FK Undip is held in Wonosobo General Hospital covering three wards, outpatient, intranatal ward, and postnatal ward. Each student has the competences that must be gained in each ward related to the maternity nursing. For example: students must perform nursing care to the antenatal patient start from conducting assessment, deciding nursing diagnosis, planning the intervention, implementing, evaluating and documenting. During their practice, they will be guided by clinical instructor (CI).

As a part of agreement between PSIK FK Undip and Wonosobo General Hospital, mentorship-perceptorship is chosen as a supervision method during learning process since this method is proper to help students to be independent in their learning process. Another consideration is advance programme is the last process in the internship before they graduate and join to the working world which is independence as a requiring skill.

Furthermore there are different rules between perceptors and mentors. Perceptors act as instructors for students. They conduct methods during supervision such as: confrence, discussion, bed side teaching, and observation. Furthermore perceptors transfer the skill and knowledge directly to the students since student as satellites for their perceptors when perceptors give nursing care to the patients (Registered Nurses Association of Ontario, 2008). For that reason, perceptor is a nurse who works in the ward

On the other hand, mentors act as evaluator for the students. Together with students, mentor assesses the achievement of students’ competencies, identify obstacles faced by students, discuss the solutions to solve the problems, and plan the further action Lennox, Skinner & Foureur, 2008) Usually, between mentors and students have regular time to discuss (Murray and Owen, 1991).

The aim of this study is to identify the experiences of mentors, perceptors, and nursing students when they apply this method during learning process in the internship program. It is important to evaluate implementation and effectivety of this method so it can be decided to use it continuously or change to other methods, even modify this method to be better. The study conducted at Wonosobo General Hospital by involving students as subjects in learning process, and clinical instructor as mentors and perceptors.

**METHOD**

Focus of this study is to know the implementation of mentorship-perceptorship method in internship which concern on the roles of students, mentors, and perceptors during the implementation, obstacles faced by each component of the method, solutions to solve the problems, and the achievement of students’ competencies. The most important thing is to evaluate students’ self confidence after they implemented mentorship-perceptorship method.

In order to evaluate the implementation of mentorship-perceptorship method, qualitative research with phenomenology approach is used in this study. This approach is chosen because researcher wants to capture and to understand the meaning of a phenomenon and the relationship of it with subjects: students, mentor, dan preceptors (Cresswell, 2012); that is the implementation of mentorship-perceptorship method in the advance programme of maternity nursing.

Population is all subjects which will involve in research process in which the data is produced (Fraenkel & Wallen, 2010). The population in this study is all students, mentor, and perceptors in the Wonosobo General Hospital particularly in the maternity nursing ward. Sample is part of population which is representative for population. Total sampling is used in this study since all population will be involved 11. There are 7 participants: 3 students, 3 perceptors, and 1 mentor.

Furthermore, researcher is the main actor in qualitative research since he is the main tool to collect the data (Fraenkel & Wallen, 2010). However additional tools are needed, such as: interview guidance, observation guidance, recorder, pen and paper. Data were collected by conducting Focus Group Discussion (FGD) since FGD is conducted to know deeply about concept, experience, and idea of the group (Cresswell, 2012). All participants sat together to discuss the implemetation of mentorship-perceptorship, then researcher lead the discussion by asking questions based on the guidance, recorded, observed, and write the result.

**RESULT AND DISCUSSION**

Result

After the data collected, researcher identified the data and find the key words. Then the the similar keywords were categorized in one category in which categories were organized to be sub themes and themes (Cresswell, 2012). There are seven categories in this research, roles of students, roles of mentor, roles of perceptors, obstacles, solutions, achievement of competencies, students’ self confidence. Then the categories were developed to be themes; they are participants’ understanding about implementation of mentorship-perceptorship method, participants’ behaviour in implementation of mentorship-perceptorship method, psychology effects of participants in conducting mentorship-perceptorship method. Table 1 shows the result of key words, categories and themes

Table 1. List of categories and themes

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| --- | --- | --- | --- |
| NO | Keywords | Categories | Themes |
| 1 | Meeting the mentor to consult.  Following the perceptor.  Achieving competences. | Roles of students | Participants’ understanding about implementation of mentorship-perceptorship method |
| 2 | Assessing the report.  Evaluating achievement of competencies.  Marking or scoring | Roles of mentor |
| 3 | Supervising and guiding.  Assessing the report.. | Roles of perceptors |
| 4 | Lacking of perceptors  The number of students in each shift is not equal  Schedule of mentor and mentee is not match  Lacking of implementation the method in outpatient and intranatal ward | Obstacles | Participants’ behaviour in implementation of mentorship-perceptorship method |
| 5 | Adding the number of perceptors.  Co-perceptors  Agreement of schedule between mentor and mentee  Implementation method in in outpatient and intranatal ward | Solutions |
| 6 | Students are asier to achieve competencies  Students feel closer to the perceptors  Students is more active | Students achievement | Participants’ behaviour in implementation of mentorship-perceptorship method |
| 7 | Students are more confidence in giving nursing care to postnatal patients.  Students are less confidence in giving nursing care to antenatal and intranatal patients. | Students’ self confidence |

Discussion

The result will be discussed in this section according to the themes. There are three themes, first is participants’ understanding about implementation of mentorship-perceptorship method, second is participants’ behaviour in implementation of mentorship-perceptorship method, and last participants’ behaviour in implementation of mentorship-perceptorship method.

1. Participants’ understanding about implementation of mentorship-perceptorship method.

Each participation knew well their roles in implementation of mentorship-perceptorship method.

Students as participants do their roles in conducting mentorship-perceptroship method, such as: they met mentor to consult, followed the perceptor, and achieved the competencies and target.

Profession is a stage that must be joined by nursing students before they graduate. During the programme, students must achieve competences by joining series of activities, such as learning in clinical setting in which is guided by clinical instructor using mentorship-perceptorship method (Huriani & Malini, 2006). Furthermore it is said by Rosser, et.al (2004) that mentorship is an effective method to help students in transition periode, from novice to be expert.

Furthermore, clinical instructors as mentors and perceptors for students said that as perceptor, they do their roles as mentor and perceptor such as, giving direct supervision and receiving consultation. The same idea came from mentor that they act as good as perceptor, such as: receiving consultation, assessing, and evaluating achivement of competences. As it is mentioned by Ramani & Gruppen ( 2009) that one of mentor’s roles is directing mentees towards assigments so their assignments meet the requirements or standards. Another fuction of mentor is supporting academic achievement of mentee.

There is a bias of roles between mentor and perceptor since they do not understand deeply each role. For instance: both mentor and perceptor are receiving consultation in composing the report eventhough ideally perceptor has its role. Perceptor guides students to take care the patients including documenting the report (Lennox, Skinner & Foureur, 2008).

1. Participants’ behaviour in implementation of mentorship-perceptorship method.

During application of mentorship-perceptorship method, participants faced the obstacles such as: the number of perceptors is minimum, the number of students in each shift is not equal, schedule of mentor and mentee is not match, and implementation the method in outpatient and intranatal ward is limited. Sometimes mentees have high expectation to their mentor, then when it is not met, mentees feel disappointed. One of challenges in mentorship implementation is different expectaion between mentor and mentee. Mentee want mentor solve all his problems even personal problem (Ramani and Gruppen, 2009).

The obstacles faced during the mentorship-perceptorship implementation can obstruct the learning process in achieving competences, for instance: the number of student in one shift which is bigger than another shift makes students’ chance to give nursing care to the patient minimum since students must share to other students. Furthermore, it is not polite to have many students around of patient since students must follow their perceptor.

For that reason, clinical instructors as mentors and perceptors have solutions such as: adding the number of perceptors, using co-perceptors to give supervision to students, making agreement of schedule between mentor and mentee to discussion, and implementing the method in antenatal and intranatal ward. Then those solution will be applied to the next group of students. Ramani and Gruppen (2009) said that one of ways to improve mentorship-perceptroship is foster communication which add amount and quality of communication between mentor and and his mentee by conducting series of meeting. Furthermore faculty development in mentorship-perceptorship is important to improve the quality of method, not only the quality and skills of mentor but also the number of mentors (Ramani and Gruppen, 2009).

1. Participants’ behaviour in implementation of mentorship-perceptorship method.

Psychology effects which is felt by respondents after applying mentorship-perceptorship method is achievement of competences. It is said that students are easier to achieve the competences since they get support from their mentor and perceptor. Mentees need support from mentor to solve their problems during the learning process including personal problems; mentees also need mentor as a confidant to express their personal problems (Ramani and Gruppen, 2009 and Sachdeva, 2009).

Another efffect is increasing students’ self confidence in giving care to the patients since they can build a good communication with patients, and know patients well. As it is mentioned by Busen & Engebretson (1999) that students’ self confidence is mentees’ capability to do therapeuticrelationship with patients, collaborate with other health care providers, and perform an effective communication.

CONCLUSION

Mentorship-perceptorship is an effective method in supervising and guiding since it helps students to achieve their competences and to increase studets’ self confidence. Eventhough there are challenges faced by among mentors, perceptors, and students, such as lack of perceptors and disagreement of schedule between mentor and mentee. In order to answer the challenges, mentor, perceptor, and mentee have solution, such as: adding the number of perceptors, using co-perceptors to give supervision to students, and making agreement of schedule between mentor and mentee to discussion. Then it will be applied in the next group of students.

REFERENCES

Block, L. M. & Korow, M. K. (2005). The value of mentorship within nursing organizations. *Nursing Forum*, 40 (4): 134-140.

Busen & Engebretson. (1999). Mentoring in advanced practice nursing: the use of metaphor in concept exploration. *Journal of Advanced Nursing Practice*. 2(2).

Creswell, J.W. (2012). *Educational Research: Planning, conducting, and evaluating quantitative and qualitative research*. Boston: Pearson.

Fraenkel, J.R. & Wallen, N.E. (2010). In *How to design and evaluate research in education*. 7th edition. New York: McGraw-Hill Companies.

Huriani, E & Malini, H. (2006). Mentorship sebagai suatu inovasi metode bimbingan klinik dalam keperawatan. Tidak dipublikasikan.

Lennox, S., Skinner, J., & Foureur, M. (2008). Mentorship, perceptorship and clinical supervision: three key process for supporting midwives. *New Zaeland College of Midwives Journal*, 39: 7-12.

Murray and Owen. (1991). Beyond *the myths of mentoring: how to facilitate an effective mentoring program*. San Francisco: Jossey-Bass.

Nurachmach, E. (2007). Paradigma pencapaian kompetensi pada pendidikan ners dengan model preceptorship dan mentorship. In Pelatihan Nasional Preceptorship dan Mentorship untuk Pendidikan Ners. Yogyakarta, 12 – 14 Februari 2007.

Ramani, S & Gruppen, L. (2009). Chapter 19: Mentoring. In *a practical guide for medical teachers*. London: Elsevier.

Rosser, M., Rice, A. M., Campbell. H., Jack. C. (2004). Evaluation of a mentorship programme for specialist practitioners. *Nurse Education Today*, 24(8): 596-604.

Sachdeva, A.K. (1996). Preceptorship, mentorship, and the adult learner in medical and health sciences education. *Journal of Cancer Education*, 11(3): 131-136.

Werdati. (2007). Implementasi program mentorship pada pendidikan keperawatan. In Pelatihan Nasional Perceptorship dan Mentorship untuk Pendidikan Ners. Yogyakarta, 12 – 14 Februari 2007.