A MENTORING NEEDS ASSESSMENT: VALIDATING MENTORSHIP IN NURSING EDUCATION

JO-ANN V. SAWATZKY, RN, PhD,* AND CAROL L. ENNS, RN, MN†

A shortage of nursing faculty is imminent. Factors contributing to this looming crisis include the aging professoriate, as well as a host of recruitment and retention issues. Mentoring programs enhance recruitment, promote retention, and create a caring environment that capacitates and enriches the teaching role. The purpose of this research was to complete a mentoring needs assessment of our nursing faculty, with the overall goal of establishing the foundation and validation for a formal mentoring program. We recruited 60% (n = 29) of our full-time faculty to complete the Faculty of Nursing Mentoring Needs Assessment survey/questionnaire. Consistent with previous research, primarily from other disciplines, career function and caring were cited as important roles and responsibilities for mentors. The most significant stressor for novice faculty was "fitting in" to the academic milieu; teaching expertise and caring were important qualities of "good mentors." Barriers to mentoring were related to lack of time and faculty support. The evidence from this study lends support for mentorship in nursing education. A caring mentoring environment is an important and timely strategy to ensure that the integrity of nursing education is sustained in the years to come. (Index words: Mentorship; Nursing: Education) | Prof Nurs 25:145–50, 2009. © 2009 Elsevier Inc. All rights reserved.

A SHORTAGE OF nursing faculty is imminent. In Canada, more than 400 faculty members were recruited in 2004, with projections of an additional 500 faculty vacancies in 2005. Factors contributing to this looming crisis include inadequate numbers of available potential faculty. In 2004, graduates of Canadian master's and doctoral programs numbered less than 500. Moreover, the aging professoriate is a reality; the proportion of aging nursing educators exceeds the rest of the aging nursing workforce (Canadian Association of Schools of Nursing, 2005; Canadian Institute of Health Information, 2004). Projections indicate that retirements and resignations will drastically reduce this workforce within the next few years (Emerson & Records, 2005). Also, the salary gap between nursing educators and their clinical

counterparts is increasing at an unprecedented rate, thus contributing to the issues of recruitment and retention.

New faculty often faces a multitude of stressors.

New faculty often faces a multitude of stressors. Sorcinelli (1994) noted a dramatic increase in newcomer work stress over the 5 years of a longitudinal study of new faculty. Common themes and concerns reported included time constraints in research and teaching; lack of collegial relationships; inadequate feedback, recognition, and reward; unrealistic expectations; insufficient resources; and lack of balance between work and personal life (Brendtro & Hegge, 2000; Sorcinelli, 1994). Similarly, most nurses are inadequately prepared for the multiple roles and expectations of academia and consequently are less likely to assume and/or remain in the teaching role (deYoung & Bliss, 1995). Therefore, new strategies for recruitment and retention are central to the ongoing integrity of nursing education.

Mentorship capacitates and enriches the transition to the teaching role. Therefore, mentoring novice nursing educators within formal programs has never been more relevant and timely (Diekelman, 2002; Pololi, Knight, Dennis, & Frankel, 2002). Furthermore, "accepting responsibility for mentorship of other faculty members and students, either naturally or by appointment moves

^{*}Associate Professor, Faculty of Nursing, University of Manitoba, Winnipeg, Manitoba, Canada R3T 2N2.

[†]Instructor, Faculty of Nursing, University of Manitoba, Winnipeg, Manitoba, Canada R3T 2N2.

Address correspondence to Sawatzky: #367 Helen Glass Centre for Nursing, Faculty of Nursing, University of Manitoba, Winnipeg, Manitoba, Canada R3T 2N2. E-mail: joanne_sawatzky@umanitoba.ca 8755-7223/\$ - see front matter

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a school towards excellence" (Brown et al., 1995, p. 29). Although there is a substantive body of literature related to mentorship within the academic milieu, the focus tends to be on career development and success. There is a dearth of publications specifically related to the mentoring of nurses as educators. Moreover, although caring theory is central to most nursing curricula, it is generally not reflected in the mentorship programs of novice educators.

The purpose of our research project was to undertake a mentoring needs assessment of our nursing faculty. The overall goal of this research was to establish the foundation for a caring mentoring environment within a nursing faculty.

Background

The term *mentor* originated in Greek mythology and was derived from the writings of Homer in his poem, The Odyssey. Odysseus entrusted his son, Telemakhos, to his faithful advisor, Mentor, when he went to war. Mentor was a guide, teacher, tutor, and father figure to Telemakhos (Sands, Sands, Parson, & Duane, 2006; Smith, McAllister, & Crawford, 2001). In keeping with this myth, a mentor is often described as a "wise, experienced, and faithful advisor to an aspiring professional" (Thorpe & Kalischuk, 2003, p. 5). Although the education, management, and psychology literature reflects definitional diversity, a number of nursing researchers have utilized Alleman's (1987) definition of mentoring as "a relationship between two people in which one person with greater rank, experience, and/or expertise teaches, counsels, guides, and helps others to develop both professionally and personally" (p. 17). Specific to nursing education, mentoring has been defined as making "the art of teaching accessible for others" (Stephens, 1996, p. 2).

The following is a brief overview of mentorship, including the roles and characteristics of mentors, the benefits and barriers of the mentoring role, and mentoring programs.

Mentor Roles and Characteristics

The roles and responsibilities of mentors generally fall into the categories of psychosocial and career functions. According to Kavoosi, Elman, and Mauch (1995), the psychosocial mentoring function focuses on self-worth and encompasses the provision of support including role modeling, counseling, friendship, acceptance, and confirmation. In a review of the mentoring literature, Jacobi (1991) also identified the provision of support/encouragement and socialization as mentoring functions. As a socializer, the mentor integrates the mentee into the social culture of the work environment (Horton, 2003).

The career function of mentoring, on the other hand, promotes professional advancement and includes sponsorship, exposure and visibility, coaching, protection, and challenges and opportunities (Jacobi, 1991). Kavoosi et al. (1995) found that the most frequent responsibilities reported by faculty mentors were career-oriented activ-

ities, such as "teaching the job." Using the definition of a *mentor* as someone who provides ongoing professional support, Peters and Boylston (2006) cited three concerns in the academic mentoring relationship: acclimation and orientation to the university (e.g., mission, philosophy, goals, and policies), teaching (e.g., developing lectures and syllabi), and scholarship and career development. Thus, assistance and support appear to be central to the mentoring role.

Berk, Berg, Mortimer, Walton-Moss, and Yeo (2005) listed expertise, professional integrity, honesty, accessibility, approachability, motivation, respected by peers, and supportive and encouraging as desirable characteristics of faculty mentors. Additional characteristics of effective mentors include enthusiasm and a sense of humor (Horton, 2003). Mentors must also be caring, giving, accepting, and sensitive to the mentee's situation (Smith et al., 2001).

Mentoring: Benefits and Barriers

Mentoring benefits the individual mentor and mentee, as well as the broader faculty community. For the individual mentor, there are numerous benefits of the mentoring relationship. In an evaluation of a mentoring program in a nursing faculty, Brown (1999) reported that the mentors found their protégé's knowledge, experience, and fresh insight to be very beneficial. Mentors also gain satisfaction in seeing the mentee's successes (Cangelosi, 2004). Also, mentoring provides an opportunity to reflect on one's own beliefs and teaching practices (Ehrich, Tennent, & Hansford, 2002).

Some would argue that the protégé or mentee gains the most in the mentoring relationship. In a review of empirical literature related to mentoring in education settings, Ehrich et al. (2002) found "that for beginning teachers in particular, mentoring could provide unrivaled professional and emotional support, as well as career affirmation of teaching as a career" (p. 260). Although the benefits are often mutually advantageous, it important to realize that some mentoring relationships may be very task oriented and as such may dissolve once the task has been completed, whereas others "may find themselves using their synergy to explore problems and topics that go far beyond the boundaries of what brought them together" (Hiemstra & Brockett, 1998, p. 50).

The faculty as a whole also benefits from mentoring relationships. Mentoring programs enhance recruitment, promote retention, and create an environment that fosters personal and professional growth (Feaster, 2002). Faculty members, who are aided in their professional development and are subsequently more productive and fulfilled in their role, are more likely to stay with the organization (Ehrich et al., 2004). In fact, Greene and Puetzer (2002) reported lower attrition rates among new teachers who had been in mentoring relationships. Mentoring also increases the research skill development and consequently the research productivity of junior faculty (Cangelosi, 2004; Ehrich et al., 2004; Paul, Stein, Ottenbacher, & Liu, 2002; Records &

Emerson, 2003). For example, Cangelosi (2004) reported that article presentations and manuscript authorships were the direct result of mentoring. In addition, mentoring can revitalize senior faculty (George & Peace, 1997). According to Peters and Boylston (2006), "collegial mentoring relationships can provide a place that promotes communication, connection, and caring" (p. 63).

Mentorship is, however, not without barriers. Without commitment, time, and supportive structure, mentoring cannot be effective. For example, "senior faculty time, which may be graciously offered to the mentoring process, nevertheless is time that cannot be spent on other activities" (Selby & Calhoun, 1998, p. 211). Also, mentoring programs that are grounded in paternalism are likely to fail. The unintended message within formal mentoring programs may be the assumption that the newcomers would not be able to succeed on their own (Selby & Calhoun, 1998).

Mentorship Programs

Mentoring relationships may be formal or informal and short- or long-term. In a formal mentoring program, the mentor is assigned to provide guidance to a new faculty member; however, poor matches between mentor and mentee are not uncommon. These formal relationships often result in short-term coaching and, although serving the purpose of orientation, often span a short time and do not facilitate long-term career development of the new faculty member (Gazza & Shellenbarger, 2005). Therefore, in a formal mentoring program, matching mentor and mentee requires careful consideration (George & Peace, 1997). Informal mentoring relationships evolve spontaneously and are usually based on a good match between the mentor and the mentee (Gazza & Shellenbarger, 2005).

In a study of nursing program administrators (n = 80) and senior nursing faculty (n = 389), Kavoosi et al. (1995) found that only 5% of mentoring relationships were established through formalized programs. In our recent review of 27 Canadian university Web sites, six university-wide mentoring programs were listed (four formal and two informal); no nursing-specific mentoring programs were posted. Kavoosi et al. (1995) reported that, although numerous mentoring relationships do exist, administrative support for mentoring is primarily through informal mechanisms. They concluded that faculty should be encouraged to build mentorship "through new and existing informal and formal programs and by working to strengthen methods of support for mentoring" (Kavoosi et al., 1995, p. 425). The first step in establishing a mentoring program is to determine the readiness of the organization and to establish the goals for the program (Newby & Corner, 1997).

Currently, our nursing faculty does not have a formal mentoring program for novice nursing educators. Although the advantages of mentoring appear to be incontrovertible, it was important to determine the "mentoring mentality" of a faculty before commencing a mentoring initiative. In addition, we hope that the findings from this study will generate interest in establishing mentoring activities in other nursing programs.

Conceptual Framework

Caring forms the basic foundation for nursing actions and has been coined as the essence or unifying core of nursing; it is the central focus for nursing practice, education, research, leadership, and administration (Benner, 2001; Scotto, 2003; Spichiger, Wallhagen, & Benner, 2005; Watson, 2006). Caring is a feeling of concern about or having interest in a person, place, or thing. "From an ontological perspective, caring can be conceptualized as the human mode of being" (Roach, 1991, p. 8). Snelson et al. (2002) described the development of a nursing faculty mentoring program based on a caring theoretical perspective. Their program was designed "to promote a caring environment where novice faculty can acquire the tools necessary to function as productive faculty" (Snelson et al., 2002, p. 655). On the basis of the overwhelmingly positive feedback, the authors concluded that caring provided an appropriate framework for a mentoring program.

Methods

The purpose of this project was to complete a mentoring needs assessment of full-time nursing faculty, within a university setting in a large urban center in central Canada. In a typical year, more than 25,000 students are enrolled in our university's 82 undergraduate- and graduate-degree programs. Approximately 400 students graduate annually from the faculty of nursing's programs, which include a 4-year undergraduate, a 2-year post-RN baccalaureate degree, and a master of nursing program.

The overall goal of this research was to establish the foundation for a caring mentoring environment within our nursing faculty. Accordingly, we utilized a crosssectional survey design to determine the "mentoring mentality" within our faculty. After formal ethical approval of the project, the Faculty of Nursing Mentoring Needs Assessment survey/questionnaire was distributed to all full-time nursing faculty (N = 49). This questionnaire was developed specifically for the purposes of this project. The content of the six-item questionnaire was based on a review of the related literature; questions included a list of possible roles and responsibilities for mentors, characteristics of a "good mentor," individual and faculty benefits of being a mentor, stressors for new faculty, and deterrents to mentoring. A summative 5category Likert-type scale (0-4) was used to elicit the degree of negative-positive agreement with each response; additional qualitative comments were encouraged at the end of each of the six items. Also, for faculty who had been in mentoring relationships, we included an open-ended question related to the benefits and/or drawbacks of the experience. Demographic information was also elicited. The questionnaire was pretested by three faculty members, who were invited to participate in the subsequent survey. Quantitative data were analyzed 148 SAWATZKY AND ENNS

with basic univariate, descriptive analyses. Common themes were extracted from the qualitative data.

Results

The study sample included 29 full-time faculty members, a response rate of 59.2%. Of the participants, approximately 40% were tenured or tenure track faculty; 55% were instructors or lecturers; 55% reported a doctoral degree as their highest level of education. The respondents reported being faculty members for an average of 8.1 years, with a range from less than 1 year to 19 years. These proportions were consistent with our staff:educational mix, thus, a representative sample of our faculty was achieved. Although approximately two thirds of respondents indicated that they had previous or current experience in a mentoring relationship within the faculty, 10 participants (35%) reportedly had not.

Participants were presented with a list of 15 possible roles and responsibilities for mentors and, using a Likert scale of 0 (strongly disagree) to 4 (strongly agree), were asked to complete the statement, "It would be valuable/ helpful for new faculty to have a mentor who would...." Highest scores (M > 3.3) were elicited for the following: be a positive role model, provide information, help reduce the sense of isolation, and support/encourage during stressful times. Conversely, the lowest scores (M < 2.5) were for the following: review grant proposals, help build social networks, and be a friend. Faculty participants were asked to comment regarding additional roles and responsibilities of mentors that they believed were important. Themes from the nine qualitative responses included learning about the processes of the faculty; offer teaching support strategies; insight into role expectations, university policies, and protocols; and celebrating achievements.

Of the five listed stressors for new faculty (Likert scale: 0 = not at all stressful and 4 = very stressful), the most stressful factor (M = 3.10, SD = 1.05) was inadequate information regarding the informal/unspoken rules; the least stressful factor (M = 2.31, SD = 1.26) was inadequate knowledge related to the research process. Themes from the five qualitative responses included the following: the integration into a new facility, developing relationships with faculty (little time), lack of administration services and support, information regarding deadlines, learning new computer programs, how to prepare a syllabus, professional responsibilities with students, developing tests, marking papers, and balancing employment with the completion of a doctor of philosophy.

Of the 18 characteristics listed for "good mentors" (Likert scale: 0 = not at all important and 4 = very important), in descending rank of importance, the following were rated as important or very important (M > 3.3): trustworthiness, honesty, positive attitude/enthusiasm, nonjudgmental, respectful, experience in teaching, excellent interpersonal skills, and caring. Least important factors (M < 2.5) included similar personality to mentee and tenured. Additional characteristics of a good mentor included in the four qualitative responses were compa-

tible personality, a belief in the mentoring role, willing to share experiences, and a mentor who is approachable and an effective listener.

Participants were asked to rate 6 possible individual benefits of being a mentor (Likert scale: 0 = not at all important and 4 = very important). Rewarding to share insight ranked highest (M = 3.38, SD = 0.622), and fosters career advancement ranked lowest (M = 2.41, SD = 1.02). Of the 10 possible benefits of mentoring relationships for the faculty overall (Likert scale: 0 = not at all important and 4 = very important), the following 5 benefits rated highly (M > 3.3): increased job satisfaction, teaching skills, collegiality, team building, and improved overall performance of the faculty; lowest score (M = 2.69) went to preservation of faculty culture. Additional personal benefits that were considered important in the two qualitative responses included assistance with submission of a manuscript and to assist to be able to reevaluate personal teaching practices.

Participants (n = 15) also openly shared their qualitative comments on the benefits of their personal mentoring experiences. Participants perceived mentoring as a wonderful and rewarding experience, a personal enthusiasm booster, and an opportunity to share ideas and evaluate their own teaching strategies. Several participants commented that having the opportunity to mentor someone was a positive experience, although they had not personally had a mentor as a junior faculty member. Many participants also noted that their mentoring experiences were quite informal.

Participants were given a list of five possible obstacles or deterrents to mentoring (Likert scale: 0 = not at all significant and 4 = very significant); lack of time to fulfill the roles effectively ranked as the most significant factor (M = 3.45, SD = 0.736) followed by lack of supportive infrastructure (M = 3.17, SD = 0.848). An interesting finding was that inadequate preparation for the role ranked as least significant (M = 2.66, SD = 1.203).

Finally, participants were given a list of six possible factors that might be included in a mentoring program Likert scale (0 = not at all important and 4 = very important). An orientation program for mentors, voluntary participation as mentors, and ongoing professional development for mentors ranked as most important (M > 3.3). A designated coordinator for the program ranked lowest (M = 2.41, SD = 1.323). The qualitative comments underscored the importance of voluntary participation in a mentoring program and being able to identify the right "match" of mentor to mentee.

Discussion

The purpose of this project was to complete a mentoring needs assessment within our faculty of nursing. To this end, the research design was a cross-sectional survey. Although we utilized a convenience sampling strategy, the study sample was representative of our faculty in terms of rank and level of education. The sample size was quite small, which prohibited complex multivariate analyses; however, the descriptive

data analysis of the quantitative data was enriched with qualitative responses from the participants. The following discussion includes insights gleaned from the results, as well as implications for the future of mentoring in nursing education.

The results provide evidence to substantiate the initiation of a formal mentoring program in our faculty of nursing. Although two thirds of the respondents reportedly had experience as a mentor, mentee, or both, 35% had no experience in a mentoring relationship. Thus, clearly, the informal nature of our current mechanism for mentoring new faculty is inadequate. All newcomers to the academic milieu should have the opportunity to be mentored.

The roles and responsibilities of mentors cited as important by participants in this study were consistent with the literature. Similar to others (Kavoosi et al., 1995; Peters & Boylston, 2006), the focus was more on the career function, such as "teaching the job," than the psychosocial function of mentoring. Although the formal mission, philosophies, goals, and the policies of the institution and the individual school or department are generally available to newcomers, ideally, insight into the processes should be gleaned from seasoned faculty. On the other hand, although the social aspect may not have been deemed as important, caring, as demonstrated through encouragement and support, is central to the mentoring role.

The quantitative and qualitative data related to stressors for new faculty concurred with the themes reported by others (Sorcinelli, 2004). The most significant stressors were related to "fitting in" to the academic environment and learning the practical aspects of the teaching role. Although many newly hired nursing educators come with a wealth of clinical expertise, most enter the world of academia with little or no formal classroom teaching experience. According to Kavoosi et al. (1995), "new faculty must quickly become aware of the criteria for retention, tenure, and promotion if they are to be successful in their new professional role" (p. 420). Through a caring mentoring relationship, these newcomers can, and do, thrive in this milieu.

The characteristics of a "good mentor" that emerged as most important in this study were consistent with those described by others (Berk et al., 2005; Horton, 2003; Smith et al., 2001; Snelson et al., 2002). Although teaching expertise is a vital and practical consideration in the selection of a teaching mentor, clearly, caring is also essential. One could argue that most if not all of the mentor characteristics cited as desirable by participants, such as trustworthiness, respectful, willing to share experiences, and approachable and effective listener, are encompassed within the definition of caring.

On the basis of findings related to the benefits of being a mentor and of mentoring relationships, it is evident that mentoring is a rewarding role for nurse educators. Akin to the literature, participants perceived individual and broader faculty benefits to mentorship. This evidence reinforces the importance of establishing mentoring programs in nursing education.

The two primary barriers to mentoring reported in this study were related to lack of individual time and lack of faculty support. Both of these factors reinforce the importance of administrative support for formal mentoring programs. Mentors must be adequately prepared for their role. In addition, individuals who engage in mentoring their novice peers should be acknowledged in some way for the time and effort involved to fulfill the role effectively. Although supportive infrastructure, such as an orientation program and ongoing professional development for mentors, as well as access to secretarial and/or research assistant services and funding for joint projects may entice more senior faculty to be mentors, these resources tend to be underutilized (Kavoosi et al., 1995).

Thus, the evidence from this study was consistent with previous research and lends support for mentoring programs in nursing education. Caring, as a core nursing value, was a common thread throughout our findings; it should be central to the development of a nursing faculty mentoring program. Snelson et al. (2002) conceived a mentoring program that was an intentional and planned effort to foster a caring atmosphere. This "caring atmosphere nurtures and encourages growth of novice faculty, creating a work environment that facilitates professional development, role socialization, and development of survival skills" (p. 658).

"Developing new teachers through mentoring requires a coterie of caring and committed faculty, thoughtful planning, and an administration that values and supports the whole process" (George & Peace, 1997, p. 2bw). It is important to formally acknowledge mentoring as central to the philosophy of the faculty or school by educating faculty about the importance of mentoring. On the basis of their lived experience in developing a program for mentoring new faculty, George and Peace (1997) argued that "effective mentoring needs an organizational home, structure, and recognition" (p. 36). Therefore, structured mentoring programs should be established to include an orientation program and ongoing structure and support for mentors. Mentors must be formally acknowledged and rewarded for the time, commitment, and energy spent on this important endeavor. This could be accomplished through a variety of possible avenues, such as reductions in teaching workload, formal recognition, or the availability of small cache of funding for mentoring-related research (George & Peace, 1997).

In summary, recruitment and retention is a critical issue in nursing education. A caring mentoring environment is an important and timely strategy to ensure that the integrity of nursing education is sustained in the years to come. Although establishing a mentoring program in nursing education is not without pitfalls, our study has provided substantive evidence that sound rationale for a mentoring initiative can be validated with a mentoring needs assessment.

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