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From Student to Mentor in Clinical Practice: Health Care Students' Experiences in a Mentoring Course

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ABSTRACT

Background: Clinical practice is a compulsory and essential part of health care studies in Finland. However, there are not enough trained mentors at clinical practice facilities. The objective of this mentoring course was to provide students training at the earliest possible stage. **Method:** Students from various health care disciplines participated in the mentoring course. The course was conduct- ed entirely online, and learning methods included lectures, small-group exercises, and discussion forums. **Results:** Students' responses indicated the mentoring course enabled them to learn about a mentor's role and about various mentoring theories. **Conclusion:** The mentoring course helped prepare health care students for their future work life and for the clinical mentoring of students. The course expanded students' views on a mentor's duties and helped them reflect on their personal strengths and weaknesses. [*J Nurs Educ*. 2023;62(5):298-301.]

Clinical practice is an essential part of health care studies in Finland. In clinical practice, students apply theoretical knowledge and skills acquired in their studies in an authentic work environment. Students in clinical practice are mentored by professionals who work in the training unit. However, no special training in mentoring students is required; any health care professional who is qualified in their field can mentor students (Tuomikoski et al., 2018).

Student supervision, mentoring, and orientation constitute general competence areas of health care professionals (Eriksson et al., 2015). However, health care studies rarely address these areas. Although high-quality mentoring during clinical practice has been found to be an important factor in students' professional growth and development of professional identity, mentoring courses usually are not offered until students have graduated (Gusar et al., 2020; Tuomikoski et al., 2020). In fact, many newly graduated health care professionals who are given the duty of mentoring students in clinical practice report the feel ill-prepared for the task (Brown et al., 2012; Luhanga et al., 2010; Skela-Savić & Kiger, 2015).

Method

The objective of this study was to evaluate the effectiveness of a new mentoring course for graduating students and examine student perceptions about mentoring using pre- and postintervention surveys of students' perceptions about mentoring. The mentoring course was offered in the Spring of 2021 as part of the HARKKA project (From Training to Working Life in Changing Operating Environment in the Health Sector). The three ECTS (European Credit Transfer and Accumalation System) course, "Become a Mentor in Clinical Practice From Being a Mentee," was a collaboration between Oulu University of Applied Sciences, Oulu University, and Tampere University of Applied Sciences. The course was offered as an elective course, and participants were final-semester students (*n* = 31) in the following degree programs: nursing (*n* = 7), emergency care (*n* = 7), biomedical laboratory science (*n* = 14), physiotherapy (*n* = 1), and radiography and radiation therapy (*n* = 2). The students were enrolled in Oulu University of Applied Sciences (*n* = 14) and Tampere University of Applied Sciences (*n* = 17).

The mentoring course was offered entirely online via Zoom. Learning methods entailed lectures and small-group exercises. Each lecture had one theme, and the theme was studied further in small groups. The course included 12 hours of lectures and 4 hours of seminars. In addition, 65 hours was allocated for small group work and independent work, as well as for making a video recording. The themes included various methods of mentoring, mentoring situations, evaluation, giving feedback, challenging mentoring situations, and mentoring international students. The small-group exercises included making videos related to mentoring situations.

Students' perceptions on mentoring were examined using student surveys that were completed before and after the course. Participation in both surveys was voluntary, and students were informed that their responses would be used in an article that would be submitted for publication.

Before starting the course, students completed a precourse survey. The precourse survey required students to reflect on their personal strengths as a mentor for students, describe a successful mentoring relationship, and analyze the reasons
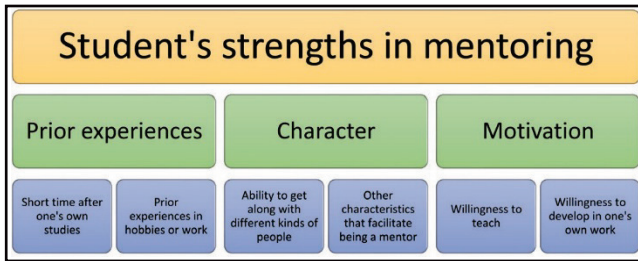
Figure 1. Strengths identified by students before the course.

why mentoring relationships do not always succeed. The postcourse survey aimed to investigate how the course had changed the students' opinion on their own strengths, as well as students' perceptions on the content, implementation, and success of the course.

Students' responses were analyzed using thematic and inductive content analysis (Mayring, 2000). The first stage entailed grouping the responses under each question. Responses for each question then were assigned to preliminary themes, which were further elaborated and specified by inductive content analysis.

Results

Students' Preconceptions Regarding Their Personal Strengths as Student Mentors

All of the participants responded to the surveys before and after the course. Students' responses to the precourse survey included three strengths: prior experiences, character, and motivation (**Figure 1**).

Prior experiences. The first strength, prior experiences, was identified by all of the students. The most common feature of prior experiences was how students remembered their own clinical practice. The students believed they could empathize with their future mentees because their own training took place recently. The students described having different mentors with different ways of mentoring, which enabled them to modify their own actions to benefit their future mentees. In addition, prior experiences included mentoring experiences from other aspects of life, such as hobbies or work. One student said, "I would imagine that my strengths as a mentor include my previous experiences in supervising children and adults on different courses, and providing orientation for a new employee at work."

Character and personality. Students also frequently identified character and personality in their responses. The most common feature students described was being able to get along with different types of individuals of all ages. Students also mentioned other characteristics, such as being supportive and patient. One student said, "I think I am patient and can act calmly when providing guidance."

Motivation. Another strength students described was motivation. Some students expressed a willingness to share their competence or to teach future mentees, and some students viewed mentoring as an opportunity for their own development in their own work, as well as being the first step toward becoming a teacher (**Figure 1**).

Figure 2. Words students used to describe successful mentoring before the course.

Students' Descriptions of Successful and Unsuccessful Mentoring Relationships

Successful mentoring relationships. The precourse survey required students to describe a successful mentoring relation- ship using adjectives (**Figure 2**) and to give the reasons regarding why they had chosen those adjectives. The most frequently used adjectives to describe a mentoring relationship were supportive, individualized, and open-mindedness. Foster et al. (2015) described similar features in their study. Students described supportive as giving space to students to perform tasks independently under guidance. In addition, being supportive was associated with supporting students both in success and failure alike. Individualized mentoring included considering students as individuals and mentoring in accordance with each student's skill set. Students' definitions of seeing someone as an individual included different character types. Timid students with low self-confidence can gain more trust in their own skills with the slightest positive feedback received. On the other hand, adjusting mentoring to students' skills also proved to be more of a challenge. Students' responses associated open-mindedness with features such as mutual communication in which both the mentor and the student reflected and shared things. Many ac- counts also highlighted an unprejudiced attitude.

Unsuccessful mentoring relationships. The precourse task also required students to identify reasons why some mentoring relationships were unsuccessful (**Figure 3**). The most frequent reasons for failed mentoring relationships were difficulty in mentor–student interactions caused by lack of communication, the mentor's inability to provide feedback, or insufficient social skills. Another frequently mentioned reason was mentor–student misunderstanding, which can lead to other problems, such as mistrust between the mentor and the student. For example, Hagqvist et al. (2020) suggested different cultural backgrounds of the mentor and the student could create extra tension between them.

The students highlighted that lack of orientation also can lead to failed mentoring relationships. Lack of orientation may entail issues such as the mentor not having enough information on the objectives or practices of the clinical practice or on mentoring (Tervajärvi & Rintala, 2021). The students may believe they have had inadequate orientation on the workplace practices. In addition, both the mentor and the student may be ill-prepared for the clinical practice period. Elcigil and Sari (2008) stated that successful clinical practice requires mentors to provide new information to students and to have students do their own data retrieval.
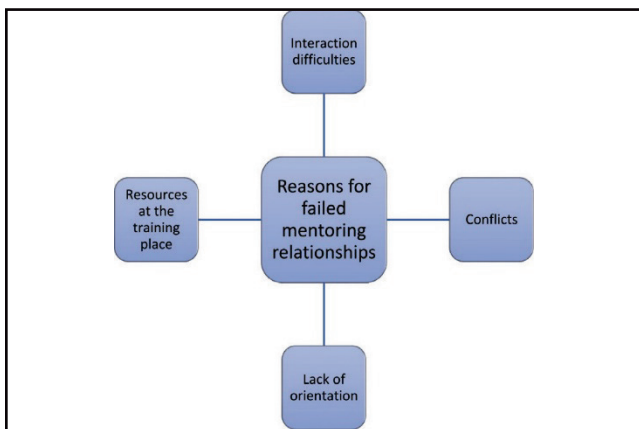

Figure 3. Students' reasons for unsuccessful mentoring relationships.

The responses also indicated that lack of resources at the training location may complicate the mentoring relationship. The nursing environment is usually a busy work workplace, and there often are not enough mentors for all of students; therefore, not all mentors are highly motivated. In addition, mentors frequently may change during the training period, which makes it hard to form a good mentor–mentee relationship. Ridley (2012) noted that mentors need to be able to ad- dress the needs of students as well as the needs of patients and their families, which requires extra effort.

ChangedPerceptionsonStrengthsasaMentorfor Students

In the postcourse survey, the students reported having similar strengths to those they had in the precourse task. However, some of the students stated the mentoring course had given them new strengths as well. For example, students thought they had been given new ideas for their actions, ways of providing feedback, and the theoretical knowledge needed for mentoring.

Weaknesses of the students as mentors can be divided into two categories: lack of experience and characteristics. Lack of experience was associated with little experience in work life and inexperience in mentoring students in the realm of health care. The students' responses presented this as issues such as lack of self-confidence or difficulties in giving the students the right amount of challenge and space during the mentoring period. Characteristics entailed the students' personal features, such as inability to listen or impatience, which they acknowledged as factors that hampered the mentoring process. The students' responses also mentioned difficulty in providing negative feedback, which may be related to both categories through the mentor's lack of work experience or lack of self-confidence to provide negative feedback.

The postcourse task also asked students to reflect how the mentoring course had changed their perceptions on mentoring. The responses were divided into three main categories:
(1)   the mentor's role; (2) theory of mentoring; and (3) personal experiences (**Figure 4**).
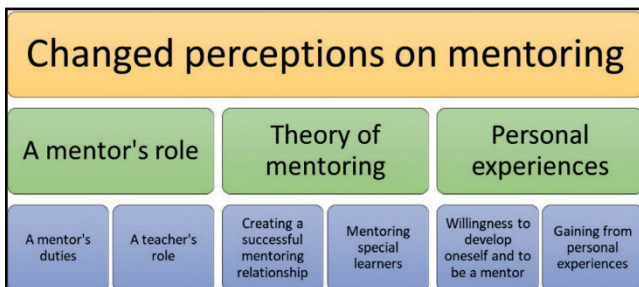

Figure 4. Students' changed perceptions on mentoring after the course.

The mentor's role illustrates how the course helped students clarify the mentor's duties during clinical practice. In addition, the students were able to explore the role of a mentor and what kind of cooperation should exist between the mentor and the supervising teacher, both during and beyond the clinical practice period. The theory of mentoring entails creating a successful mentoring experience and mentoring special learners. The students reported the course provided them with new perspectives and methods to create a successful mentoring experience. They also mentioned learning about learners with special needs and about cultural differences in mentoring. The third category included personal experiences. Some of the students highlighted how the course increased their willingness to mentor students and to develop as a mentor. For some, the course was an eye-opening experience on how mentoring does not need to be only compulsory; it also can be a rewarding experience. Some students also believed that participating in the course would prove useful in their own clinical practices. The students mentioned the course enabled them to pay more attention on the mentoring they receive and to require more from their own mentors if needed.

The students generally were very satisfied with the mentoring course. They thought the course was well organized and successful, describing the course as being functional, coherent, and well-suited for special learners. Students indicated that there was a good balance between lectures, small groups, and discussions, and that they were constructed to activate the students. The students believed that the course content emphasized important aspects of the topic and that the course tasks promoted their learning. They also appreciated the online implementation of the course using Zoom and the collaboration between different universities of applied sciences.

Although students indicated liking the course, they offered suggestions for improving the course. One suggestion for improving the

course was to have a more practical approach to mentoring. For example, students recommended including an exercise with simulated difficult mentoring situations. Another suggestion was for students to spend more time working in small groups.

The biggest limitation of this course was time management. The students came from different degree programs and two different universities, which made coordinating the course schedules challenging.

Conclusion

There is a need for mentoring courses prior to graduation. Students who participated in the mentoring course indicated that the course provided benefits both for their future work life and for their own studies. The students highlighted that the course helped them to reflect on themselves and to demand better mentoring in their future clinical practices. Unlike some other studies (e.g., Jokelainen et al., 2011), this study did not identify a need for closer collaboration between the mentors and the clinical practice organizer. However, this could be attributed to the fact that the study did not provide students with a realistic picture of every nursing professional's opportunity to participate in mentoring courses.

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