

**INSTITUTIONAL FACTORS ASSOCIATED WITH PREPAREDNESS OF
NURSE MANAGERS IN MENTORSHIP ROLE: A CASE OF KENYATTA
NATIONAL HOSPITAL, KENYA**

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UNIVERSITY.**

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DECLARATION

‘This thesis is my original work and has not been presented for a degree or any other award in any other university.’

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DEDICATION

I dedicate this thesis to God for good health and peace of mind and my family for understanding, patience and inspiring.

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I acknowledge my supervisor's Dr. Susan Njuguna Dr. Moses Mutua Mulu for their guidance, support, supervision, and valuable insights throughout academic journey.

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ABSTRACT

Mentorship plays a crucial role in the professional development of nurses, emphasizing a patient-centric approach to nursing care. However, there exists a lack of clarity regarding the preparatory measures for nurses in charge posing challenges in effectively conveying their multifaceted roles. Globally, (Manion et al., 2021) argues that preparedness of nurse managers in mentorship roles is pivotal. According to (WHO, 2020). Sub-Saharan Africa, nurse managers are tasked with an intricate interplay of leadership, management, and mentorship roles, demanding a nuanced understanding of these roles. Nurse managers need effective mentorship training to improve their effectiveness in their roles (KNH, 2019). This study aimed to assess institutional factors associated with the preparedness of nurse managers for mentorship roles: a case of Kenyatta National Hospital. The focus was on leadership, policy, motivation, and training factors. The study employed a descriptive cross-sectional design, utilizing a simple random sampling strategy to engage 88 respondents. Data collection involved a carefully designed semi structured self-administered questionnaire comprising a blend of open-ended and closed-ended inquiries to ensure a comprehensive exploration. Prior to this study, a pre-test was done at KUTRRH to improve the tool's validity and reliability. The resultant quantitative data was analysed using SPSS version 27. Data was presented through tables, figures, and pie charts. Necessary permissions were obtained from relevant authorities. Participants were informed about study objectives before consenting. Numerical codes were used to ensure privacy on questionnaires, meticulously secured when not in use. Correlation coefficient was used to determine the association between variables. Key findings revealed that most nurse managers at Kenyatta National Hospital are female, with an average age above 50 years, and possess 2 to 5 years of working experience, with the majority holding a bachelor's degree in nursing. While 42% of participants were moderately prepared for mentorship roles, 58% were inadequately prepared due to time constraints, workload, and lack of management support. There was a positive correlation between workload and preparedness for mentorship ($r = .411$, $p < .01$) and between involvement in policy-making and preparedness ($r = .281$, $p = .008$). Additionally, there was a significant association between the provision of standards on mentorship ($r = 3.18$, $p = .02$) and training programs ($r = 3.18$, $p = .02$) with preparedness. Many participants (58%) felt motivated due to remunerations and allowances, though only 38% attended training programs specifically for mentorship. Nurse managers preparedness in mentorship roles could be significantly enhanced through support. Nurses were not actively involved in policy-making processes, leading to a lack of clear guidelines for mentorship programs despite existing standard operating procedures within nurse manager units. Although nurse managers were incentivized by remuneration and training incentives, the absence of feedback on their performance as mentors proved demotivating. Lack of communication with senior management hinders their preparedness for mentorship roles. The study recommends increased leadership support, clearer guidelines on mentorship roles, involvement in policy-making, and provision of resources such as time and reduced workload to enhance nurse manager preparedness for mentorship roles.

TABLE OF CONTENTS

DECLARATION	ii
DEDICATION	iii
ACKNOWLEDGEMENT.....	iv
ABSTRACT.....	v
LIST OF TABLES	viii
LIST OF FIGURES	x
ABBREVIATIONS AND ACRONYMS.....	xi
CHAPTER ONE	1
INTRODUCTION	1
1.1 Background	1
1.2 Problem Statement	4
1.3 Purpose of the study	6
1.4 Study objectives	7
1.5 Research Questions	7
1.6 Justification of the Study	8
1.7 Significance of the Study	10
1.8 Assumption of the Study	12
1.9 Operational Definition of Terms	13
CHAPTER TWO	16
LITERATURE REVIEW	16
2.1 Introduction	16
2.2 Leadership factors associated with preparedness of nurse manager mentorship roles.	18
2.3 Policy factors associated with preparedness of nurse managers mentorship role.	29
2.4 Motivation factors associated with preparedness of nurse managers mentorship role.....	35
2.5 Training factor associated with preparedness for the nurse manager mentorship role.....	41
2.6 Theoretical Framework	49
2.7 Conceptual framework	51
CHAPTER THREE	54
METHODOLOGY	54
3.1 Introduction	54

3.2 Study Area.....	54
3.3 Research design.....	55
3.4 Target Population	56
3.5 Sampling procedure.....	57
3.6 Inclusion and Exclusion criteria.....	60
3.7 Instrumentation.....	61
3.8 Validity and Reliability of Instruments.....	62
3.9 Data Analysis and Management.....	63
3.10 Ethical consideration	64
CHAPTER FOUR.....	68
RESULTS AND DISCUSSION	68
4.1 Introduction	68
4.2 Response Rate	68
4.3 Demographic Characteristics of the study participants.....	68
4.4 Leadership Factors	76
4.5 Policy Factors.....	99
4.6 Motivation Factors	122
4.7 Training Factors	138
4.8 Correlation matrix for factors associated with nurse manager mentorship role preparedness:.....	150
4.9 Discussions of the findings	153
CHAPTER FIVE	155
SUMMARY, CONCLUSION AND RECOMMENDATION.....	155
5.1 Introduction	155
5.2 Summary of the results.....	155
5.4 Recommendations	162
5.5 Suggestions for future research	163
REFERENCES.....	164
APPENDICES.....	171
Appendix I: Participant’s informed consent.....	171
Appendix II: Questionnaire	174
Appendix III: Nacosti Permit	1
Appendix IV: Letter from Kenyatta National Hospital.....	2
Appendix V: Letter from Kenya Methodist University	4

LIST OF TABLES

Table 4.1: Factors associated with the provision of leadership resources	84
Table 4.2: Factors associated with management support for nurse managers in their role of mentorship	90
Table 4.3: Factors associated with the mentorship program at Kenyatta National Hospital.....	95
Table 4.4: Factors associated with nurse manager involvement in the policy-making process	105
Table 4.5: Factors associated with the use of standard operating procedures among nurse managers	109
Table 4.6: Factors associated with guidelines on mentors' roles	117
Table 4.7: Factors associated with support given to nurse managers	122
Table 4.8: Factors associated with nurse manager mentorship and coaching	126
Table 4.9: Remuneration factors associated with nurse manager's mentorship roles.....	130
Table 4.11: Nurse manager participation in leadership meetings in preparation for mentorship roles.....	135
Table 4.11: Training incentives for nurse managers in preparation for mentorship roles	138
Table 4.12: Continuous medical education-related factors that affect nurse manager preparedness for mentorship roles	141
Table 4.13: Communication-related factors that affect nurse manager preparedness for mentorship roles.....	145

Table 4.14: Career development opportunities provided to nurse managers in preparation for mentorship roles.....	150
Table 4.15 Correlation matrix.....	152

LIST OF FIGURES

Figure 2.1: Conceptual framework showing relationship between study variables ...	53
Figure 4.1: Age of the nurse managers in complete years	69
Figure 4.2: Gender of the nurse manager	70
Figure 4.3: Nurse managers' years of experience	72
Figure 4.4: The highest level of education for the nurse manager	74
Figure 4.5: Level of leadership support given to the nurse managers.	85

ABBREVIATIONS AND ACRONYMS

ACN:	Assistant chief nurse
DDNS:	Deputy Director nursing services
KEMU:	Kenya Methodist University
KNH:	Kenyatta National hospital
KMTC:	Kenya Medical training college
NACOSTI:	National commission for science, technology, and Innovation.
NMS:	Nurse Managers
SERC:	Scientific ethics review committee
SPSS:	Scientific package for social sciences
UON:	University of Nairobi
KUTRRH:	Kenyatta university research and referral hospital

CHAPTER ONE

INTRODUCTION

1.1 Background

Mentorship has been fundamentally embedded in nursing care. It is one of the ways that nurses grow into their profession to achieve patient-centered care (Bodur & Infal, 2015). Mentoring involves a dynamic connection between two individuals to support one another in their personal and professional lives, ultimately enhancing their effectiveness in their respective roles (Kukkonen, 2020). Mentoring roles within the healthcare context are undertaken by nurse managers who are heads within their respective operational environments (Al-Sabei et al., 2019). However, several facts have created a different perception regarding the level of preparedness of most nurse managers to take up these managerial positions. Most nurse manager positions are not recruited competitively, making it difficult to comprehend the level of mentoring these individuals can offer (Cummings et al., 2019). Thus, the ability of nurse managers to offer quality mentorship is overlooked due to a lack of identifying organizational policy and set guidelines.

Quality healthcare depends on nurse managers' ability to conduct teaching assessments for the nursing staff and students, coordinate quality assurance activities for patient care, evaluate in-house training programs for nurses, produce reports periodically, and conduct training needs assessments for the junior staff. This can be effectively done when they are well-prepared to perform their roles (Choi et al., 2019). Further, Nurse Managers may not receive adequate training or professional development opportunities that prepare them for their mentorship role. This may be due to budget

constraints, limited resources, or a lack of emphasis on mentorship in nursing education and training programs. Lastly, Bodur (2015) argues that nurse managers may not receive the necessary support from their supervisors or the organization to effectively carry out their mentorship responsibilities. This may include limited resources, time constraints, or a lack of recognition and appreciation for their efforts. Nurse managers (NMs) play a fundamental role within a hospital setting, including mentoring, coordinating quality assurance activities, training needs assessment, and developing standard operating procedures within their setting (Kukkonen, 2020).

Globally, nurse ward managers' preparedness level for their pivotal role has emerged as a significant concern, leading to challenges in effectively disseminating their managerial responsibilities (Manion et al., 2021). This concern underscores the crucial need to explore factors contributing to this inadequacy. Institutional factors play a substantial role in shaping nurse manager preparedness, encompassing facets such as role-specific training, leadership policies, motivational strategies, remuneration structures, and deliberate mentorship exposure for junior staff. Literature underscores the pivotal role of post-graduate education for nurse ward managers, as it equips them with an enhanced grasp of the intricate managerial dimensions inherent to nursing (Gray & Brown, 2016). Recognizing the international context, these findings underscore the imperative of comprehensive measures to bolster nurse manager readiness, which holds relevance for elevating healthcare management practices.

In the regional context, the 'State of the World's nursing' report published by the World Health Organization in 2020 accentuates the significance of comprehending leadership functions within nursing (World Health Organization [WHO], 2020). In Sub-Saharan

Africa, nurse managers are tasked with an intricate interplay of leadership, management, and mentorship responsibilities, demanding a nuanced understanding of these roles. The management facet of nurse managers' mentorship roles is particularly important, as it necessitates the adept utilization of knowledge and skills to guide and support their subordinates. However, the state of preparedness of nurse managers for these multifaceted roles remains a challenge across Africa, particularly concerning the effective execution of mentorship duties. In a broader scope, Douglas (2017) conducted a study that resounds with these concerns, highlighting how the inadequate readiness of nurse managers in mentorship functions impedes the seamless management and supervision of nursing staff and students within clinical settings. This regional insight illuminates the pressing need for targeted interventions to enhance nurse manager preparedness, underscoring its reverberating impact on healthcare provision and education across Africa.

In the local context, the intricacies of nurse manager roles further crystallize. In Kenya, local considerations emphasize the need for nurse managers to embody leadership and management competencies and adeptly navigate the realm of mentorship (Kemboi, 2015). Effective mentorship, rooted in a firm grasp of leadership nuances, emerges as a critical bridge connecting theoretical knowledge with pragmatic application. However, existing literature underlines a notable gap in the preparedness of nurse managers in Kenya to fulfill these multifaceted roles. This gap reverberates through the effective guidance and development of nursing staff and students within clinical domains. In tandem with this, the indistinct process of elevating nurse managers to their positions adds complexity, necessitating a comprehensive exploration of mentorship role preparedness within the Kenyan healthcare landscape.

Further, institutions also put into varied focus strategies to improve nurse managers' ability and skills in attaining improved outcomes in their roles through clear policy, leadership, motivation, and staff training. Nurse Managers are trained and effectively prepared to guide and lead other nurses and nursing students within their jurisdiction (Hoover et al., 2020). However, the situation differs in low-resource settings where effectively preparing NMs for their role is not considered integral to their performance (Nagle et al., 2021).

Kenyatta National Hospital has put in place measures to guide training and continuous education as well as policy and leadership in its strategic plan. However, actualization, monitoring, and implementation of these strategies have proved difficult. This has made it difficult to understand the institution's contribution to nurse competencies regarding training, continuous education programs, intentional exposure, and motivation. Additionally, the level of nurse managers' preparedness and efficacy in disseminating their duties has not been effectively investigated within the local context.

1.2 Problem Statement

The effectiveness of nurse managers in providing essential mentorship to their subordinates is pivotal for enhancing nursing skills and elevating patient care standards. Nurse managers should ideally possess the requisite knowledge and competencies to offer effective mentorship, guiding their staff toward professional growth. Furthermore, creating a positive work environment conducive to continuous learning and staff development falls within their purview. For this purpose, nurse managers must be adequately prepared through mentorship training programs that

equip them with the skills necessary to mentor effectively and hone their leadership and communication abilities to foster a supportive workplace. Some specialized nurses exit the institution following training and appointment as nurse mentors. In contrast, others shun the responsibility due to unpreparedness, perceived lack of skills, time constraints, and elevated workloads.

At the Global level, unit managers are poorly prepared raising concerns about their readiness (Manion et al., 2020). Without this leadership support, nurse managers may struggle to fulfill their mentorship role adequately, which can have negative consequences for nursing students, junior nurses, the nursing profession, and patient care.

In Africa, the state of the world article published by (WHO, 2020) confirms the importance of understanding mentoring role. Lack of leadership resources can be a significant barrier to nurse manager mentorship role preparedness. A study by Liang et al. (2016) found that leadership and safety climate significantly predict nurses' intention to stay in their current positions. Another study by Farag et al. (2017) suggests that leadership style and ward climate can contribute to safe nursing practices.

In south Sahara Africa managers are tasked with a complex leadership management, and mentorship responsibilities (Douglas, 2020). This intricate landscape underscores the need to assess the readiness of nurse managers at KNH, Kenya for their mentorship roles, identify deficiencies, and devise strategies to enhance their preparedness, which will bolster the caliber of patient nursing care.

Amidst the backdrop of Kenyatta National Hospital (KNH) being a teaching and referral hospital, it's noteworthy that various channels for feedback exist, as evidenced by the KNH/M&46/177 Nursing Standards Customer Feedback Register and the KNH/PD/45/170A Complains and Compliment Customer Feedback Register. These registers are platforms where student nurses and patients/relatives can articulate their experiences and concerns regarding nurse managers' preparedness for mentorship roles and patients' nursing services. Moreover, in alignment with HR 2023, KNH has implemented cross-cutting policies encompassing quality, anti-corruption, and environmental aspects, underscoring the institution's commitment to excellence. However, a notable void emerges concerning the absence of established nurse manager preparedness in mentorship. This deficiency forms a critical aspect of nursing leadership that necessitates comprehensive exploration, considering the hospital's teaching and referral status. Thus, this study was poised to bridge this knowledge gap by delving into the mentorship role preparedness of nurse managers at KNH, consequently contributing to enhancing mentorship practices within the hospital's dynamic healthcare system. This study assessed the institutional factors associated preparedness of nurse managers' readiness for their mentorship roles at KNH, illuminating the path toward informed improvements within the healthcare ecosystem.

1.3 Purpose of the study

The purpose of this study was to comprehensively assess the factors influencing nurse managers' preparedness in mentorship roles at Kenyatta National Hospital (KNH). Specifically, the study assesses leadership, policy, motivation factors and training on nurse managers' readiness to undertake mentorship responsibilities within the hospital

setting. By examining these key factors, the study sought valuable insights into the dynamics shaping nurse manager mentorship preparedness at KNH, ultimately contributing to enhancing mentorship practices and delivering high-quality patient care within the institution.

1.4 Study objectives

1.4.1 Broad objective

An assessment of institutional factors associated with preparedness of nurse managers in mentorship role: a case of Kenyatta national hospital.

1.4.2 Specific objectives

- i. To determine leadership factors associated with preparedness of nurse manager mentorship role at KNH
- ii. To examine policy factors associated with the preparedness of nurse managers in mentorship roles at KNH
- iii. To identify motivation factors associated with the preparedness of nurse managers in mentorship roles at KNH.
- iv. To evaluate training factors associated with nurse preparedness for the nurse manager mentorship role at KNH

1.5 Research Questions

- i. How are leadership factors associated with the preparedness of nurse managers' mentorship role at KNH?
- ii. How are policy factors associated with the preparedness of nurse managers in mentorship roles at KNH?

- iii. How are motivation factors associated with the preparedness of the nurse manager in a mentorship role at KNH?
- iv. How are training program factors associated with the preparedness of the nurse manager's mentorship role at KNH?

1.6 Justification of the Study

Nursing mentoring is important in the lives of nurses and associates in the overall medical system. The nurse manager is in charge of the daily activities of something like the organization and is held accountable for them. This involves performing teaching evaluations of nursing employees and students, integrating quality assurance efforts for patient safety, conducting training evaluations, evaluating in-house training evaluations and producing reports regularly, and developing standard operating procedures.

The Nurse Managers must also give nurses and other healthcare staff inspiration, advice, and direction. They oversee and impact the professionalism of most nurses on the frontline of healthcare.

Kenya's prestigious Kenyatta National Hospital (KNH) has faced reproach regarding its recruitment of nurse managers ill-equipped to fulfill the demanding mentorship responsibilities essential in contemporary workplaces. Scholars have lamented the presence of unequipped nurses delivering substandard patient care and contributing to hospital-acquired infections, which are directly linked to prolonged hospital stays—a consequence of inadequate mentorship for students and novice nurses (Kemboi, 2015). Despite KNH's distinction as a specialized referral level six hospital, clientele

dissatisfaction persists due to perceived incompetence and lack of expertise among nursing staff (Kemboi, 2015). Consequently, prompted by numerous grievances, researchers have explored institutional factors associated with nurse managers' readiness for the mentorship role at KNH. The objective was to raise awareness and provide recommendations to the management board regarding the enhancement preparedness of nurse managers for mentorship. Implementation of study findings is anticipated to inspire mentors, students, and junior nurses, leading to enhanced patient care, reduced hospital stays, and decreased financial burden, benefiting patients, their families, the hospital, and the broader healthcare system.

This study's rationale stems from the urgent need to address deficiencies in nurse manager preparedness for the mentorship role at KNH. Mentorship is pivotal in nurses' professional development and the delivery of patient-centered care, aligning with global nursing practice standards. However, nurse managers' lack of clarity and readiness for this role presents a significant obstacle to effectively fulfilling their duties. Feedback mechanisms such as the KNH/M&46/177 Nursing Standards Customer Feedback Register and the KNH/PD/45/170A Complains and Compliment Customer Feedback Register highlight the importance of soliciting input from student nurses and patients/relatives (Kemboi, 2015). These voices express concerns about nursing services, underscoring the imperative to enhance nurse manager mentorship preparedness. KNH's overarching policies, notably HR 2023, underscore the institution's commitment to excellence, necessitating a comprehensive assessment of readiness among nurse managers' preparedness in mentorship roles (Kemboi, 2015). Consequently, the study's outcomes are poised to guide policy reforms and strategic interventions to strengthen nurse manager preparedness in mentorship roles and

improve overall patient care standards within KNH's teaching and referral framework. Ultimately, this research holds significance in advancing nursing practice standards and healthcare provision in Kenya and beyond.

1.7 Significance of the Study

The significance of the study can be analyzed at different levels, including national, county, and local hospitals. At the national level, the study can provide insight into the preparedness of nurse managers to undertake mentorship roles, which can be used to inform policies and strategies to enhance mentorship and leadership development among nurses. The findings can also inform the development of national guidelines on the preparedness of nurse managers in mentorship roles through mentorship programs in healthcare institutions. This can contribute to having knowledgeable, competent staff nurses and students to improve patient care quality.

At the county level, the study can inform healthcare administrators and policy makers on the factors associated with the preparedness of nurse managers in mentorship roles undertaken in various healthcare settings. At the hospital level, the study findings can inform hospital administrators and management about the institutional factors associated with the preparedness of nurse managers' mentorship roles. Hospital management can use the findings to design and implement mentorship programs that enhance the mentorship skills of nurse managers, which can lead to improved healthcare quality.

The study findings can inform nurse managers of the factors associated with their preparedness to undertake mentorship roles at the nursing level. This can help nurse

managers identify areas of weakness in their mentorship skills and seek professional development opportunities to enhance their mentorship abilities. The findings can also inform the development of training programs geared towards improving the mentorship skills of nurses.

Finally, to the patient, the study can improve patient care quality in healthcare institutions. This is because nurse managers well prepared to undertake mentorship roles can impart knowledge and skills to their subordinates, leading to better patient outcomes. Thus, the study can improve the health outcomes of competent, knowledgeable nurses and quality patient care.

At the heart of healthcare provision lies the fundamental link between mentorship and patient care outcomes, warranting a closer examination of its significance. Patient care quality is intricately tied to the competence and preparedness of nurse managers in their mentorship roles. Nurse managers with the requisite mentorship skills can effectively guide and support their teams, leading to enhanced patient outcomes, reduced medical errors, and improved overall healthcare quality (Collette, 2015). Moreover, a well-structured mentorship program ensures that nurses receive ongoing support and professional development opportunities, directly translating into better patient care experiences. By clarifying the significance of mentorship on patient care, this study sheds light on nurse managers' critical role in shaping healthcare outcomes. It underscores the imperative for continuous improvement and investment in mentorship programs across all levels of healthcare delivery.

Furthermore, the significance of mentorship on patient care extends beyond immediate healthcare settings to broader societal impacts. Patients benefit from improved clinical

outcomes and heightened trust and satisfaction in the healthcare system. Effective mentorship fosters a culture of collaboration, communication, and continuous learning among healthcare professionals, which enhances the overall patient experience (Collette, 2015). Additionally, through mentorship programs, healthcare institutions demonstrate their commitment to excellence and patient-centered care, which can enhance their reputation and attract both patients and talented healthcare professionals.

1.8 Assumption of the Study

Based on the objectives of the study, several assumptions can be made. First, it was assumed that leadership within the institution plays a significant role associated with the preparedness of nurse managers in mentorship roles. This could be through providing guidance, resources, and support to nurse managers in mentoring. Second, it was assumed that policies within the institution impact nurse managers' preparedness in mentorship roles. Policies related to the recruitment, retention, and promotion of nurses could affect the quality and availability of potential mentees for nurse managers and their ability to prioritize mentoring duties. Third, it was assumed that motivation is a rather critical factor associated with the preparedness of nurse managers. Motivation could be associated with job satisfaction, recognition, and support from colleagues and superiors. Finally, training was assumed to be important in preparing nurse managers for their mentorship roles. This included formal training programs, on-the-job training, and support, such as mentorship from more experienced nurse managers.

1.9 Operational Definition of Terms

Mentorship

Mentorship, within the context of this study, refers to a structured and supportive relationship between a more knowledgeable or experienced individual and a less experienced nursing professional in Kenyatta National Hospital. This interaction goes beyond the typical supervisor-subordinate dynamic. It focuses on fostering the career development and advancement of the mentee.

Mentorship involvement can be measured through various methods, including self-reported questionnaires administered to mentors and feedback from mentees through staff appraising and evaluations, signing student progressive reports and feedback, and mentorship meetings. These instruments may include items assessing the frequency and duration of mentorship interactions in the clinical setting in the ward, the quality of support provided, and the perceived impact on the mentee's career development.

Nurse Manager

As defined in this study, a nurse manager is a nurse in charge of a ward, a nursing professional entrusted with overseeing the supervision of nursing staff within a clinical ward setting at Kenyatta National Hospital. This role encompasses a wide range of responsibilities, including but not limited to supervising patient care, ensuring students and junior staff meet their objectives, assessments, staff appraisal, and giving recommendations and feedback.

Nurse Manager Responsibilities and performance can be measured through various staff appraisals and surveys.

Role preparedness

Role preparedness, in the context of this study, refers to the readiness of nurse managers who are also wards in charge at Kenyatta National Hospital to fulfil their leadership responsibilities in a clinical setting effectively. This readiness encompasses various aspects, including conducting teaching assessments for staff and students for KNH, a teaching and referral hospital. Coordinate quality assurance activities for nursing care. Evaluate in-house training programs for nurses, produce reports, and evaluate and give feedback on the performance of students and junior nurses in the ward clinical placement. Preparedness in terms of knowledge demonstrated by academic qualification and training attended. Motivation and leadership support are needed in preparation for taking up the role.

Measurement of role preparedness can involve both quantitative and qualitative approaches. Quantitatively, it may involve assessing the nurse managers' performance and staff training through self-assessment surveys or performance evaluations. These instruments can gauge the level of competence and confidence among nurse managers in carrying out their duties effectively.

Qualitatively, role preparedness can be explored through in-depth interviews before appointments to that position and applying for the position as an indicator of expressing interest in the post and readiness to take up the post.

Motivation

Inspiring nurse managers through enumerations, rewards, promotions, and training opportunities involves strategically recognizing and incentivizing their contributions and performance within the institution. Enumerations entail documenting and highlighting the achievements and successes of nurse managers through formal channels. At the same time, rewards offer tangible incentives such as bonuses or additional benefits. Promotions recognize exceptional leadership and potential by advancing nurse managers to higher positions of authority. Training opportunities aim to enhance managerial skills and knowledge through formal programs or workshops. Measuring these initiatives involves assessing their impact on nurse manager motivation, engagement, and performance metrics such as productivity and employee satisfaction. By systematically evaluating the effectiveness of these strategies, the institution can foster a culture of excellence and collaboration among nurse managers, ultimately driving organizational success and enhancing patient care outcomes.

CHAPTER TWO

LITERATURE REVIEW

2.1 Introduction

This literature review explores the current state of factors associated with the preparedness of nurse managers globally. The review will also examine the situation in Kenya, particularly at Kenyatta National Hospital, and identify the gaps in preparedness and the challenges facing nurse managers in fulfilling their mentorship roles. The findings of this review will inform the development of strategies to improve nurse managers' preparedness in the mentorship role at Kenyatta National Hospital and other healthcare facilities in Kenya.

This literature review aims to delve into the intricacies of preparedness for mentorship roles among nurse managers worldwide, shedding light on the factors that shape their readiness for mentorship roles. Specifically, it will scrutinize the preparedness landscape in mentorship roles within Kenya, focusing on Kenyatta National Hospital, to discern prevalent gaps and challenges hindering nurse managers from effectively fulfilling their mentorship duties. In line with this exploration, it is imperative to underscore the significance of mentorship on patient care outcomes. Mentorship serves as a cornerstone for professional development within nursing. It plays a pivotal role in influencing the quality of patient care delivery. By elucidating the critical connection between mentorship and patient care, this review provides actionable insights for enhancing nurse managers' preparedness in mentorship roles at Kenyatta National Hospital and other healthcare facilities across Kenya.

According to a study by Gong and Li (2022), a mentoring relationship refers to the close interaction between individuals who possess greater experience and knowledge (typically older) and those who have less experience and knowledge (usually younger). Mentorship has been employed to aid in integrating and adjusting new employees within the workplace. Senior nurses are crucial in assisting newly recruited nurses by acquainting them with nursing-related policies and procedures, collaborating to enhance their skills, and offering social and emotional support. These elements, collectively, form the essential components of the induction process while also providing new nurses with valuable role models (Weimer, 2021).

Toivonen et al. (2019) also defined mentoring as a relationship where two individuals work together to help each other advance and become more effective in their roles. Involves conducting instruction and evaluation for nursing faculty and students, integrating patient care activities for quality control, evaluating in-house activities and producing reports periodically, and developing standard operating procedures for the department. According to a growing body of studies, mentoring has been shown to favor certain outcomes, including research output, staff retention of the faculty, and job happiness (Choi et al., 2019). However, recruiting nurse managers in most cases utilizes a conventional approach, which limits the overall consideration of key individual-based factors such as gender, educational attainment, years of expertise or experience, the level of expertise, and general suitability to the nurse manager role (Philpot et al., 2019).

2.2 Leadership factors associated with preparedness of nurse manager mentorship roles.

Leadership Resources

A poll of Florida's RNs revealed that lacking leadership materials impedes nurses from entering mentoring roles (Morsiani et al., 2016). However, Seventy-five percent of responders cited the lack of nurse transparency in policy creation and the perception that nurses do not generate income as key obstacles to nurses taking on leadership positions in the medical system. Some other obstacles include nurses inwardly, the general public's misunderstanding of their jobs, and the low wages they get now (Morsiani et al., 2016).

According to research by Rankin et al. (2016), several variables impeded the effective execution of the mentoring function. However, senior charge nurses are expected to perform various duties, including those of nurses, team leaders, educators, ward managers, mentors, role models, and supervisors. Irrespective of these, the charge nurses' ability to properly manage patient caseloads during clinical supervision time was hampered by the demands of conflicting priorities (Moeta & Du Rand, 2019). The major challenge to mentoring was found to be in managing staffing numbers. Ensuring a suitable skill mix, managing employee rotations, and dealing with the bank staff ratios took time and effort.

The lack of leadership resources can significantly be associated with the preparedness of nurse managers into mentorship roles. Liang et al. (2016) highlight the importance of informal leadership in practice, as well as how they can positively be associated

with the preparedness of the mentorship role of nurse managers. However, without formal leadership resources, informal leaders may not have the support and resources necessary to mentor and develop their colleagues effectively. This lack of support can lead to a decline in the preparedness of nurse managers to take on mentorship roles.

At the Global level, the Institute of Medicine (2016) report emphasizes sound nursing leadership to promote the development and implementation of effective mentorship programs. Without this leadership support, nurse managers may struggle to fulfill their mentorship role adequately, which can have negative consequences for nursing students, junior nurses, the nursing profession, and patient care.

In Africa, including Kenya, the lack of leadership resources can be a significant barrier to nurse manager mentorship role preparedness. A study by Liang et al. (2016) found that leadership and safety climate significantly predict nurses' intention to stay in their current positions. Another study by Farag et al. (2017) suggests that leadership style and ward climate can contribute to safe nursing practices. Without effective leadership and a positive ward climate, nurse managers may not have the necessary support and resources to mentor their staff nurses. Effective lack of leadership resources can significantly impact nurse manager mentorship role preparedness globally, regionally (in Africa), and locally (in Kenya). Without effective leadership and support, nurse managers may struggle to adequately fulfill their mentorship roles, negatively affecting nursing and patient care. The study will determine how the leadership resources factor is associated with the preparedness of nurse managers' mentorship roles in KNH.

Managerial Support

Managerial support entails providing clear structures to create a strong and well-outlined understanding of the level of care and commitment to nurse preparedness in managerial roles. According to Nagle et al. (2021), Participants felt there was a lack of guidance and training for those aspiring to become Nurse Ward Managers. Structured planning and training have also been found to be associated with nurse manager managers' preparedness in mentorship roles.

A study conducted by Nazir et al. (2021) assessing nurse managers' level of preparedness revealed that the common challenges nurse managers faced were system challenges and factors associated with preparedness. As a result, when asked about difficulties inside the structure, participants discussed the underlying structural issues that impeded their job, such as budgetary pressures and inadequate nursing staff, time constraints, motivation to mentor, and training issues. Furthermore, the data highlighted how unready they were for their nursing manager job and how little assistance they had in getting ready for it. Participants also expressed disappointment in being left out of crucial hospital choice processes. Considering future engagements, it was affirmed that most nurse managers did not envisage themselves in other leadership positions because of a lack of support from their institution, especially in mentoring new nursing staff and students.

However, Rankin et al. (2016) also determined that senior charge nurses' posts lacked suitable support. Nurses reported feeling unsupported due to several factors, including an absence of coaching and mentorship, no effective mechanism for addressing critical issues, and rapid new policies with inadequate time to incorporate changes. Managerial

support is critical to the mentorship role preparedness of nurse managers. According to Kaiser (2017), leadership styles, including mentorship, can significantly impact nurses' behavior. Transformational leadership, in particular, is associated with nurses' attitudes toward mentorship and facilitating the development of supportive mentoring relationships. In contrast, laissez-faire leadership has been associated with lower support for mentorship and weaker relationships between mentors and mentees.

The global significance of the Institute of Medicine (IOM) underscores its crucial role in administration when it comes to molding the trajectory of nursing practice in the future. The report emphasizes full partners in healthcare redesign efforts and to have a stronger voice in healthcare decision-making processes. This requires nurse managers to be prepared to take on mentorship roles and to develop the skills necessary to support and mentor their staff and students.

In the African region, including Kenya, there has been a growing recognition of the need for effective leadership and management in healthcare. According to Latimer (2015), trustee boards can be critical in providing leadership management and guidance to healthcare organizations. This includes supporting nurse managers in their preparedness for mentorship roles and ensuring that the organization has the necessary resources and policies to facilitate effective mentorship. Leadership and managerial support are critical factors associated with nurse manager mentorship roles at the global, regional, and local levels. Effective leadership can facilitate the development of supportive mentoring relationships and create a culture that values and prioritizes mentorship. Nurse Managers require support and guidance from their organizations to be effective mentors, and policies and resources must be in place to facilitate effective

mentorship. There is a need to assess how managerial support is associated with nurse managers' preparedness for the mentorship role at KNH.

Work load and time constraints

According to Maura et al. (2017), there has been an increase in the variety of working hour arrangements across different wards, job positions, and tasks. This shift involves moving away from the traditional fixed working hours that remain constant each day for a set number of days. Consequently, a noticeable trend has emerged wherein various "adaptive" scheduling alternatives are increasingly embraced. These include condensed workweeks, averaging of hours, flexible time arrangements, novel forms of shift work, and on-call work arrangements. These alternative arrangements have varying impacts and outcomes depending on the type of arrangement implemented. The most common obstacles to establishing mentoring skills to fulfill these jobs are the required labor and the limited time available. The respondents reported having inadequate time to develop their mentorship skills inside and outside work. Other impediments included restricted chances for mentorship inside institutions, a lack of time for growth as the mentor, and the perception of the need for additional mentorship preparation before participating in a mentoring role capacity (Peltzer et al., 2015).

According to Rankin et al. (2016), workload and long working hours are also impediments that prevent nurse mentorship roles from being carried out effectively. It was believed that the persistent unpredictability and ongoing reconfiguration of the medical system was an obstacle to nursing mentorship. It is not common practice to assess how the "continuous turmoil" and increased effort caused by some of the drastic

pendulum movements in priority affect patient care or the workforce. The lack of position definition was another hurdle that needed to be overcome.

The impact of workload and time constraints on the preparedness of nurse managers' mentorship roles has been studied globally, regionally, and locally. Time and workload management were identified as key factors in mitigating these challenges.

In a study by Moeta (2019), onward collaboration and nursing leadership in the warded states are examined globally. The study highlights the importance of supportive leadership in promoting staff collaboration regarding time and workload management and improving patient care outcomes.

Morsiani et al. (2016) conducted extensive research utilizing qualitative and quantitative methods. Their primary objective was to explore the impact of nurse managers' leadership styles on the job satisfaction of staff nurses in Italy, specifically within a regional setting. The study findings were significant, demonstrating that effective leadership was pivotal in alleviating the challenges of heavy workloads and time constraints. As a result, this improvement in leadership led to an overall enhancement in the quality of care delivered to patients.

In the African context, workload and time constraints can be even more significant due to various factors, such as under staffing and limited resources in the local context. Therefore, strong leadership is essential to ensure that nurse managers are adequately prepared to fulfill their mentorship roles despite these challenges. Elsewhere, a study by Ma et al. (2015) and Morsiani et al. (2016) found that it can be relevant to the African context and support the need for effective leadership in addressing workload

and time constraints. The literature suggests that work load and time constraints can significantly impact nurse managers' mentorship role preparedness, regardless of the context. Effective time and workload management is necessary to mitigate these factors and ensure nurse managers are adequately prepared to fulfill their mentorship responsibilities. The studies by Ma et al. (2015) and Morsiani et al. (2016) provide insights into the importance of leadership in promoting collaboration, providing adequate resources, and prioritizing mentorship, which can be applied to different global, regional, and local contexts. There is a need to determine the influence of workload and time constraints on nurse managers' mentorship role preparedness at KNH.

Nurse mentorship

Numerous studies have demonstrated that implementing efficient nurse mentorship significantly impacts various critical aspects of healthcare. The evidence from Collette's research in 2015 shows that patient safety can be greatly enhanced by establishing effective nurse mentorship programs. Furthermore, Liang et al. (2016) have highlighted how such mentorship initiatives contribute to fostering a safety culture within healthcare institutions.

Additionally, Farag et al. (2017) have found that patient mortality rates can be significantly reduced through the support and guidance experienced nurse mentors provide. These mentors play a crucial role in promoting safe medication practices, thus further contributing to improved patient outcomes and reducing the risk of medical errors. Furthermore, research has shown that some forms of nursing mentorship positively affect nurses' job satisfaction (Morsiani et al., 2016). Elsewhere, a research

study was carried out by Kaiser (2017). found that Inadequate nurse manager mentorship has detrimental effects on nurse happiness, efficiency, and productivity

Many professional nursing organizations have established formal nurse mentorship programs. These programs are designed to provide future nurse managers with education and experience while serving as mentors. Irrespective of the National League for Nursing (NLN), a leadership institute was created to help nursing professors develop outstanding mentoring abilities. The Leadership Institute consists of three programs that each span a full year. The NLN LEAD helps newly registered nurses enroll in a mentoring role or who aspire to do so in the future. A nurse educator can better prepare for a mentoring job in simulation by enrolling in a mentorship development program for simulation educators provided by the NLN.

According to the American Nurses Association (ANA), nurse mentorship programs were designed to better prepare nurses. ANA offers several nurse mentorship programs, including online and in-person training and seminars. In addition, the Emerging Nurse Mentor Institute provides funding to help aspiring nurse managers enhance their mentoring skills in preparation for their future roles (American Hospital Association [ANA], 2014). Another sponsored program is the Executive Fellowship in Innovation Health Leadership. Furthermore, Arms and Stalter (2016) also found that for nurses to pursue leadership roles on boards, they must be aware of mentorship standards and demonstrate that they possess the relevant competencies. Several organizations have devised a plan to make it easier to introduce nurse mentors to board members (Brown, 2015).

A well-designed succession strategy involving identifying and developing one or more mentors for crucial mentorship roles proved highly effective in overcoming obstacles to mentorship expansion. These challenges included the absence of a structured training program and a clear path for mentorship advancement. Through this planned approach, barriers hindering the growth of mentorship were successfully eliminated, enabling a smoother and more efficient process for cultivating and nurturing future mentors in the organization. Some of the issues raised may be solved with the help of a mentorship and/or succession plan that includes the purposeful development of mentors. Many nurses serve as mentors daily, even if they do not hold official mentoring positions or are not recognized for them (Webb et al., 2017). According to Downey et al. (2019), informal nurse mentors operating on a behind-the-scenes basis in the wards are a hidden treasure. Identifying nurses who have already shown promise for mentoring may serve as a source for future mentorship responsibilities that are filled via intentional mentorship. Ennis et al. (2016) also proposed utilizing a purposeful model in gas as a strategy to aid in creating clinical nurse mentors.

Patidar et al. (2016) discovered that hospitals with a mentoring planning program outperformed hospitals without a mentoring planning program in terms of financial performance. As per the research conducted by Patidar and colleagues in 2016, it was found that the strategic implementation of mentorship planning can safeguard an organization against potential disruptive events that often arise during mentoring transitions. By embracing mentorship planning, organizations can establish resilience and stability, which becomes particularly crucial when facing an unpredictable external environment. The study highlights the significance of mentorship planning in fostering a stable and robust organizational framework capable of withstanding

unforeseen challenges and changes in the business landscape. Several mentorships-related difficulties were discovered throughout this investigation. One potential answer to these challenges is to employ excellent mentoring planning.

Workload and time constraints significantly impact nurse managers' preparedness to take mentorship roles. These factors may be associated with global, regional, and local leadership factors. In the worldwide context, Tuomikoski et al. (2020) discovered that the interactions between nurses and nursing students during clinical practice, specifically in terms of mentoring, were notably associated with the burden of workload and time constraints. The study's global scope highlighted how nurses' experiences in guiding and supporting nursing students were significantly shaped by the demands and limitations on their time and resources. This research sheds light on the broader implications of mentorship in nursing education, demonstrating that the challenges arising from heavy workloads and time restrictions can substantially impact the quality and effectiveness of the mentoring process in clinical settings, ultimately influencing the development and learning experiences of aspiring nurses. Nurses reported feeling overwhelmed and lacking time to provide adequate mentorship due to high patient loads and competing demands on their time. This suggests that leadership at the global level may need to address workload and time constraints to support nurse managers in their mentorship roles.

At the regional level, such as in Africa, work load and time constraints may be further exacerbated by resource limitations and staffing shortages. These factors can make it ever more challenging for nurse managers to balance their responsibilities and provide effective mentorship to their staff. It may be necessary for leadership at the regional

level to address these issues by increasing resources and staffing levels, providing support for mentorship programs, and creating a culture that values and prioritizes mentorship.

At the local level, such as in Kenya, workload and time constraints may be factors associated with organizational culture, policies, and staffing levels. Straughair (2019) found that cultivating no compassion in nursing required a supportive organizational culture prioritizing patient-centered care and providing opportunities for staff to develop their skills and knowledge. This suggests that leadership at the local level may need to create a culture that values mentorship and supports nurse managers' preparedness to take on mentorship roles.

Greenwood and Krol (2020) suggest that managers can support employees' mental health by addressing work load and time constraints through flexible work arrangements, work load redistribution, and clear communication of expectations. These strategies may also effectively support nurse managers in their mentorship roles. Overall, work load and time constraints are important factors to consider when examining factors associated with leadership on nurse manager preparedness for a mentorship role. Global, regional, and local leadership can significantly address these factors and support nurse managers in their mentorship roles. The searcher wishes to determine how to mentor new nurse managers to prepare for the mentorship role at KNH.

The leadership factor in a nurse manager's preparedness for a mentorship role is critical, particularly concerning its impact on patient care outcomes. Effective leadership within healthcare institutions sets the tone for the quality of mentorship

provided to nurses. When nurse managers are well-prepared and supported by strong leadership, they can effectively mentor their teams, improving patient care experiences. Studies have shown that cohesive leadership fosters a culture of collaboration and continuous learning, which is essential to successful mentorship programs. Moreover, strong leadership ensures that mentorship initiatives are aligned with organizational goals and priorities, further enhancing their effectiveness in improving patient care quality. Therefore, understanding how leadership factors are associated with the preparedness of the nurse manager's mentorship role is essential for optimizing patient care outcomes and promoting a culture of excellence within healthcare institutions.

2.3 Policy factors associated with preparedness of nurse managers mentorship role.

Nurse Involvement in Policy making

According to the Institute of Medicine (2016), changes must be made at the policy and board levels to address the constraints that hinder advanced-practice nurses from performing their entire practice span. Institute of Medicine further suggests updating the laws for advanced practice registered nurses and now even promotes the involvement of the federal state in reforming the regulations (Institute of Medicine, 2016). For nurses to successfully overcome problems of this nature, it is recommended that they enhance their participation on committees and boards that are responsible for formulating policy.

According to Latimer (2015), one of the reasons managers do not serve is that there is a limited body of nursing knowledge that can be applied to the position of trustee. Further studies found that nurses may be unaware of their commitments, particularly maintaining their fiduciary roles. Among the various topics discussed within organizational panels, nurses consistently highlighted liabilities and fiduciary responsibilities as the least likely areas to receive adequate education (Walton et al., 2015).

Nurse involvement in policy making is a critical factor that can influence nurse manager mentorship role preparedness in the global, regional, and local contexts. According to the Institute of Medicine (2016), these policies and guidelines may define the expectations for nurse manager mentorship role preparedness, outline the competencies required for effective mentoring, and provide guidance on the best practices for mentoring nursing students.

At the global level, organizations such as the World Health Organization (WHO) play a crucial role in shaping nursing policies and guidelines. WHO's Global Strategy also recognizes the importance of mentorship in developing the nursing workforce. It encourages the implementation of mentorship programs (Greenwood & Krol, 2020). Further, the WHO also provides guidelines on the competencies required for effective nursing mentorship. These can be policies and guidelines adopted by health care institutions at their regional and local levels.

In the African context, nurse involvement in policymaking is crucial to address the challenges facing the nursing profession, including the shortage of skilled nurses and inadequate resources for training and mentorship (Tuomikoski et al., 2020). Regional

organizations such as the African Union advocate for developing policies that promote nursing education, mentorship, and career development (Greenwood & Krol, 2020).

At the local level in Kenya, nurse involvement in policy making can influence the development and implementation of mentorship programs within health care institutions. Straughair (2019) found that cultivating compassion in nursing requires a supportive organizational culture that values mentorship and professional development. Nurse Managers can be critical to creating such a culture by advocating for policies and guidelines that prioritize providing resources to support effective mentoring. Nurse involvement in global, regional, and local policymaking is essential to ensure that policies and guidelines related to nursing mentorship are evidence-based, comprehensive, and aligned with the nursing workforce's needs. Such policies and guidelines can significantly impact nurse mentorship role preparedness by providing clear expectations, defining competencies, and promoting a supportive organizational culture that values mentorship and professional development. Therefore, there is a need to establish the influence of policy and nurse manager involvement in policy-making on nurse managers' mentorship role preparedness in KNH.

Standard operating procedures

Previous studies emphasize that the presence of standard operating procedures and guidelines in an institution and the development of nurse mentors depends on the support structure, supporting connections, and a favorable, healthy organizational culture. Additionally, healthcare organizations want to offer nurses opportunities to use their newfound mentorship skills and knowledge. There are a variety of official and informal mentorship possibilities for nurses to use their leadership skills. By

assisting the nurses, functioning as mentors, and functioning as role models, nursing leaders contribute significantly to developing nurses' mentoring abilities (Choi, 2019).

In research by Shariff (2014), the following issues were recognized as barriers: a lack of participation, a poor perception of nursing, an absence of adequate structures, a procedure that excludes nurses, and a shortage of resources. Kemboi (2015) states that the nurse manager assumes multiple roles as a team leader, supervisor, and mentor. Within these capacities, the nurse manager takes on the crucial task of evaluating the nursing staff and students through assessments. Additionally, they coordinate quality assurance activities for junior staff and students, conduct assessments to identify training needs and evaluate in-house training programs designed for nurses. Moreover, the nurse manager generates periodic reports on these activities and develops standard operating procedures tailored to the department's needs. If the nurses are to succeed, these barriers or obstacles must be removed and included in the policy governing the institution to expand their mentorship role. KNH is a training institution for both graduate and postgraduate students, both local and international.

According to Elliott et al. (2016), there are several obstacles to a successful nurse's mentoring and coaching preparedness. Some of these barriers include a lack of chance to engage at a tactical level; a big work load (most frequently); an absence of resource staff nurses, healthcare specialists who function as department managers as well as clinical staff; absence of clarity/comprehension of mentorship and study role; inadequate administrative support; absence of regulatory within an institution; limited funding; and time frame. Standard operating procedures (SOPs) and guidelines are important policy tools that can influence the preparedness of nurse managers for

mentorship roles. SOPs are written instructions that outline the steps to be followed in a specific process or task, while guidelines provide practice recommendations. Webb et al. (2017) also emphasized that these policy tools can help establish clear expectations and responsibilities for nurse managers concerning mentorship and promote consistency and quality in mentorship programs.

At the global level, the International Council of Nurses (ICN) designs guidelines for nursing education and practice that emphasize the importance of mentorship and leadership development for nurses. These guidelines provide a framework for institutions and policy makers to promote mentorship and develop the skills of nurse managers. Previous studies found that one of the barriers to mentorship and leadership development for Canadian nurses was inadequate policies and guidelines to support these activities. In contrast, Walton et al. (2015) found that nurse managers who participated in orientation programs emphasizing leadership development and mentorship were better prepared for their roles.

The World Health Organization (WHO) has designed a comprehensive plan for advancing nursing and midwifery in the African region. This plan significantly focuses on mentorship and leadership development for nurses, acknowledging their crucial role in attaining improved health outcomes. Within this framework, the emphasis lies on investing in nursing education and fostering leadership skills among nurses to create a more robust healthcare system. The WHO's approach recognizes the significance of nurturing and guiding nurses throughout their careers to ensure their professional growth and enable them to contribute effectively to the betterment of healthcare in the region.

The Nursing Council of Kenya has developed SOPs and guidelines to guide the practice of nurse managers in mentorship and leadership development. Further, the Nursing Council of Kenya has developed guidelines for continuing professional development for nurses, including mentorship and leadership development recommendations. Additionally, some healthcare organizations in Kenya have developed mentorship programs for nurse managers to support their development as leaders. Therefore, the study will establish how standard operating procedures influence nurse managers' mentorship role preparedness in KNH.

The influence of policy on nurse manager mentorship role preparedness is a pivotal factor in shaping the quality of patient care delivery within healthcare settings. Policies set forth by regulatory bodies and healthcare institutions directly impact the resources, support, and guidelines available to nurse managers for fulfilling their mentorship responsibilities. Clear and comprehensive mentorship policies guide nurse managers and ensure consistency and standardization in mentorship practices. Conversely, vague or inadequate policies may hinder nurse managers' preparedness by creating ambiguity and uncertainty surrounding their roles and responsibilities. By elucidating the significance of mentorship on patient care, policymakers can prioritize developing and implementing robust policies that support nurse manager mentorship role preparedness. This alignment between policy and mentorship can ultimately lead to enhanced patient outcomes, improved quality of care, and a more cohesive and empowered nursing workforce. Therefore, recognizing the influence of policy on nurse manager mentorship role preparedness is essential for fostering a supportive and conducive environment for effective mentorship and, consequently, optimal patient care provision

2.4 Motivation factors associated with preparedness of nurse managers mentorship role

Jarnigan (2015) discovered that ensuring the nurse managers are motivated. According to some research, nurses inspired by their manager's appreciation feel they are earning respect and have access to vocational training and education opportunities to be more productive in their field. Further research is needed to examine the motives of nursing professionals for pursuing the position. The respondents in the research gave their feedback that having good enumerations in terms of salary and allowances motivated nurse managers in their roles, making them more effective. They also commented that motivation through award recognition is also effective in mentorship role preparedness. Motivation is an essential factor that can influence nurse managers' preparedness to take on mentorship roles. Salary and other forms of remuneration are critical components of motivation in the workplace, and they can significantly impact nurse managers' readiness to engage in or ship activities.

Globally, a study by Choi et al. (2019) noted that financial incentives, such as salary increases, were crucial in promoting mentorship programs in academic medical centers. Douglas (2017) noted that low salaries and inadequate compensation were significant challenges facing the nursing workforce in the African region, including Kenya. These factors can negatively impact motivation and hinder the ability of nurse managers to engage in mentorship activities effectively. Therefore, adequate remuneration can promote mentorship readiness among this region's nurse managers.

At the local level, a study by Webb et al. (2017) opined that compensation and benefits remained important factors in attracting and retaining nursing professionals. The study

noted that career development opportunities, including mentorship programs, were viewed positively by nurses and were considered essential to their career growth. Therefore, providing adequate compensation and benefits, including opportunities for professional development, can effectively motivate nurse managers to take on mentorship roles.

Cummings et al.'s (2018) study identified the importance of providing financial support for leadership development programs. This finding further emphasizes the role of salary and other forms of remuneration in promoting readiness for mentorship among nurse managers. Adequate salary and other forms of remuneration can significantly be a factor associated with nurse managers' motivation and preparedness to take on mentorship roles. This is crucial in the global, regional (African), and local (Kenyan) contexts, where the nursing workforce faces various challenges. It is, therefore, essential for institutions to provide competitive salaries and benefits as part of their strategies to promote readiness in mentorship among nurse managers. However, in KNH, there is a need to determine how motivation is associated with nurse managers' preparedness mentorship role.

Recognition Rewards and Incentives

Rewarding nurse managers improves feelings of accomplishment in the face of professional development challenges (Bodur & Infal, 2015). Nurses' effectiveness in providing nursing care to patients improved with the help of a program designed to inspire them to learn new skills. High needs-for-influence individuals might be highly motivated since they may find satisfaction in using their skills to persuade others to help their patients. Effective communication and cooperation among nurses are

emphasized by high-needs motivation. The nurse manager's performance will improve if incentives exist, decent working conditions, mutual respect, job satisfaction recognition, and promotion of the job group ahead. Nurse managers must foster positive relationships with their team to ensure that nursing care is properly administered. According to Robbins, the degree to which coworkers can assist and offer attention, enjoyment, and technical capability in carrying out current jobs is directly related to how satisfied nursing supervisors are with a motivating program (Kajander-unkuri, 2018). Recognition rewards and incentives are important motivators influencing nurse managers' preparedness for mentorship. Global studies have shown that recognition rewards and incentives can positively influence nurse managers' motivation to mentor and develop their staff. For example, Inayah et al. (2017) found that recognition rewards and incentives, such as promotions and bonuses, can increase nurse managers' motivation to mentor their subordinates.

At the regional level, recognition rewards and incentives in Africa may similarly impact nurse managers' motivation to mentor. However, the effectiveness of such motivators may be influenced by factors such as cultural norms and economic conditions. For instance, Kajander-unkuri et al. (2018) found that in Tanzania, where the healthcare system is resource-limited, recognition rewards and incentives were not seen as effective motivators for nurse managers to mentor their subordinates.

At the local level, in Kenya, the effectiveness of recognition rewards and incentives as motivators for nurse managers may depend on factors such as the organization's culture, leadership style, and available resources. For example, if an organization has a culture that values mentorship and provides adequate resources for mentorship

programs, recognition rewards and incentives may be more effective in motivating nurse managers to mentor their subordinates. Recognition rewards and incentives can positively influence nurse manager's motivation to mentor their subordinates. However, the effectiveness of these motivators may be influenced by various global, regional, and local factors. Organizations should consider these factors when developing strategies to motivate nurse managers to take on mentorship roles. The study will determine how motivation is associated with preparing nurse managers for the mentorship role of recognition KNH.

Participation in leadership meetings

Leadership meetings are crucial in helping nurses gain invaluable knowledge on potential mentorship roles. Al-Sabei et al. (2019) revealed that a nurse's propensity to take up leadership roles was significantly predicted by factors like compensation, number of peers, and the quality of their mentoring training. Therefore, this study's results indicate that to enhance nurses' attitudes toward mentoring, it is essential to increase their engagement in hospital activities and provide proper mentorship preparation, which is a component that softens the workplace environment, before involving them in mentorship responsibilities. A study by Cummings et al. (2018) also stressed that motivation based on good enumerations in an organizational context was greatly associated with nurses' willingness to lead. However, participating in leadership meetings exposes the manager to new skills; by participating in meetings, the managers can give their input on the needs of parting mentorship role preparation gaps. Therefore, the study will determine how participating in leadership meetings is associated with the preparedness of nurse managers' mentorship role.

Mentorship and coaching

The coaching process is essential since it can positively associate with understanding professional interaction at a professional or personal level. Improving individual knowledge or skills is defined based on the need to help improve performance and personal growth. Different coaching models help address a given growth issue across different settings.

Previous studies have shown that improvements in key aspects of the healthcare system, including clinical care quality, information decision-making process, leadership, accountability, and employee satisfaction, were achieved regardless of the mentoring and coaching approach used or the nation's regions targeted by individual initiatives. Techniques were more widely adopted, more productive, and more sustainable when they were adapted to fit the local situation (Manzi et al., 2017).

Coaching in the recent past has been highly modified to help improve the needs of different individuals who need services. A coach or a mentor in any given context embraces certain concepts that help create a more organized system that emphasizes a strong change process that helps build a unique level of development (Tuomikoski et al., 2017). Coaches possess different skills and knowledge that help in empowering learners. Therefore, it is essential to ensure coaches possess the skills to improve their commitment to the underlying changes. A mentor or a coach must develop four major skills: building rapport, listening, asking questions, providing feedback, goal setting, and contract setting (Rankin et al., 2016).

Globally, Philpot et al. (2019) highlighted the importance of creating patient-centered journey maps to enhance care quality. They used a mixed-methods approach and identified the key success factors in creating the journey maps, which included mentorship and coaching of frontline staff. The study findings suggest that mentorship and coaching can improve staff motivation and commitment to patient-centered care.

At the local level, in the Kenyan context, mentorship and coaching could potentially play a significant role in enhancing nurse managers' motivation to take on mentorship roles. Studies have shown that mentorship and coaching can increase nurses' job satisfaction, self-efficacy, and confidence in clinical skills. These factors could increase nurse managers' motivation to engage in mentorship activities. Mentorship and coaching can influence the motivation of nurse managers to take on mentorship roles, which has been demonstrated at the global, regional, and local levels. Philpot et al. (2019) and Rohatinsky et al. (2020) provide valuable insights into the importance of mentorship in improving the patient experience and supporting rural healthcare professionals, respectively. At the local level, studies have shown that mentorship can increase job satisfaction, self-efficacy, and confidence among nurses, which could ultimately increase nurse managers' motivation to engagement or ship activities. However, there is a need to assess nurse mentorship role preparedness in coaching and mentoring students and junior nurses in KNH.

The motivation factor associated with the preparedness nurse manager's mentorship role is a key determinant of the effectiveness of mentorship programs and, consequently, patient care outcomes. Motivated nurse managers are more likely to actively engage in mentorship activities, invest time and effort in developing their

mentorship skills, and provide meaningful support and guidance to their team members. Studies have shown that intrinsic motivation, such as a genuine desire to support the professional growth of others and contribute to improved patient care, plays a significant role in driving effective mentorship. Additionally, extrinsic factors like recognition, rewards, and career advancement opportunities can further incentivize nurse managers to prioritize mentorship and invest in their preparedness. By understanding the influence of motivation on nurse manager mentorship role preparedness, healthcare institutions can implement strategies to cultivate a culture of motivation and empowerment among nurse managers. This, in turn, can lead to higher engagement, satisfaction, and effectiveness in mentorship practices, ultimately benefiting patient care quality and outcomes. Therefore, recognizing and harnessing the influence of motivation on nurse manager mentorship role preparedness is essential for fostering a supportive and dynamic mentorship environment within healthcare settings.

2.5 Training factor associated with preparedness for the nurse manager mentorship role

Carrier development opportunities

A comprehensive worldwide investigation conducted in 2020 found that nearly 40% of nurse managers from over ten hospitals expressed dissatisfaction with their institutions. The primary reason for their discontent was the lack of implementation of mentorship training programs aimed at fostering career development (Greenwood & Krol, 2020). According to most respondents, this made them feel demotivated and lacked incentives for mentorship programs. Mentoring is a form of interpersonal

interaction that aims to support and nurture newcomers' development through informal and formal interactions. These interactions can take various forms, such as providing assistance, guidance, instruction, serving as a role model, offering counseling, and engaging in sharing experiences.

Establishing mentorship initiatives in nursing is crucial because they have numerous benefits, including improving retention, enhancing job satisfaction, and reducing compassion fatigue among nurses. Furthermore, mentorship relationships improve confidence, competence, and personal growth for mentors and mentees (Straughair, 2019). These circumstances highlight the need for implementing a compassionate framework within the organization to promote the mental well-being of healthcare workers. Furthermore, when presented with the chance to voice their preferences regarding the communication of mental health issues, respondents demonstrated a strong inclination towards engaging in discussions about these concerns with their peers and managers (Straughair, 2019).

However, Moetaand (2019) established that institutions that emphasize internal growth have put measures in place to ensure that their employees grow and attain the needed level of expertise to take managerial positions. Attending managerial courses is one of the nurse's managers preparedness, and it offers valuable experience. Nurses in management roles, such as Nurse Ward Manager (NUM), have emerged due to professionalization in nursing. These Nurses are normally well-versed in the clinical area in which they work. Mentorship is one of the career development opportunities.

Previous literature suggests that training programs can significantly influence nurse management mentorship role preparedness. In 2016, Gray and Brown assessed a nurse

mentor preparation initiative, discovering that it had a beneficial impact on the readiness of nurse managers to assume mentoring responsibilities. The program's primary objective was to enhance participants' abilities and understanding of mentorship while allowing them to practice their mentorship skills in real-world situations. As a result of this program, nurse managers were better equipped and more confident in fulfilling their mentor roles. American Association of Critical-Care Nurses (2016) suggests that similar programs could be implemented to enhance nurse managers' preparedness for mentorship roles.

In addition to training programs, career development opportunities have been identified as potential influencers of nurse manager mentorship role preparedness. Brown (2015) discusses how educating nurse managers for board service can broaden their perspectives on healthcare management and improve their leadership skills. Collette (2015) similarly suggests That leadership development programs can enhance nurse managers' abilities to lead and promote patient safety. These career development opportunities can also increase motivation for nurse managers to take on mentorship roles, as they may feel more confident and capable of supporting their staff. It is worth noting that these findings have been primarily discussed in the global context, with limited research specifically focusing on Africa or Kenya. However, given the importance of mentorship in healthcare and the need for strong leadership in these settings, it is likely that similar factors would influence nurse manager mentorship role preparedness in these contexts as well. Further research is needed to investigate these potential influences more thoroughly.

The literature suggests that training programs and career development opportunities can positively influence nurse manager mentorship role preparedness and increase motivation for these leaders to take on mentorship roles. Implementing such programs may be beneficial in enhancing care quality and supporting the professional development of nursing staff. Therefore, there is a need to determine how career development factor is associated with nurse managers' mentorship role preparedness at KNH.

Continuous medical education program

Training nurses on preparedness in mentorship roles is essential in positively influencing the level of preparedness. Recent studies have emphasized the importance of mentors in workplace mentoring practice for nursing students' clinical practice (Setati & Nkosi, 2017). The connection between mentors' eagerness to engage in students' educational journey and their willingness to offer essential assistance is found to be closely tied to their educational backgrounds, which, in turn, bolsters their proficiency growth as mentors (Hee & Kamaludin, 2016; Tuomikoski et al., 2020). However, mentors often lack expertise in teaching and express a shortage of time to deliver high-quality mentoring (Kajander-unkuri, 2018; Oikarainen et al., 2019).

Information technology provides nurse managers with a range of options, including the opportunity to collaborate both within and outside the business, do research, advance their professional growth, and manage human resources. Previous studies have found clear evidence of nurse managers' broad use of data systems, as well as an understanding of the expanding relevance of information technology in the coming

years. Previously, Koloroutis (2018) offered phone mentoring as an alternative to traditional in-person education.

In 2017, a study was carried out by Farag et al. to investigate the interconnections between leadership style, ward cohesion, and safe medication practices within the nursing profession. During this research endeavor, the researchers delved into the intricate associations and potential impacts of various leadership approaches, the prevailing atmosphere within nursing wards, the overall safety climate within the healthcare setting, and nurses' adherence to safe medication practices. The study found that nurses who had received CMEs on leadership and safety practices were more likely to report safe medication practices.

Motivation is another important factor influencing nurse managers' preparedness for mentorship roles. Ma et al. (2015) discovered that cooperative efforts among healthcare ward members and effective leadership within the nursing team favorably correlate with both nurse outcomes and quality of care. The research demonstrated that nurse managers who display high levels of motivation and exemplify robust leadership abilities possess the capacity to significantly improve the quality of care provided by their nursing team.

Leadership workshop participation

Joseph et al. (2022), in investigating the level of preparedness among nurses' managers, revealed that nurse managers were mainly elevated to leadership and management positions without role preparedness. Even though nurse ward managers found leadership workshops and courses quite beneficial, they found it difficult to put

what they learned into practice. They expressed their appreciation for the knowledge they acquired by reading and commenting on the cases of education. The nurse ward managers. According to Setati and Nkosi (2017), in a qualitative study investigating the opinion of experienced registered nurses towards the role of student mentors in clinical settings, nurse managers effectively mentor student nurses in the clinical sections and ensure they are highly empowered to achieve a higher level of success. When new managers participate in mentorship workshops, they improve their mentorship skills. It is unclear whether nurse managers in KNH participate in mentoring workshops.

Participation in leadership workshops has been identified as a potential means of improving nurse manager mentorship role preparedness. In a study conducted by Liang et al. (2016), an investigation was carried out to examine the correlation between various factors such as nurse attributes, leadership qualities, safety climate, emotional labor, and the inclination of nurses to remain in their positions. The researchers utilized structural equation modeling as a statistical method to analyze the data and draw meaningful conclusions. The results showed that nurse managers' leadership significantly influenced their staff retention to stay in their roles, and it was suggested that leadership development programs could positively impact nurse management or ship role preparedness. Furthermore, the impact of motivation on nurse manager preparedness in mentorship roles has been studied at both the global and local levels. Morsiani et al. (2016) showed that leadership style significantly affected job satisfaction, indicating that leadership development programs could enhance nurse managers' preparedness in mentorship roles.

In the African context, including Kenya, leadership development and mentorship programs for nurse managers have been identified as essential components in enhancing the quality of nursing care. The Institute of Medicine (IOM, 2016) report emphasized the importance of nurse managership development programs, including mentorship, to address the challenges faced by healthcare systems in Africa. In summary, Morsiani et al. (2016) found that participation in leadership development workshops and motivation play important roles in nurse manager preparedness. These findings are relevant at the global, regional, and local levels, including in African countries like Kenya.

Effective communication is a critical component of successful mentoring relationships. Ma et al. (2015) found that communication between nurse managers and their staff nurses was essential to this relationship. Effective communication and motivation are critical factors for nurse managers' preparedness for global, regional (Africa), and local (Kenyan) mentorship roles. However, it is essential to note that the cultural context is useful in shaping the efficacy of training, communication, and motivation strategies. Therefore, it is necessary to consider cultural factors when developing and implementing training programs for nurse managers in different contexts. The literature suggests that training, communication, and motivation are essential factors for nurse managers' mentorship preparedness. Previous studies provide evidence of the importance of effective communication and motivation in improving the preparedness of nurse managers' mentorship role and, ultimately, the quality of care delivered to patients.

Communication

Kennedy (2019) revealed that the level of preparedness in mentoring among nurse managers is dependent majorly on the underlying level of interaction and information delivery through proper communication channels. It is imperative to build a more consistent basis where it is easier to improve efficiency and commitment. However, the findings from this study will positively impact nurse managers as a reference and provide them the impression that they are prepared for their position, as well as provide mentoring assistance and tactics to help them successfully mentor newly recruited nurses. Mentors in the nursing profession who are aware of the mentorship position and its components as motivating and teaching tactics. When formulating a strategic plan, KNH leadership includes NMS preparedness in the mentorship role as a way of communication when leaders are cascading their targets for easier implementation and assisting in preparing the new managers. Structure, methods, and final results are all a part of them. While gauging improvement, balancing measures or factors are considered. The Donabedian model was established based on the hypothesis that structural measures significantly impact process metrics, which impact result measures (Griffiths et al., 2018). The most important factor considered in this analysis was the complexity of the relationship between cause and effect, particularly when considering the different characteristics of each patient. This study will apply the structure model to assess the institutional structure. Recommendations will be made to the leaders to redesign and formulate a policy on NMS preparedness in a mentorship role as a culture for all new managers 'support by providing a mentorship environment, training, and education programs, motivating mentors, and creating structures that measure nurse monitor mentorship role preparedness. The institutional policies influence the

processes and ensure communication between the mentors to achieve knowledge, competence, and outcomes.

The influence of training on nurse manager mentorship role preparedness is paramount in ensuring the delivery of high-quality patient care. Adequate training equips nurse managers with the necessary knowledge, skills, and tools to effectively mentor their teams, positively impacting patient outcomes. Comprehensive mentorship training programs give nurse managers insights into effective communication, coaching techniques, conflict resolution, and leadership strategies—all essential to successful mentorship relationships. Moreover, ongoing professional development opportunities enable nurse managers to stay abreast of best practices, emerging trends, and advancements in healthcare delivery, further enhancing their preparedness for mentorship roles. By investing in robust training initiatives tailored to nurse manager mentorship needs, healthcare institutions can foster a culture of continuous learning and improvement, ultimately leading to enhanced patient care quality and outcomes. Therefore, recognizing the training factor associated with nurse manager preparedness in the mentorship role underscores the importance of prioritizing education and skill development within nursing leadership, ultimately benefiting nursing staff and patients.

2.6 Theoretical Framework

In this study, the theoretical framework draws upon Donabedian's hypothesis (Brodowicz, 2024) to guide the exploration of preparedness for mentorship roles among Kenyatta National Hospital (KNH) nurse managers. Donabedian's framework posits that the quality of care can be deconstructed into three interconnected and

equally vital components: structure, process, and outcomes, with the consideration of balancing factors for improvement. This model is built on the premise that structural attributes are significantly associated with process metrics, which subsequently impact outcome measures (Brodowicz, 2024). Central to this analysis is the intricate interplay between cause and effect, particularly when accommodating the unique characteristics of individual nurse managers.

In the context of this study, the Donabedian model will be operationalized through the structural component. This encompasses the institutional structure of KNH, wherein recommendations will be proposed to leaders for revising and formulating policies concerning the Nurse Manager Preparedness for the mentorship role (NMS-PM). The study advocates for fostering a culture of mentorship readiness among new managers, supported by the creation of mentorship-enabling environments, comprehensive training and educational programs, incentivization of mentors, and the establishment of evaluative frameworks for assessing nurse managers' mentorship role preparedness. This institutional policy overhaul seeks to exert a profound association on processes within KNH, ensuring robust communication channels and a conducive atmosphere for mentorship. By applying Donabedian's theoretical framework, this study aims to illuminate the structural elements that impact mentorship readiness among nurse managers and offer strategic insights into refining the healthcare ecosystem to nurture mentorship-driven leadership practices.

The study aligns with Donabedian's Framework of quality by addressing the structural component, encompassing the institutional structures and policies surrounding nurse manager mentorship preparedness (NMS-MP) at Kenyatta National Hospital (KNH).

Donabedian's model posits that the quality of care can be evaluated based on three interconnected components: structure, process, and outcomes.

Firstly, the study focuses on the structural attributes within KNH, examining the existing policies, resources, and support systems for nurse manager mentorship. The study aims to identify gaps and challenges that may impede nurse managers' readiness for mentorship roles by analyzing these structural elements. This aligns with Donabedian's emphasis on the importance of structural factors in shaping the quality-of-care delivery.

Secondly, the study proposes recommendations for enhancing mentorship readiness among nurse managers, directly influencing the process component of Donabedian's framework. These recommendations include the creation of mentorship-enabling environments, comprehensive training programs, and evaluative frameworks for assessing mentorship role preparedness. By improving these processes, the study seeks to facilitate effective mentorship practices within KNH, ultimately enhancing patient care quality. Overall, the study fits within Donabedian's Framework of Quality by addressing the structural component and proposing interventions to improve the process of mentorship preparation among nurse managers. By focusing on these aspects, the study aims to enhance patient care outcomes and the overall quality of healthcare delivery at KNH.

2.7 Conceptual framework

The present study investigates the institutional factors associated with nurse managers' preparedness in mentorship roles at Kenyatta National Hospital. The institutional

factors have been categorized into four groups: leadership factors, policy factors, motivation factors, and training factors. These factors comprise independent variables, while the dependent variable is nurse manager mentorship role preparedness.

Nurse Manager Mentorship role preparedness is determined by the following sets of independent variables:

Leadership factors such as leadership resources, Management support, Mentorship for nurse managership program, Work load and time constraints

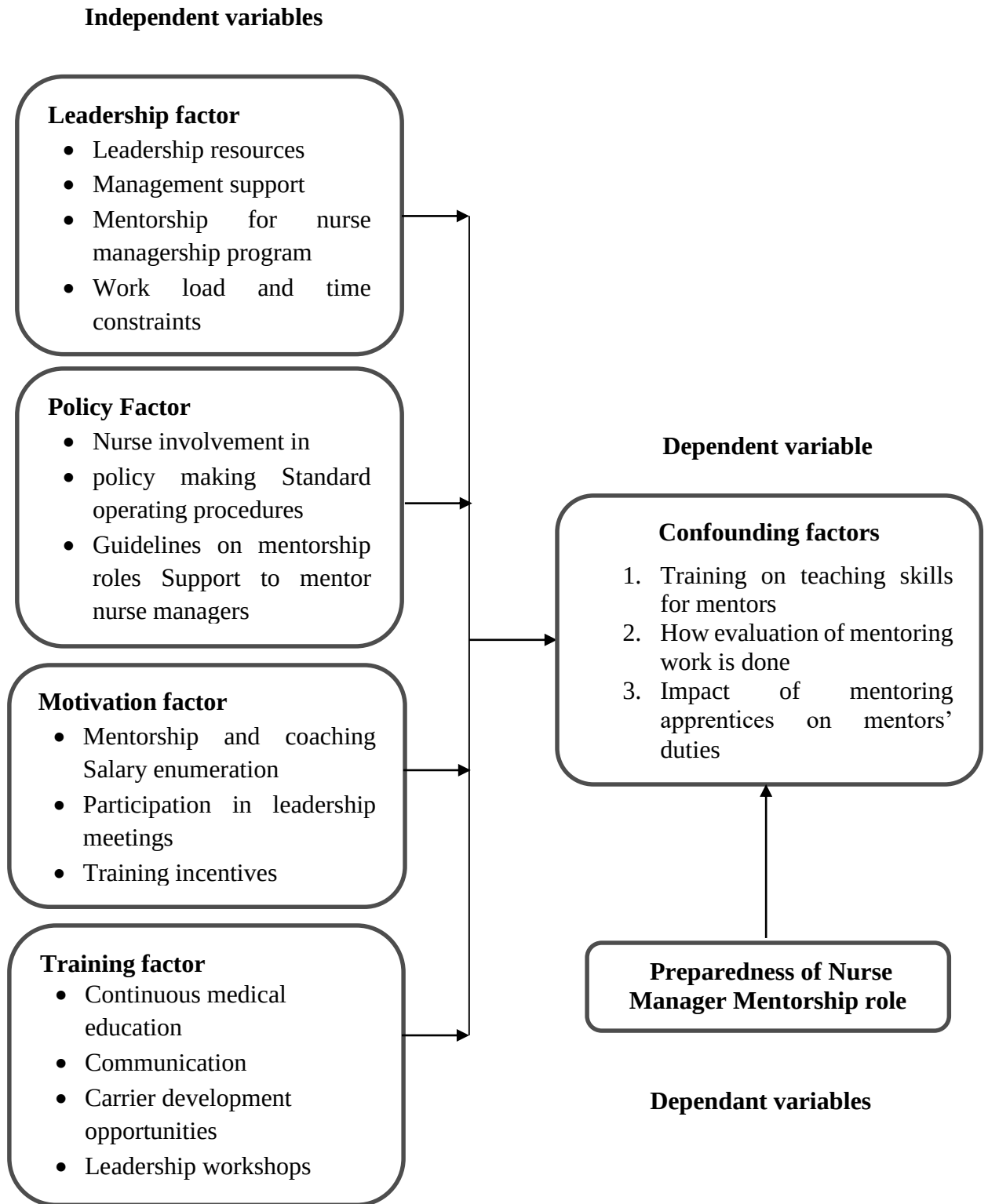
Policy Factors like Nurse involvement in policy making, Standard operating procedures, Guidelines on mentorship, Roles Support to mentor nurse managers

Motivation factor Mentorship and coaching Salary enumeration, Participation in leadership meetings, training incentives

Training factors like Continuous medical education, Communication, Career development opportunities, leadership workshops

Figure 2.1

Conceptual framework showing relationship between study variables



CHAPTER THREE

METHODOLOGY

3.1 Introduction

This pivotal chapter comprehensively explains the methodology to be employed in this study. It encompasses various key elements, starting with the research design underpinning the investigation, carefully justifying its suitability. The population and sample size are clearly defined, ensuring representative data collection and sampling design, including the sampling frame and technique to minimize bias. The chapter also outlines the data collection instruments, research procedure, and data analysis methods, ensuring a systematic and rigorous approach to derive meaningful insights. Furthermore, ethical considerations are thoroughly addressed, encompassing protecting participants' rights and well-being throughout the research process. This chapter sets a strong foundation for the forthcoming study by meticulously covering these aspects.

3.2 Study Area

The research occurred at KNH, Kenya's level 6 the largest and oldest teaching research and referral hospital in Kenya. KNH has a bed capacity of 1,800 and provides outpatient clinics according to information on their website. It is affiliated with the University of Nairobi and the Kenya Medical Training College. It serves as a training center for various institutions' students, interns, and postgraduate learners. The total staff population at KNH is 4,800. The clinical services directorate includes pharmaceuticals, surgical, medical, nursing, medical research, and diagnostics &

health information departments. Healthcare workers from these departments' areas signed to the emergency departments, which consist of the Accident & Emergency Department and the Pediatric Emergency Ward.

The study setting will be within the domain of Nurse Managers, nurses in charge, and their deputies at Kenyatta National Hospital (KNH). These nurse managers are responsible for overseeing and managing the activities in the wards within the hospital, playing a central role in coordinating patient care, maintaining quality standards, and facilitating effective mentorships for junior nurses and students within their designated wards. This study specifically delved into the preparedness of nurse managers in the mentorship role of these Nurse Managers and deputies, aiming to uncover the factors that impact their readiness to fulfill this crucial facet of their leadership responsibilities.

3.3 Research design

The research utilized a descriptive cross-sectional research design, which enables the identification of outcomes and exposures. It aimed to explore the relationship between variables of interest within a specific population at a specific moment or within a short timeframe. This design was suitable for collecting data that addresses the research questions effectively by measuring all factors simultaneously. The advantage of a cross-sectional study is its efficient and cost-effective nature, as data collection was a one-time event without requiring a prolonged duration (Setia, 2016). Questionnaires were employed to collect the required data.

3.4 Target Population

The target population for this study was nurse managers. The research focused on Nurse Managers and their deputies at KNH. Nurse Managers, in this context, are individuals responsible for overseeing and managing nursing wards within the hospital. They are pivotal in coordinating patient care, ensuring the smooth functioning of nursing teams, and facilitating communication between healthcare providers. These Nurse Managers are charged with staffing, scheduling, performance evaluation, and maintaining quality patient care standards within their designated wards.

The study's target population comprises Kenyatta National Hospital (KNH) nurses, with a particular emphasis on Nurse Managers and their deputies. In this context, Nurse Managers refer to individuals holding managerial positions responsible for overseeing and directing the operations of nursing wards within the hospital. These Nurse Managers typically occupy leadership roles encompassing various levels of responsibility within the organizational hierarchy. At KNH, Nurse Managers may include individuals serving as ward managers, charge nurses, or nurse supervisors, each with distinct roles and responsibilities tailored to the specific needs of their respective wards.

Within the hierarchy of Nurse Managers, different levels denote varying degrees of authority and scope of responsibilities. At the highest level, Nurse Managers oversee entire nursing departments or divisions within the hospital, exercising broad oversight and strategic decision-making authority. Beneath them, there are mid-level Nurse Managers who manage specific nursing wards or wards, such as medical-surgical wards, intensive care wards, or specialty wards. These mid-level Nurse Managers are

responsible for the day-to-day operations of their assigned wards, including staffing, scheduling, and ensuring the delivery of high-quality patient care.

Furthermore, within each nursing ward or ward, additional levels of Nurse Managers, such as assistant Nurse Managers or team leaders, may provide direct support and supervision to front-line nursing staff. These individuals play crucial roles in implementing policies and procedures, addressing staff concerns, and maintaining standards of care within their respective wards. Overall, the term "Nurse Manager" encompasses individuals at various levels of leadership within the nursing hierarchy at KNH, each contributing to the efficient and effective delivery of patient care services. The hospital has approximately 118 nurse managers and deputies across different nursing care wards, 88 of who were selected for the study. Data was collected from questionnaires.

3.5 Sampling procedure

For a heterogeneous group of nurse managers with varying work environments and levels of education, a more appropriate sampling method was stratified random sampling. Stratified random sampling involves dividing the population into homogeneous subgroups, or strata, based on certain characteristics relevant to the study. These nurse managers grouped according to the areas they covered (department, divisions and wards.) the researcher was only interested with nurse managers who were at the same time ward in charges. This was the target population from where the sample was selected. Then, a random sample was selected from each stratum, ensuring representation from all subgroups within the population. Therefore, the researcher began by identifying the relevant stratification variables. Subsequently, within each

stratum, the researcher employed a random sampling method to select nurse managers included in the study. This approach ensured that every nurse manager within each subgroup had an equal chance of being selected, thereby enhancing the representativeness of the sample.

Once samples were selected from each stratum, the researcher combined them to form the final study sample. This sampling approach allowed a more comprehensive understanding of nurse manager mentorship practices within different work environments and educational backgrounds, thereby improving the generalization of the study findings.

The size of the sample was established based on the formula created by (Fisher et al., 1998) and applied in the research conducted by (Mugenda & Mugenda, 2003)-
$$n = \frac{Z^2(d^2 - p)}{2(d^2 - p)}$$

The Z value corresponds to the given confidence level (for instance, 1.96 for a 95% confidence level).;

The margin of error, represented as d, denotes the level of uncertainty or variability in the data. To clarify, when we state $0.05 = \pm 5\%$, it means that the margin of error is 5% in both positive and negative directions.

P represents the approximated value denoting the proportion of a sample possessing the specific condition of interest.

P= 50%

$$n = \frac{1.96^2 p(1-p)}{0.05^2} n = \frac{1.96^2 0.5(1-0.5)}{0.05^2} n = \frac{3.8416 * 0.25}{0.0025}$$
$$n = \frac{0.9604}{0.0025} n = 384.16$$
$$n=384$$

Finite Population Correction for Proportion

The intended group for this study comprised of all nurse managers and their deputies employed at Kenyatta National Hospital. To determine the appropriate sample size, the researchers will apply Yamane's formula (1967), which is specifically designed for populations with fewer than 10,000 individuals. Thus, $nf=n/(1+(n/ N))$

Where nf =desired sample size n =calculated sample size

N = estimate of population in study area

$$nf= 384/4.3=88$$

$$1 +384$$

$$118$$

Sample size was 88 respondents

The study intended to apply simple random sampling technique to identify 88 nurse managers from a study population of 118 respondents. A list was made using a register for the nurse managers and their deputies, and all participants were assigned numbers 1-118 against their names. A computer random number generator was used to select 88 numbers. The corresponding managers to the numbers were the participants in the

study. According to the Human Resource Department records, there are 3000 workers, including 2118 HCWs. A computer random number generator is a software tool that generates random numbers based on certain parameters. In this case, the random number generator was used to select 88 numbers from 1 to 118, corresponding to the nurse managers and their deputies who were eligible for inclusion. To use the random number generator, a catalog of the viable participants was created, and each participant was assigned a number between 1 and 118. The computer program was then instructed to generate 88 random numbers from this range, corresponding to the selected nurse managers. Employing a computer random number generator ensures that the selection process is truly random and unbiased (Ames et al., 2019).

3.6 Inclusion and Exclusion criteria

3.6.1 Inclusion

Nurse Managers and their deputies working at Kenyatta National Hospital.

Nurse Managers and their deputies who consented to participation.

Nurse managers working in KNH and were ward in charges or deputy.

3.6.2 Exclusion

Nurse Managers and their deputies who declined to consent.

Those who were absent or on leave.

Nurse managers in charge of departments. or division.

3.7 Instrumentation

For this case, a semi- structured questionnaire was applied to data collection. The questionnaire consists of multiple sections corresponding to each study objective. The first section focused on gathering information on the respondent's demographic characteristics of each nurse manager. The subsequent sections focus on the four specific objectives of the study, including leadership, policy, motivation, and training. Each section contained closed-ended questions designed to gather and analyze quantitative data.

To ensure that the questionnaire is standardized, the standard consists of cross-respondents. The searcher offered a guide on how to fill out the questionnaire, which was administered to all participants. The drop-and-pick approach was used to distribute and collect the questionnaires, and the researcher was available to answer any questions or clarify any issues the participants had.

The pilot study was deployed to familiarize the researcher with the study process and, therefore, familiarize with the distribution and process of receiving the responses from the data collection instruments. This per-testing was done among nurse managers and deputies in Kenyatta University Teaching Research and Referral Hospital (KUTRRH). For the pretest of the study instrument, a sample size of 10-15 nurse managers and their deputies in Kenyatta University's teaching research and referral hospital was recommended. This sample size was in line with the general rule of thumb for pilot studies, which suggests a sample size of at least 10% of the total sample size.

3.8 Validity and Reliability of Instruments

3.8.1 Validity of Instruments

According to Cozby (2001), validity examines the ability of the questionnaire to measure what is intended, to assess how honest the findings are. The researcher utilized pre-testing to check that the research instruments were valid in both their content and construction. "Content validity" describes how instruments may accurately evaluate the connection between two variables (Cozby, 2001). Construct validity, in contrast, relates to the extent to which the instrument can genuinely tap into the logical or /theoretical notion intended to be examined. In light of the information presented above, the researcher conducted a pretest to evaluate the validity of the questionnaire.

3.8.2 Reliability of the instrument

According to Mugenda and Mugenda's definition (2003), reliability denotes the degree to which instruments employed for the study produce the same outcomes or data regardless of the number of times it is issued. To guarantee that the instrument can reliably capture the data the researcher needs, the tool was first put through some preliminary testing. After 2 weeks, the same procedure was performed again on various nurse managers. The outcomes were similar, and the instrument was considered reliable. The test-retest approach was employed to gauge the reliability of the questionnaire. This process entailed conducting the survey on a single group of participants on two separate occasions and analyzing the data gathered from both instances for comparison purposes. By doing so, the researcher determined the reliability index of the questionnaire, which essentially measured how consistent the

responses were over time. In simpler terms, the results obtained from the initial administration (pretest questionnaire) were used to assess the questionnaire's reliability. A pretest was conducted at Kenyatta University's Teaching Research and Referral Hospital (KUTRRH).

3.9 Data Analysis and Management

The data collected in this study underwent rigorous management and analysis procedures to ensure accuracy and security. Initially, the information obtained from the questionnaires was meticulously inputted into Microsoft Excel. Subsequently, a thorough data cleansing was conducted to identify and rectify any inconsistencies, errors, or missing values in the data. The cleaned data was then securely stored in a designated location, with physical copies in a locked cabinet accessible only by the primary investigator and digital copies backed up on a password-protected flash drive to prevent unauthorized access.

Quantitative analysis techniques were employed to analyze the data comprehensively. Descriptive statistics and frequencies were calculated to provide a concise data set overview. Furthermore, correlation analysis was utilized to investigate the association between the independent and dependent variables, thereby identifying any significant relationships or correlations within the data. The results of these analyses were presented using tables and charts, facilitating a clear and concise representation of the findings to enhance comprehension. In the data management and statistical analysis plan, various methods controlled confounding factors.

3.10 Ethical consideration

The researchers sought ethical approval and clearance for this study from the Kenya Methodist University Scientific Ethical Review Committee (KEMU/SRC), National Commission for Science Technology and Innovation (NACOSTI), Kenyatta National Hospital, and the University of Nairobi Ethical Review Committee, (KNH/UON-ERC). To be able to access the study participants permission was sought from Deputy Director's nursing services (DDNS) KNH. None of the participants was forced or compelled to participate in the study, as involvement was strictly based on voluntary participation and willingness to uphold privacy and Confidentiality.

Further, the participants were not required to document any personal information to ensure confidentiality. This allowed the participants to read the consent document to make a voluntary and informed choice to participate in the study. Measures were taken to safeguard their privacy throughout the research process. Before submitting the questionnaire, respondents could leave the research at any moment.

Benefits of Participation

Participation in this study did not entail direct benefits for the participants. However, by participating in the research, participants contributed to advancing knowledge and understanding in the field of nursing mentorship preparedness. Their involvement helped identify areas for improvement in nurse manager training and mentorship practices at Kenyatta National Hospital (KNH), potentially leading to enhancements in patient care quality and overall healthcare outcomes. Additionally, participants may gain insight into their perspectives and experiences related to mentorship, fostering

personal reflection and professional growth. While there were no immediate tangible benefits, the collective participation of individuals contributes to broader societal benefits by informing evidence-based practices and policies in healthcare settings. There was no compensation for the participants.

Risk of Participation

Participation in this study posed minimal risks to participants. However, potential risks included the inadvertent disclosure of personal or sensitive information during data collection, which could compromise confidentiality. However, strict confidentiality measures were implemented to mitigate this, and all data will be anonymized to ensure participant privacy. Participants experienced mild discomfort or inconvenience due to the time required to complete the questionnaire or interview. However, this was minimized by providing clear instructions and allowing flexibility in scheduling participation. Overall, the risks associated with participating in this study were minimal and were carefully managed to ensure the safety and well-being of all participants.

Voluntarism of Participation

The voluntarism of participation was a fundamental principle in this study, emphasizing that individuals had the autonomy to decide whether to participate in the research without any coercion or undue influence. Participation in the study was entirely voluntary, and individuals had the right to decline or withdraw from participation at any stage without facing any repercussions. No pressure or incentives were offered to encourage participation, ensuring that individuals make informed

decisions based on their own free will. Additionally, participants were informed of their rights and provided with detailed information about the study to enable them to make an informed decision about whether to participate. This commitment to voluntarism underscored the ethical conduct of the research and respected the autonomy and dignity of all potential participants.

Recruitment Process

The recruitment process occurred among nurse managers and their deputies at Kenyatta National Hospital (KNH). Recruitment occurred during regular working hours within the hospital premises. The research team conducted the process, comprising trained personnel responsible for identifying eligible participants and providing them with information about the study.

The recruitment process involved approaching potential participants in their respective work environments, such as nursing wards or administrative offices, to introduce the study and its objectives. The research team explained the eligibility criteria for participation, including job title (nurse manager or deputy nurse manager) and tenure at KNH. They also clarified any potential risks, benefits, and the voluntary nature of participation.

Upon expressing interest in participating, potential participants were provided detailed information about the study, including its purpose, procedures, expected duration, and potential risks or benefits. They had the opportunity to ask questions and seek clarification before deciding whether to participate.

Consent Procedure

The consenting procedure was conducted in a private and confidential setting to ensure the privacy and autonomy of potential participants. Before obtaining consent, the research team reiterated the key details of the study. It addressed any additional questions or concerns raised by the participants.

Consent was obtained through a written consent form provided to participants in English, with no indication of Kiswahili, a national language. English is the most commonly used official language among staff in the hospital setting. The consent form included information about the study's purpose, procedures, potential risks and benefits, confidentiality measures, and the voluntary nature of participation.

Participants were encouraged to read the consent form thoroughly and take as much time as needed to consider their decision. They were then asked to sign the consent form if they voluntarily agreed to participate in the study.

Participants were assured that their decision to participate or decline will not affect their employment status or access to healthcare services at KNH. They were also informed of their right to withdraw from the study without consequence.

After obtaining consent, participants were provided with a copy of the signed consent form for their records, and arrangements were made for their involvement in the study procedures according to the research protocol. Before pretesting the introduction letter and consent to pre-test, the tool was sought from Kenyatta University Teaching and Referral Hospital (KUTRH).

CHAPTER FOUR

RESULTS AND DISCUSSION

4.1 Introduction

The study assessed leadership, motivation, training, and policy factors associated with preparedness for nurse manager mentorship roles at Kenyatta National Hospital. This chapter presents the findings as they are associated with the study objectives.

4.2 Response Rate

Out of 88 questionnaires distributed, they were filled out. Resulting in a response rate of 100%. During data cleaning, all the questionnaires were included in the final analysis. The level of nurse manager preparedness was categorized into high, moderate, and poor. However, 42% of the nurse managers were moderately prepared, while 58% were poorly prepared. None of the nurse managers had a high level of preparedness for mentorship roles.

4.3 Demographic Characteristics of the study participants

The study gathered information on the demographic characteristics of the targeted nurse managers concerning their age, gender, education level, and years of experience from a sample of 88 nurse managers at KNH.

4.3.1 Age of the respondents

Figure 4.1

Age of the nurse manager

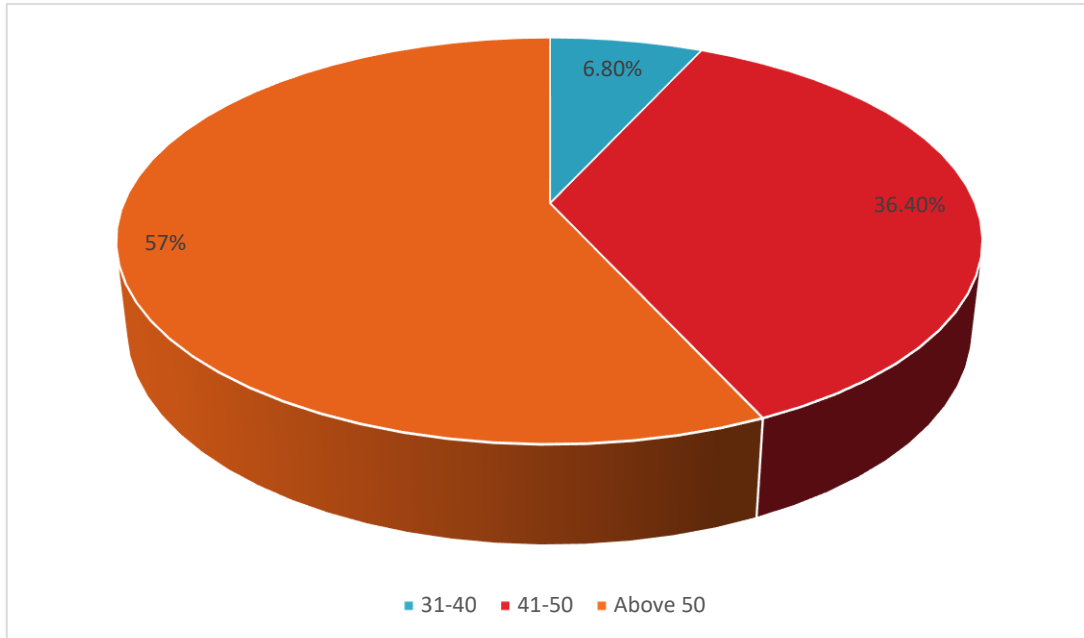


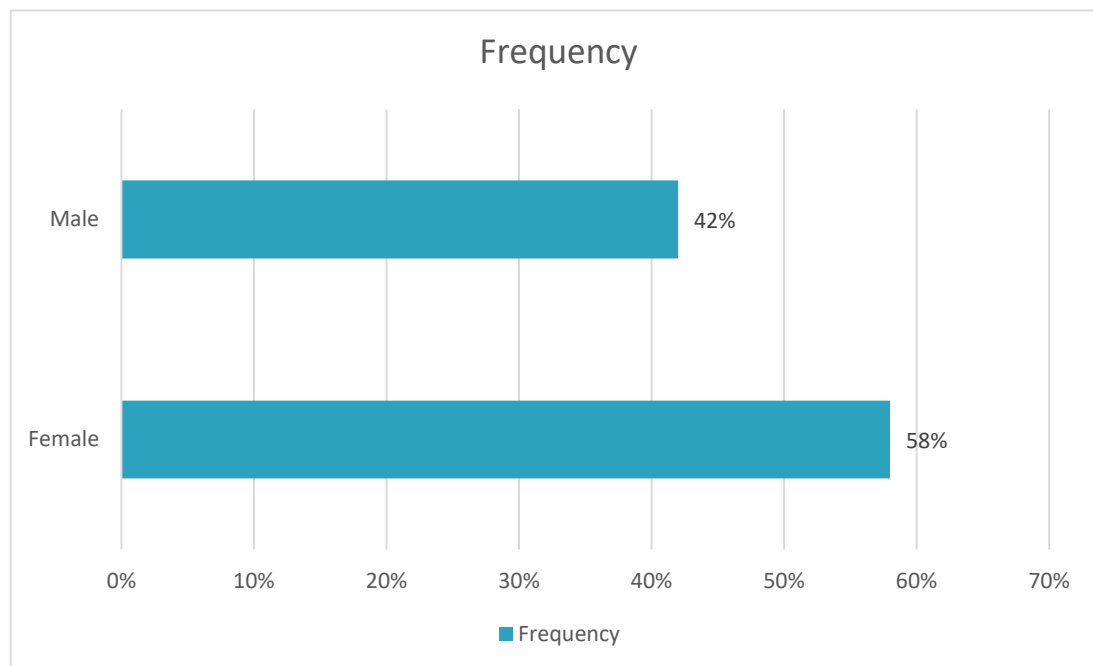
Figure 4.1 indicates that the age of the nurse manager was rounded up in complete years and categorized as shown. It was found that the nurse managers had varied ages. Relatively more than half of the participants, 50 (56.8%), had an age above 50 years, 32(36.4%) had an age between 41-50 years, and 6 (6.8%) had an age between 31-40 years. For the appointment of nurse managers, the nurses are mostly promoted as they gain more experience, and the experience comes with age. In other cases, individual training qualifications are considered. It is evident in the current study that the majority of nurse managers had been appointed based on their age and experience. Therefore, it is expected to have nurses of varied ages. On analysis, six nurse managers were aged between 31 and 40 and were poorly prepared for nurse manager mentor roles. Among the thirty-two nurse managers aged 41-50 years, 17 were found to be moderately prepared for the nurse managers' mentorship roles. Most of the nurse managers in the

study were over 50 years old and above. Among the 50 nurse managers, only 20 were moderately prepared for the nurse manager mentorship role. None of the participants were best prepared for the mentorship roles. The age of the nurse managers is summarized in Figure 4.1

4.3.2 Gender of the respondent

Figure 4.2

Gender of the respondent



The study also examined the gender distribution among the nurse managers, revealing a predominance of female nurse managers compared to their male counterparts. This observation aligns with the general demographics of the nursing profession, where a higher number of female nurses are trained and employed than male nurses. The results of the gender distribution are illustrated in Figure 4.2.

In analysing the relationship between gender and the preparedness of nurse managers for mentorship roles, they were 2.92 times more likely to be prepared for mentorship roles than female nurse managers. This correlation was statistically significant, as indicated by the correlation coefficient $r(86) = 2.92$, with a p-value of less than 0.01. This suggests that gender plays a significant role in determining the level of preparedness for mentorship among nurse managers, with male nurse managers demonstrating a higher likelihood of being prepared for these roles than their female counterparts.

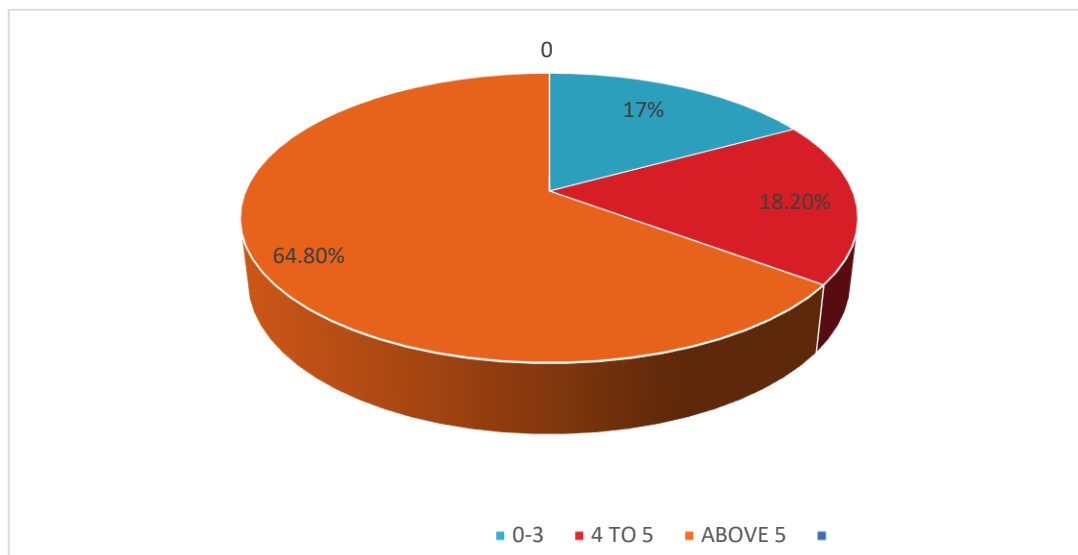
The positive correlation between gender and preparedness for mentorship roles suggests that male nurse managers exhibit a higher readiness for mentorship responsibilities despite being fewer in number. This could be attributed to various factors, including differences in training experiences, professional development opportunities, or support systems available to male nurses in leadership positions (Manzi et al., 2017). Understanding these factors could provide insights into addressing the disparity and enhancing mentorship preparedness across all nurse managers, regardless of gender. Identifying and addressing these disparities can help ensure that all nurse managers, irrespective of gender, are equally prepared for mentorship roles and contribute effectively to the development of future nursing leaders.

The study's examination of gender distribution among nurse managers, revealing a predominance of female nurse managers, is consistent with the broader demographics of the nursing profession, where women significantly outnumber men. This trend is illustrated in Figure 4.2, highlighting the disproportionate representation.

Interestingly, the analysis of the relationship between gender and the preparedness of nurse managers for mentorship roles showed that male nurse managers are 2.92 times more likely to be prepared for mentorship roles than their female counterparts. This statistically significant correlation ($r(86) = 2.92, p < 0.01$) underscores the importance of gender as a determinant in the readiness for mentorship. The higher preparedness of male nurse managers could stem from differences in their training experiences, professional development opportunities, or support systems. These findings suggest a need to investigate and address these disparities to ensure all nurse managers, regardless of gender, are equally prepared for mentorship responsibilities (Lapane & Hughes, 2017).

Figure 4.3

Years of experience as a nurse manager

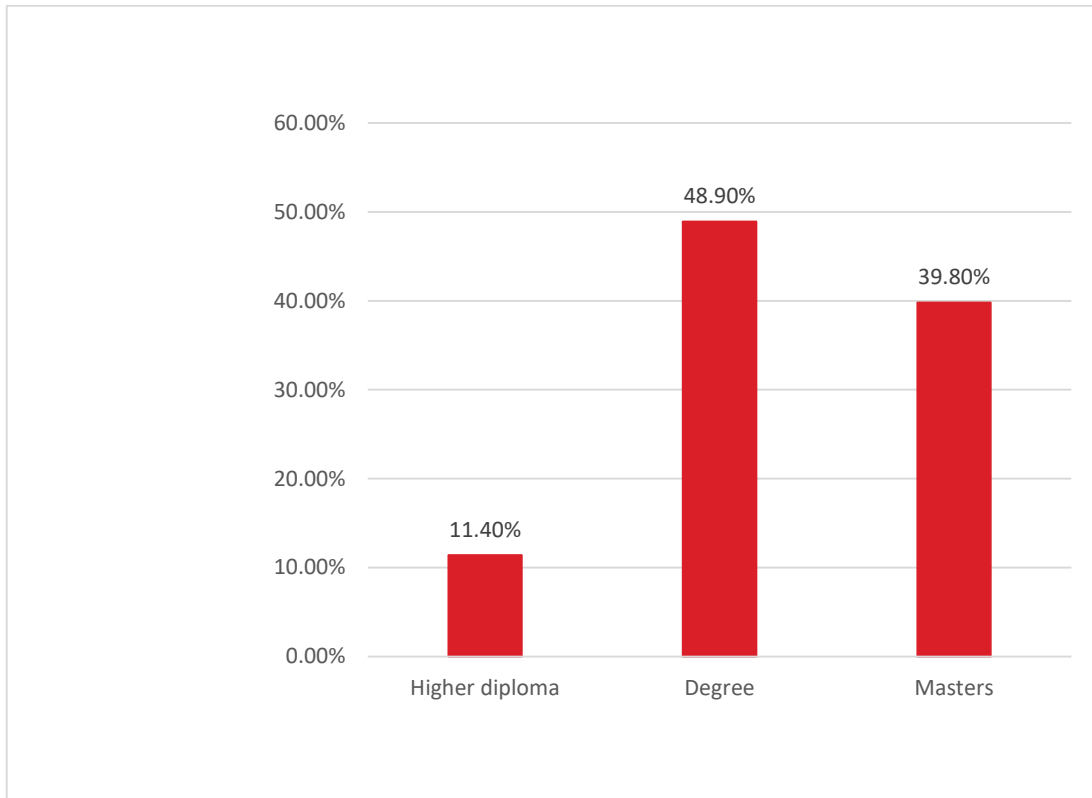


The study revealed that most nurse managers, 57 (64.8%), had more than five years of experience. Additionally, 16 nurse managers (18.2%) had between four and five years of experience, and 15 nurse managers (17%) had less than three years of experience.

The distribution of nurse managers' years of experience is illustrated in the pie chart in Figure 1. These findings indicate that extensive experience in the nursing profession is a significant factor in being selected as a mentor. As nurse managers' years of experience increased, their preparedness for mentorship roles improved, particularly for those with zero to five years of experience. This trend underscores the importance of professional experience in developing the skills and knowledge necessary for effective mentorship. However, it is notable that among the 88 nurse managers with more than five years of experience, only 16 were moderately prepared for mentorship roles. This suggests that while experience is crucial, it alone may not be sufficient to ensure preparedness for mentorship responsibilities. Other factors, such as targeted training, support systems, and leadership development programs, might be necessary to enhance the mentorship readiness of nurse managers, even those with extensive professional experience. The findings highlight a potential gap in the mentorship preparedness of highly experienced nurse managers, indicating a need for continuous professional development and support to fully equip them for mentorship roles. Addressing this gap could improve the overall effectiveness of mentorship programs and enhance the professional development of both nurse managers and their mentees. Existing literature supports these findings. According to McHugh et al. (2021), there is a widespread dissatisfaction and burnout among nurses, which can be exacerbated by a lack of adequate preparation and support for mentorship roles. This study emphasizes the need for comprehensive training and support systems to ensure nurse managers are well-equipped to handle their responsibilities effectively, which aligns with the observed need for continuous professional

Figure 4.1

The highest level of education for the nurse managers.



4.3.4 Highest level of education of a nurse manager

The study found that nurse managers had varied levels of education. Indeed, 43 (48.9%), held a degree in nursing. Additionally, 39.8% of the nurse managers had a master's degree in a nursing-related field, while 10 (11.4%) held a higher national diploma in nursing-related fields, as depicted in Figure 4.4. When the highest level of education was correlated with the level of preparedness for mentorship roles among the nurse managers, it was evident that having a degree level of education was positively associated with preparedness for mentorship roles compared to having a higher national diploma or a master's degree. Specifically, among the ten nurse managers with a higher national diploma, half of them (5) were moderately prepared

for mentorship roles. In contrast, among the 43 nurse managers with a degree level of education, 27 were moderately prepared for mentorship roles. However, among the 30 nurse managers who held a master's degree, only 5 were moderately prepared for mentorship roles.

These findings suggest that a degree level of education is associated with a higher level of preparedness for mentorship roles compared to both higher national diploma and master's degree levels. This deviation was not explicitly explained in the study. Several potential factors could contribute to this anomaly, including the specific nature of master's degree programs, which may focus more on specialized knowledge and research rather than practical mentorship skills. Additionally, those with higher national diplomas may have more hands-on experience, which could compensate for the lack of advanced academic training, leading to moderate preparedness for mentorship.

According to the literature, practical experience and ongoing professional development are critical for effective mentorship (Nagle et al., 2021). The observed trend highlights the complexity of factors influencing preparedness for mentorship roles. While academic qualifications are important, practical experience, the nature of educational programs, and the availability of continuous professional development opportunities also play crucial roles. Further investigation could help to elucidate the reasons behind these deviations and provide insights into how educational programs can better prepare nurse managers for mentorship roles.

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the nature of educational programs, and the availability of continuous professional development opportunities also play crucial roles. Further investigation could help to elucidate the reasons behind these deviations and provide insights into how educational programs can better prepare nurse managers for mentorship roles:

4.4 Leadership Factors

Association between leadership at KNH and nurse manager preparedness in mentorship roles. The objective was assessed based on four (4) areas: leadership resources, management support, mentorship of the nurse managership program, and work load and time constraints.

4.4.1 Provision of leadership resources

The provision of leadership resources was assessed by 10 statements on a Likert scale as shown in Table 4.1. The Likert scale had five options 1 represented strongly disagree, 2 represented disagree, 3 represented neutral response, 4 represented agree and 5 represented strongly agree.

Management Provides Resources and Support for Nurse Mentorship Programs

The study found that a significant majority of participants, 62 (70.5%), strongly disagreed that the leadership at Kenyatta National Hospital (KNH) provides the necessary resources and support for nurse mentorship programs. This substantial lack of support indicates that nurse managers feel inadequately equipped to engage in mentorship activities. Without the essential resources, mentorship programs cannot be

effectively implemented, potentially affecting the quality and sustainability of mentorship provided within the hospital.

The finding highlights a critical barrier to successful mentorship within KNH. Effective mentorship requires various resources, such as time, educational materials, and administrative support. The absence of these resources implies that nurse managers might struggle to carry out their mentorship roles effectively, leading to suboptimal outcomes for mentees. This lack of support can also demotivate potential mentors and discourage participation in mentorship programs, ultimately impacting the professional development of nurses within the institution.

According to Setati and Nkosi (2017), adequate resources and institutional support are crucial for successful mentorship programs, as they directly impact the ability of mentors to provide valuable guidance and support. The finding highlights a critical barrier to successful mentorship within KNH. Effective mentorship requires various resources, such as time, educational materials, and administrative support. The absence of these resources implies that nurse managers might struggle to carry out their mentorship roles effectively, leading to suboptimal outcomes for mentees. This lack of support can also demotivate potential mentors and discourage participation in mentorship programs, ultimately impacting the professional development of nurses within the institution.

Management Values the Role of Mentorship in Nursing Practice

A majority of the participants, 70.5%, strongly disagreed that the management values the role of mentorship in nursing practice. This perceived lack of value placed on

mentorship by the management could demotivate nurse managers from participating in or advocating for mentorship programs. When the importance of mentorship is not recognized at the leadership level, it can hinder the development of future nurse managers and the overall improvement of nursing practices, as staff may not see the benefit of investing time and effort into mentorship activities.

According to Morsiani et al. (2016), an institutional emphasis on mentorship significantly enhances the development of nursing staff and ensures that future leaders are well-prepared, ultimately contributing to higher quality patient care and improved organizational outcomes. Valuing mentorship is essential for fostering a culture of continuous learning and development within healthcare institutions. If the management does not prioritize mentorship, it sends a signal to staff that mentorship is not a critical component of their professional responsibilities. This can lead to a lack of investment in mentorship activities and a decrease in the overall quality of nursing practice as future leaders are not adequately prepared.

Management Encourages Staff to Participate in Mentorship Programs

The findings revealed that 41 participants (46.6%) strongly disagreed that hospital management encourages staff to participate in mentorship programs. Without encouragement from the management, nurse managers may not feel supported or motivated to engage in mentorship activities. This lack of encouragement can stifle the growth and development of effective mentorship programs within the hospital, as the drive to participate and promote these programs is significantly diminished.

As noted by Farag et al. (2017), active management support and encouragement are essential for effective mentorship and professional development, ultimately contributing to improved patient care outcomes and staff satisfaction. Encouragement from management is crucial for the success of any professional development program. When staff are actively encouraged to participate in mentorship programs, it fosters a supportive environment that values growth and development. The lack of encouragement from KNH management likely results in reduced participation in mentorship programs, which can adversely affect the professional development of nurses and the overall quality of patient care.

Management Recognizes and Rewards Staff Who Participate in Mentorship Programs

The study highlighted that a total of 31 participants (35.2%) strongly disagreed, and 32 (36.4%) disagreed that the leadership recognizes and rewards staff who participate in mentorship programs. Recognition and rewards are critical for maintaining motivation and engagement in mentorship activities. The lack of recognition and rewards suggests that nurse managers who invest time and effort into mentorship do not receive the acknowledgment they deserve, potentially leading to decreased participation in such programs and a lack of enthusiasm for mentoring roles.

As emphasized by Choi et al. (2019), effective recognition and reward systems are crucial for maintaining high levels of engagement in mentorship and ensuring the success of such programs within healthcare settings. Recognition and rewards play a significant role in motivating staff to engage in mentorship programs. When nurse managers' efforts are acknowledged and rewarded, it reinforces the value of

mentorship and encourages continuous participation. The absence of such recognition at KNH could demotivate nurse managers, reducing their willingness to mentor others and weakening the overall mentorship culture within the hospital.

Management Provides Adequate Time for Staff to Engage in Mentorship Activities

A majority of nurse managers, 53 (60.2%), disagreed that the management provides adequate time for staff to engage in mentorship activities. Allocating sufficient time for mentorship is crucial for fostering effective mentoring relationships. The lack of time provided indicates that nurse managers may struggle to balance their regular duties with mentorship responsibilities, leading to less effective mentorship and potentially overburdening the staff involved.

Time allocation is a fundamental aspect of effective mentorship. If nurse managers do not have enough time to dedicate to mentoring activities, the quality of mentorship is likely to suffer. This can lead to rushed or superficial mentoring sessions, which do not provide the comprehensive support and guidance that mentees need. By not providing adequate time, KNH management undermines the effectiveness of their mentorship programs and places additional stress on nurse managers.

Management Ensures That Mentorship Activities Align with Organizational Goals and Values

The findings indicated that 52 participants (59.1%) disagreed that the management ensures mentorship activities align with organizational goals and values. Aligning mentorship activities with the hospital's goals and values is essential for creating a

cohesive and supportive environment. The failure to ensure this alignment could result in mentorship programs that do not fully support the hospital's mission or strategic objectives, thereby diminishing their overall effectiveness and relevance.

Aligning mentorship activities with organizational goals and values ensures that these programs contribute to the broader mission of the hospital. According to Gong and Li (2022) when mentorship activities are not aligned, there can be a disconnect between the efforts of nurse managers and the strategic objectives of the institution. This misalignment can lead to ineffective mentorship programs that do not adequately prepare nurse managers to support the hospital's mission, ultimately impacting the quality of patient care and organizational performance.

Management Promotes a Culture of Learning and Development Through Mentorship Programs

The study revealed mixed responses regarding whether management promotes a culture of learning and development through mentorship programs. Specifically, 26 participants (29.5%) were neutral, while 27 (30.7%) disagreed that management promotes such a culture. Promoting a culture of learning and development is vital for continuous professional growth. The uncertainty and disagreement about the extent to which the management fosters this culture suggest that efforts to promote learning and development through mentorship may be insufficient, potentially affecting the long-term professional development of staff.

A study by Kennedy (2019) reveals that a culture of learning and development is essential for the continuous improvement of healthcare practices. When management

actively promotes such a culture through mentorship programs, it encourages staff to engage in lifelong learning and professional development. The mixed responses indicate that KNH may not be fully committed to fostering this culture, which could hinder the professional growth of nurses and negatively impact patient care quality.

Management Fosters an Environment of Trust and Mutual Respect Among Staff Engaged in Mentorship Activities

A significant portion of the participants, 31 (35.2%), strongly disagreed, and 27 (30.7%) disagreed that the management fosters an environment of trust and mutual respect among staff engaged in mentorship activities. Trust and mutual respect are foundational to successful mentorship. The lack of a supportive environment could hinder the effectiveness of mentorship programs, as staff may not feel safe or valued in their mentoring relationships, leading to reduced engagement and a potential decline in the quality of mentorship provided.

Lin et al. (2021) argue that trust and mutual respect are critical components of effective mentorship relationships. Without these elements, mentees may not feel comfortable seeking guidance, and mentors may not feel valued for their efforts. The lack of a supportive environment at KNH suggests that mentorship relationships may be strained, reducing the overall effectiveness of mentorship programs and impacting the professional development of nurse managers.

Management Provides Ongoing Evaluation and Feedback for Staff Engaged in Mentorship Activities

The study found that 47 participants (53.4%) disagreed that the management provides ongoing evaluation and feedback for staff engaged in mentorship activities. Regular

evaluation and feedback are crucial for the continuous improvement of mentorship programs. The absence of such feedback mechanisms indicates that nurse managers may not receive the guidance needed to enhance their mentorship skills and effectiveness, which can negatively impact the overall quality of the mentorship provided.

Ongoing evaluation and feedback are essential for the growth and development of both mentors and mentees. These processes help identify areas of improvement and celebrate successes, fostering a continuous improvement culture. The lack of regular evaluation and feedback at KNH means that nurse managers may not have the opportunity to refine their mentorship practices, leading to potential stagnation and decreased effectiveness of mentorship programs

Management Recognizes the Contributions of Both Mentors and Mentees in the Organization

Finally, 53 participants (60.2%) disagreed that the management recognizes the contributions of both mentors and mentees in the organization. Recognition of contributions is important for fostering a positive and motivating environment. The lack of recognition suggests that both mentors and mentees may feel undervalued, which could lead to decreased engagement and enthusiasm for mentorship activities. This oversight can undermine the development and sustainability of effective mentorship programs within the hospital.

Recognition of the contributions of mentors and mentees is crucial for maintaining motivation and commitment to mentorship programs. When these contributions are

acknowledged, it reinforces the value of mentorship and encourages continued participation. The lack of recognition at KNH likely contributes to a sense of undervaluation among nurse managers and mentees, reducing their motivation to engage in mentorship activities and potentially leading to a decline in the quality and effectiveness of mentorship programs.

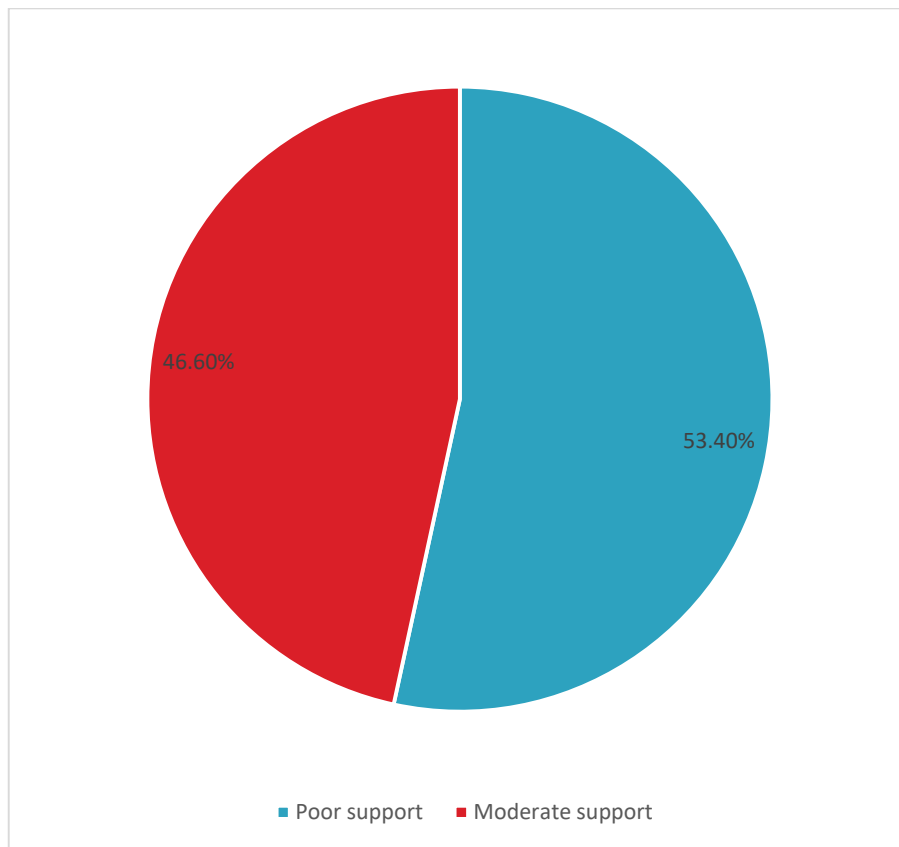
Table 4.1

Factors associated with the provision of leadership resources

Statement	Strongly disagree	disagree	Neutral	agree	Strongly agree.
Management provides resources and support for nurse mentorship programs.	41(46.6%)	26(29.5%)	6(6.8%)	10(11.4%)	5(5.7%)
Management values the role of mentorship in nursing practice.	64(70.5%)	5(5.7%)	11(12.5%)	5(5.7%)	3(3.3%)
Management encourages staff to participate in mentorship programs.	41(46.6%)	10(11.4%)	27(30.7%)	10(11.4%)	0(0%)
Management recognizes and rewards staffs who participates in mentorship programs.	31(35.2%)	32(36.4%)	20(22.7%)	5(5.7%)	0(0%)
Management provides adequate time for staff to engage in mentorship activities.	20(22.7%)	53(60.2%)	10(11.4%)	5(5.7%)	0(0%)
Management ensures that mentorship activities align with organizational goals and values.	21(23.9%)	52(59.1%)	10(11.5%)	5(5.7%)	0(0%)
Management promotes a culture of learning and development through mentorship programs.	25(28.4%)	27(30.7%)	26(29.5%)	5(5.7%)	5(5.7%)
Management fosters an environment of trust and mutual respect among staff engaged in mentorship activities.	31(35.2%)	27(30.7%)	15(17%)	10(11.4%)	5(5.7%)
Management provides ongoing evaluation and feedback for staff engaged in mentorship activities.	15(17%)	47(53.4%)	16(18.2%)	10(11.4%)	0(0%)
Management recognizes the contribution of both mentors and mentees in the organization.	15(17%)	53(60.2%)	5(5.7%)	10(11.4%)	5(5.7%)

Figure 4.2

Leadership support given to the nurse managers.



Level of leadership support for nurse managers

In general, it was found that the majority of the nurse managers rated leadership resources support from the management as poor as indicated in figure 5. Among the 47 nurse managers who had poor support, only 17 were found to be moderately prepared for nurse manager mentorship roles while among the 41 nurse managers who were moderately supported relatively half of them were found to be moderately prepared for mentorship roles

Management support for mentorship roles at Kenyatta National Hospital

The research assessed the management support provided by the hospital, by using five (5) statements on a Likert scale. The Likert scale had five options 1 represented strongly disagree, 2 represented disagree, 3 represented neutral response, 4 represented agree and 5 represented strongly agree. On management support, the majority of the nurse managers n=30 (34.1%) reported that the hospital does not support and encourage the development of nurse mentorship programs. It was also noted that the majority of the participants n=36 (40.9%) strongly disagreed that the management does not provide adequate funding for nurse mentorship programs.

Support from Management for Nurse Mentorship Programs

The data indicates that the majority of nurse managers rated leadership resources and support from the management as poor. Specifically, 34.1% of the respondents strongly disagreed, and 18.2% disagreed that management supports and encourages the development of nurse mentorship programs. Similarly, 40.9% strongly disagreed, and 34.1% disagreed that adequate funding is provided for nurse mentorship programs. Additionally, 63.6% disagreed, and 17% strongly disagreed that management promotes and recognizes the importance of nurse mentorship. Regarding opportunities for participation in mentorship programs, 53.4% disagreed, and 22.7% strongly disagreed. Finally, 40.9% disagreed, and 34.1% strongly disagreed that management monitors the effectiveness of these programs.

These findings suggest that there is a significant lack of support from management in various aspects of nurse mentorship programs. Poor support in terms of

encouragement, funding, recognition, opportunities, and monitoring may hinder the effectiveness and development of such programs. The perception of inadequate support could lead to reduced motivation and preparedness among nurse managers to take on mentorship roles. This indicates a need for management to improve their involvement and support to enhance the mentorship programs and better prepare nurse managers for their mentorship responsibilities.

Management Supports and Encourages the Development of Nurse Mentorship Programs

The data reveals that a significant portion of nurse managers feel unsupported by the management in developing nurse mentorship programs. Specifically, 34.1% of the respondents strongly disagreed, and 18.2% disagreed that management supports and encourages the development of these programs. Only 18.2% agreed with this statement, while 29.5% remained neutral. This lack of perceived support from management can significantly impact the morale and effectiveness of nurse managers. When managers do not feel encouraged or supported in their efforts to develop mentorship programs, it can lead to a lack of enthusiasm and commitment toward such initiatives. This ultimately affects the quality of mentorship that new nurses receive, potentially impacting patient care and the overall functionality of the healthcare system.

Management Provides Adequate Funding for Nurse Mentorship Programs

The findings show that 40.9% of nurse managers strongly disagreed, and 34.1% disagreed that management provides adequate funding for nurse mentorship programs.

Only a small percentage, 5.7%, agreed that the funding was adequate, while 19.3% were neutral. Inadequate funding is a significant barrier to the successful implementation and sustainability of nurse mentorship programs. Without sufficient financial resources, these programs may lack the necessary materials, training opportunities, and incentives to be effective. This can lead to poorly developed programs that do not meet the needs of nurse managers and their mentees, ultimately impacting the quality of nursing care and professional development within the organization.

Management Promotes and Recognizes the Importance of Nurse Mentorship

The survey results indicate that 63.6% of nurse managers disagreed, and 17% strongly disagreed that management promotes and recognizes the importance of nurse mentorship. A small percentage, 6.8%, agreed, while 12.5% remained neutral. The lack of promotion and recognition from management regarding the importance of nurse mentorship can lead to the undervaluation of these programs. When mentorship is not seen as a priority, nurse managers may not be motivated to engage in or develop effective mentorship relationships. Recognition from management is crucial for validating the efforts of nurse managers and ensuring that mentorship is integrated into the organizational culture, which is essential for the professional growth of nurses and the overall improvement of healthcare services.

Management Provides Opportunities for Nurses to Participate in Mentorship Programs

The data reveals that 53.4% of respondents disagreed, and 22.7% strongly disagreed that management provides opportunities for nurses to participate in mentorship

programs. Only 5.7% agreed with this statement, while 18.2% were neutral. Providing opportunities for participation is essential for the success of mentorship programs. When nurse managers perceive a lack of opportunities, it may indicate that the programs are not accessible or adequately promoted. This can lead to a shortage of mentors and mentees, reducing the overall effectiveness and reach of the mentorship programs. Ensuring that there are ample and accessible opportunities for participation is critical for fostering a culture of mentorship and continuous professional development.

Management Monitors the Effectiveness of Nurse Mentorship Programs

The findings show that 40.9% of nurse managers disagreed, and 34.1% strongly disagreed that management monitors the effectiveness of nurse mentorship programs. Only 5.7% agreed that there was adequate monitoring, while 19.3% were neutral. Effective monitoring is crucial for assessing the success and areas for improvement in mentorship programs. Without proper oversight, it is challenging to determine whether the programs are meeting their objectives and how they can be enhanced. The lack of monitoring reported by nurse managers suggests that there may be insufficient feedback mechanisms and performance evaluations in place. Improving the monitoring process can help challenges, an ensuring that mentorship programs are continuously evolving to meet the needs of both mentors and mentee.

Table 4.2

Factors associated with management support for nurse managers in their role of mentorship

Statement	Strongly disagree	disagree	Neutral	agree	Strongly agree.
Management provides resources and support for nurse mentorship programs.	41(46%)	26(29.5%)	6(6.8%)	10(11.4%)	5(5.7%)
Management values the role of mentorship in nursing practice.	64(70.5%)	5(5.7%)	11(12.5%)	5(5.7%)	3(3.3%)
Management encourages staff to participate in mentorship programs.	41(46.6%)	10(11.4%)	27(30.7%)	10(11.4%)	0(0%)
Management recognizes and rewards staffs who participates in mentorship programs.	31(35.2%)	32(36.4%)	20(22.7%)	5(5.7%)	0(0%)
Management provides adequate time for staff to engage in mentorship activities.	20(22.7%)	53(60.2%)	10(11.4%)	5(5.7%)	0(0%)
Management ensures that mentorship activities align with organizational goals and values.	21(23.9%)	52(59.1%)	10(11.5%)	5(5.7%)	0(0%)
Management promotes a culture of learning and development through mentorship programs.	25(28.4%)	27(30.7%)	26(29.5%)	5(5.7%)	5(5.7%)
Management fosters an environment of trust and mutual respect among staff engaged in mentorship activities.	31(35.2%)	27(30.7%)	15(17%)	10(11.4%)	5(5.7%)
Management provides ongoing evaluation and feedback for staff engaged in mentorship activities.	15(17%)	47(53.4%)	16(18.2%)	10(11.4%)	0(0%)
Management recognizes the contributions of both mentors and mentees in the organization.	15(17%)	53(60.2%)	5(5.7%)	10(11.4%)	5(5.7%)

Mentorship for a nurse managership course at Kenyatta National Hospital

The research assessed the mentorship for nurse managership support provided by the hospital, by using five (5) statements on a Likert scale. The majority of the participants disagreed that the hospital has a formal nurse mentorship program and encourages the

nurse managers to participate in mentorship programs, 36 (40.9%) and 35 (39.8%) respectively. Most of the nurse managers 52 (59.1%) reported that the mentorship program for nurse managership is not well structured and effective. The nurse managers disagreed that they receive adequate support and resources for their mentorship program, as indicated by 30 (34.1%) who strongly disagreed that they receive the support and 22 (25%) who disagreed respectively. It was also noted that the mentorship programs undertaken have not impacted the nurse managers' leadership skills as reported by 52 (59.1%) nurse managers who disagreed that their leadership skills have been impacted by the mentorship programs in the hospital.

In general, 57 nurse managers were found to be receiving low support for mentorship programs while 31 received moderate support. Out of the 57 nurse managers who received low support only 27 were moderately prepared for mentorship roles while out of 31 nurse managers who received moderate support, only 10 nurse managers were moderately prepared for mentorship roles.

Mentorship for Nurse managership Course at Kenyatta National Hospital

The research assessed the support provided for nurse managership mentorship at Kenyatta National Hospital using a Likert scale, revealing trends. A significant majority of participants disagreed that the hospital has a formal nurse mentorship program (40.9% strongly disagreed and 29.5% disagreed) and that nurse managers are encouraged to participate in such programs (39.8% strongly disagreed and 35.2% disagreed). Furthermore, 59.1% of nurse managers reported that the mentorship program for nurse managership is not well-structured or effective. Additionally, 34.1% of the respondents strongly disagreed, and 25% disagreed that they receive adequate

support and resources for their mentorship programs. Lastly, 28.4% strongly disagreed, and 59.1% disagreed that mentorship programs have positively impacted their leadership skills.

These findings indicate significant gaps in the mentorship support system at Kenyatta National Hospital. The absence of a formal and well-structured mentorship program suggests that the hospital is not prioritizing the development of nurse managers. The lack of encouragement for participation further undermines the potential benefits of mentorship, such as skill development and leadership preparedness. Adequate support and resources are crucial for effective mentorship, and the reported deficiencies in this area highlight a critical need for improved resource allocation and managerial involvement. The perceived lack of impact on leadership skills underscores the ineffectiveness of existing programs, necessitating a thorough review and restructuring to better meet the developmental needs of nurse managers.

The Hospital Has a Formal Nurse Mentorship Program for Leadership Development

According to the data, 40.9% of nurse managers strongly disagreed, and 29.5% disagreed that the hospital has a formal nurse mentorship program for leadership development. The remaining 29.5% remained neutral, with no respondents agreeing or strongly agreeing. The lack of a formal mentorship program indicates a significant organizational shortfall in leadership development for nurse managers. This absence may hinder the professional growth of nurses, as structured mentorship is key to fostering leadership qualities. Without a formal program, nurse managers may lack the

guidance and support necessary to excel in leadership roles, impacting the overall quality of healthcare delivery and the operational efficiency of the hospital.

Nurse Managers Are Encouraged to Participate in Mentorship Programs

The data reveals that 39.8% of nurse managers strongly disagreed, and 35.2% disagreed that they are encouraged to participate in mentorship programs. Another 25% remained neutral, with no respondents agreeing or strongly agreeing. This lack of encouragement reflects a possible disconnect between hospital administration and nurse managers regarding the importance of mentorship. Encouragement from management is essential for motivating nurse managers to engage in mentorship programs. The absence of such encouragement may result in low participation rates, reducing the potential benefits of mentorship and negatively affecting the preparedness of nurse managers for leadership roles.

The Mentorship Program for Nurse managership Is Well-Structured and Effective

The data shows that 59.1% of respondents strongly disagreed, and 5.7% disagreed that the mentorship program is well-structured and effective. Another 29.5% remained neutral, with only 5.7% agreeing. The perception that the mentorship program is poorly structured and ineffective points to significant flaws in its design and implementation. A well-structured mentorship program is critical for ensuring that nurse managers receive comprehensive and impactful training. The current perception likely stems from inadequate planning, lack of resources, and insufficient managerial oversight, all of which contribute to an ineffective mentorship experience.

Nurse Managers Receive Adequate Support and Resources for Their Mentorship Program

According to the findings, 34.1% of nurse managers strongly disagreed, and 25% disagreed that they receive adequate support and resources for their mentorship programs. Another 35.2% remained neutral, with only 5.7% agreeing. Adequate support and resources are fundamental for the success of any mentorship program. The reported lack of support and resources suggests that nurse managers are not equipped with the necessary tools and assistance to effectively mentor others (Manzi et al., 2017). This deficiency can lead to suboptimal mentorship experiences, impeding the professional growth of nurse managers and the nurses they mentor.

Mentorship Programs Have Positively Impacted Nurse Managers' Leadership Skills

The data indicates that 28.4% of nurse managers strongly disagreed, and 59.1% disagreed that mentorship programs have positively impacted their leadership skills. Another 12.5% remained neutral, with no respondents agreeing or strongly agreeing. This significant negative response highlights the ineffectiveness of current mentorship programs in enhancing leadership skills among nurse managers. Leadership development is a crucial aspect of mentorship, and the lack of perceived impact suggests that the programs are not meeting their intended goals. This ineffectiveness could be due to inadequate program design, lack of skilled mentors, or insufficient engagement from participants, all of which need to be addressed to improve the outcomes of mentorship initiatives.

Table 4.3***Factors associated with the mentorship program at Kenyatta National Hospital***

Statement	Strongly disagree	disagree	neutral	agree	Strongly agree
The hospital has a formal nurse mentorship program for leadership development.	36(40.9%)	26(29.5)%	26(29.5)%	0(0%)	0(0%)
Nurse managers are encouraged to participate in mentorship programs.	53(59.8%)	31(35.2)%	4(5%)	0(0%)	0(0%)
The mentorship program for nurse managership is well-structured and effective	52(59.1%)	5(5.7%)	26(29.5%)	5(5.7%)	0(0%)
Nurse managers receive adequate support and resources for their mentorship program	30(34.1%)	22(25%)	31(35.2%)	5(5.7%)	0(0%)
Mentorship programs have positively impacted nurse manager's leadership skills	25(28.4%)	52(59.1)%	11(12.5)%	0(0%)	0(0%)

Workload and time constraints

The research assessed the nurse manager work workload and time constraints concerning nurse manager preparedness for mentorship roles by using five (5) statements on a Likert scale. The study findings indicate that the hospital does not have a formal mentorship program for nurses seeking leadership skills and the majority of the nurse managers were not aware of mentorship opportunities available for them to advance as nurse managers. It was evident from the results that mentorship programs do not provide nurse managers with adequate training and support for nurse managership development. The nurse managers disagreed that the hospital management recognizes and values their contributions even after going through the mentorship program. However, the nurse managers believed that participating in mentorship programs would help them become better nurse managers.

These findings highlight significant barriers faced by nurse managers at Kenyatta National Hospital in their pursuit of mentorship roles. The absence of a formal mentorship program and the lack of awareness about available opportunities suggest systemic issues in the hospital's approach to leadership development (Latimer, 2015). The inadequate training and support from existing programs indicate that current initiatives are not meeting the needs of nurse managers. Additionally, the mixed feelings about the benefits of mentorship programs and the lack of recognition from the hospital management reflect a disconnect between the expectations of nurse managers and the support they receive. Addressing these gaps is crucial for enhancing the effectiveness of mentorship programs and improving the overall preparedness of nurse managers for leadership roles.

The Hospital Has a Formal Mentorship Program for Nurses Seeking Leadership Positions

According to the data, 40.9% of nurse managers strongly disagreed, and 46.6% disagreed that the hospital has a formal mentorship program for nurses seeking leadership positions. Another 12.5% remained neutral, with no respondents agreeing or strongly agreeing. The lack of a formal mentorship program suggests that the hospital does not prioritize structured leadership development for its nurses. This gap can hinder the professional growth of nurses, as formal mentorship programs are essential for guiding and supporting future leaders. According to Maura et al. (2017), without such programs, nurse managers may lack the necessary mentorship to develop leadership skills effectively, impacting the quality of care and management within the hospital.

Awareness of Mentorship Opportunities for Advancing Career as a Nurse manager

The data reveals that 46.6% of nurse managers strongly disagreed, and 29.5% disagreed that they are aware of mentorship opportunities available to them for advancing their careers as nurse manager. Another 18.2% remained neutral, with 5.7% agreeing. This lack of awareness indicates a significant communication gap between the hospital administration and nurse managers. Ensuring that nurse managers are aware of available mentorship opportunities is critical for encouraging participation and professional development. Improved communication and promotion of mentorship programs can help bridge this gap and support nurse managers in advancing their careers.

The Mentorship Program Provides Adequate Training and Support for Nurse managership Development

The data shows that 52.3% of nurse managers strongly disagreed, and 22.7% disagreed that the mentorship program provides adequate training and support for nurse managership development. Another 25% remained neutral, with no respondents agreeing or strongly agreeing. The perceived inadequacy of training and support highlights significant flaws in the existing mentorship program. Greenwood and Krol (2020) effective mentorship require comprehensive training and robust support systems to help nurse managers develop their leadership skills. The current lack of these essential components suggests that the mentorship program needs a thorough review and enhancement to better meet the needs of nurse managers.

Belief that Participating in the Mentorship Program Would Help Become a Better Nurse manager

According to the findings, 11.4% of nurse managers strongly disagreed, 36.4% disagreed, and 11.4% were neutral about the belief that participating in the mentorship program would help them become better nurse managers. Meanwhile, 5.7% agreed, and 35.2% strongly agreed. The mixed responses indicate varying levels of confidence in the effectiveness of the mentorship program. While a significant portion of nurse managers see potential benefits, others are sceptical about the program's impact on their leadership skills. This division suggests that the mentorship program may have inconsistencies in its implementation or outcomes, which need to be addressed to build confidence and ensure its success.

The Hospital Recognizes and Values the Contributions of Nurse Managers Who Have Gone Through the Mentorship Program

The data indicates that 22.7% of nurse managers strongly disagreed, and 47.7% disagreed that the hospital recognizes and values the contributions of nurse managers who have gone through the mentorship program. Another 23.9% remained neutral, with 5.7% agreeing. According to Kaiser (2017), the lack of recognition and value for the contributions of nurse managers who have completed the mentorship program suggests a disconnect between the hospital's stated goals and its actions. Recognition and appreciation are crucial for motivating and retaining nurse managers. The current lack of these elements indicates that the hospital needs to develop better strategies to acknowledge and support the contributions of its nurse managers, thereby enhancing the overall effectiveness of its mentorship programs

4.5 Policy Factors

Association between hospital policies and Nurse manager Preparedness for Mentorship Roles

This objective was assessed based on four sub-themes: nurse manager involvement in policy-making, standard operating procedures, guidelines on mentorship roles, and support to mentor nurse managers.

Nurse manager involvement in policy-making

This was assessed by using ten (10) statements on a Likert scale. The Likert scale had five options 1 represented strongly disagree, 2 represented disagree, 3 represented neutral response, 4 represented agree and 5 represented strongly agree. The results indicate that 37 (42%) nurse managers are not involved in meetings where decisions were made, and 42 (47.7%) of the nurse managers disagreed that the hospital values the input of nurses when it comes to policy-making. The majority of the nurse managers 36 (40.9%) reported that they are not provided with opportunities to give feedback and suggestions for policy making.

These results suggest a systemic issue within the hospital's approach to involving nurse managers in policymaking. The lack of inclusion and perceived value in their input likely contributes to a sense of disempowerment among nurse managers. This could negatively impact their preparedness for mentorship roles, as they might feel their contributions are undervalued and unrecognized. Involving nurses in policymaking is crucial for developing effective and practical policies that reflect the needs and insights of those directly involved in patient care. The lack of opportunities for feedback and

the absence of recognition can lead to disengagement and reduced motivation among nurse managers, hindering their development and effectiveness in mentorship roles.

Nurses Are Included in Discussions and Decision-Making Processes Related to Policy Making in the Hospital

The data indicates that 22.7% of nurse managers strongly disagreed, and 42% disagreed that they are included in discussions and decision-making processes related to policymaking. Another 28.4% remained neutral, while 6.8% agreed. The lack of inclusion in policy discussions suggests that nurse managers may feel marginalized in decision-making processes. This exclusion can prevent them from contributing valuable insights that could improve hospital policies and procedures. Ensuring nurse managers are part of these discussions is essential for creating policies that are practical and effective, thereby enhancing their preparedness for mentorship roles.

The Hospital Values the Input of Nurses When It Comes to Policy Making

According to the findings, 17% of nurse managers strongly disagreed, and 47.7% disagreed that the hospital values their input in policy making. Another 35.2% remained neutral, with no respondents agreeing. This significant lack of perceived value in their input suggests that nurse managers may feel their expertise and opinions are overlooked. This undervaluation can lead to frustration and disengagement, affecting their willingness to participate in mentorship roles. Recognizing and valuing nurses' input is crucial for fostering a collaborative and supportive work environment.

Nurses Are Provided with Opportunities to Provide Feedback and Suggestions on Policy Making

The data reveals that 17% of nurse managers strongly disagreed, and 40.9% disagreed that they are provided with opportunities to give feedback and suggestions on policy making. Another 42% remained neutral, with no respondents agreeing. The lack of opportunities for feedback indicates a top-down approach to policymaking that excludes valuable insights from frontline staff. Providing opportunities for nurse managers to contribute to policy discussions is essential for developing effective and inclusive policies. This involvement can also enhance their preparedness for mentorship roles by encouraging a sense of ownership and responsibility.

The Hospital Seeks Out the Opinions and Perspectives of Nurses When Developing Policies

According to the findings, 28.4% of nurse managers strongly disagreed, and 29.5% disagreed that the hospital seeks out their opinions and perspectives when developing policies. Another 36.4% remained neutral, with 5.7% agreeing. This lack of active engagement suggests that the hospital may not be leveraging the expertise of its nurse managers when creating policies. Actively seeking out nurses' opinions and perspectives is crucial for developing practical and effective policies. This practice can also enhance nurse managers' engagement and preparedness for mentorship roles by fostering a collaborative and inclusive work environment.

Nurses Feel Empowered and Supported to Speak Up and Provide Input on Policy Making

The data indicates that 22.7% of nurse managers strongly disagreed, and 35.2% disagreed that they feel empowered and supported to speak up and provide input on policymaking. Another 42% remained neutral, with no respondents agreeing. The lack of empowerment and support suggests that nurse managers may feel their voices are not heard or valued in the policy-making process. Empowering nurses to speak up and provide input is crucial for creating a collaborative and inclusive work environment. This empowerment can also enhance their preparedness for mentorship roles by fostering a sense of ownership and responsibility.

The Hospital Provides Training and Resources to Help Nurses Participate in Policy Making

According to the findings, 28.4% of nurse managers strongly disagreed, and 46.6% disagreed that the hospital provides training and resources to help nurses participate in policymaking. Another 18.2% remained neutral, with 6.8% agreeing. The lack of training and resources highlights a significant gap in the hospital's approach to preparing nurse managers for involvement in policymaking. Providing adequate training and resources is essential for equipping nurse managers with the necessary skills and knowledge to contribute effectively to policy discussions. This can enhance their confidence and competence in taking on mentorship roles. As noted by Morsiani et al., (2016), sufficient training and support are crucial for enabling nurse managers to engage in policymaking and mentorship, thereby improving overall job satisfaction and organizational effectiveness.

Nurses Are Recognized and Rewarded for Their Contributions to Policy Making

The data indicates that 17% of nurse managers strongly disagreed, and 39.8% disagreed that they are recognized and rewarded for their contributions to policy making. Another 36.4% remained neutral, with 6.8% agreeing. The lack of recognition and rewards suggests that the contributions of nurse managers to policymaking are undervalued. Recognizing and rewarding nurses for their input can motivate them to participate more actively in policy discussions and enhance their sense of value within the organization. This recognition is crucial for fostering a supportive environment where nurse managers feel encouraged to take on mentorship roles.

The Hospital Has a Transparent and Accessible Process for Involving Nurses in Policy Making

According to the findings, 17% of nurse managers strongly disagreed, and 52.3% disagreed that the hospital has a transparent and accessible process for involving nurses in policymaking. Another 18.2% remained neutral, with 12.5% agreeing. The lack of transparency and accessibility in the policy-making process indicates that nurse managers may feel excluded and uninformed about how decisions are made. Ensuring a transparent and accessible process is vital for building trust and encouraging active participation from nurse managers. This can also enhance their preparedness for mentorship roles by fostering an inclusive and collaborative work environment. Farag et al. (2017) found that transparent decision-making processes are essential for creating a supportive work culture and improving staff engagement, which is crucial for effective mentorship and overall organizational success.

Nurses Believe That Their Input Is Taken into Consideration in the Development of Policies

The data reveals that 22.7% of nurse managers strongly disagreed, and 35.2% disagreed that their input is taken into consideration in the development of policies. Another 29.5% remained neutral, with 12.5% agreeing. The perception that their input is not considered suggests that nurse managers may feel their contributions are disregarded. Taking nurses' input into consideration is crucial for developing effective and practical policies that reflect the needs and insights of those on the front lines of patient care. This practice can also enhance their engagement and preparedness for mentorship roles by fostering a sense of ownership and responsibility.

The Hospital Demonstrates a Commitment to Shared Governance and Involving Nurses in Decision-Making Related to Policy Development

According to the findings, 17% of nurse managers strongly disagreed, and 40.9% disagreed that the hospital demonstrates a commitment to shared governance and involving nurses in decision-making related to policy development. Another 35.2% remained neutral, with 6.8% agreeing. The lack of commitment to shared governance indicates that nurse managers may feel excluded from the decision-making processes that affect their work environment. Demonstrating a commitment to shared governance is essential for creating a collaborative and inclusive work culture. This can enhance nurse managers' preparedness for mentorship roles by encouraging active participation and fostering a sense of ownership in the policy-making process. As noted by Patidar et al. (2016), involving nurses in decision-making and shared

governance is crucial for improving job satisfaction and overall engagement, which in turn can significantly impact the effectiveness of mentorship programs.

Table 4.4

Factors associated with nurse manager involvement in the policy-making process

Statement	Strongly disagree	disagree	neutral	agree	Strongly agree
The hospital has a formal mentorship program for nurses seeking leadership positions.	36(40.9%)	41(46.6%)	11(12.5%)	0(0%)	0(0%)
I am aware of the mentorship opportunities available to me for advancing my career as a nurse manager.	41(46.6%)	26(29.5%)	16(18.2%)	5(5.7%)	0(0%)
The mentorship program provides adequate training and support for nurse managership development.	46 (52.3%)	20(22.7%)	22(25%)	0(0%)	0(0%)
I believe that participating in the mentorship program would help me become a better nurse manager.	10(11.4%)	32(36.4%)	10(11.4%)	5(5.7%)	31(35.2%)
The hospital recognizes and values the contributions of nurse managers who have gone through the mentorship program.	20(22.7%)	42(47.7%)	21(23.9%)	5(5.7%)	0(0%)

Standard operating procedures

The standard operating procedures help guide the nurses on when and how to intervene. The research used a Likert scale to assess the availability and utilization of the standard operating procedures. This was assessed by using ten (10) statements on a Likert scale. The Likert scale had five options 1 represented strongly disagree, 2 represented disagree, 3 represented neutral response, 4 represented agree and 5 represented strongly agree. The results showed that only 11 (12.5) of the nurse

managers agreed that they were adequately trained in the standard operating procedures of the hospital while the majority disagreed. The hospital management was found not providing sufficient support to a mentorship program for the nurse managers, only 25 (28.4%) of the nurse managers agreed that they are supported. It was also found that 27 (30.7%) were neutral concerning the active involvement of the nurse managers in participating in mentorship programs, majority of the nurse managers disagreed that the hospital actively encourages the nurse managers to participate in mentorship programs.

Availability and Utilization of Standard Operating Procedures (SOPs)

The research findings indicate that only 12.5% of nurse managers agreed that they were adequately trained in the standard operating procedures of the hospital, while the majority disagreed. This lack of adequate training is reflected in the insufficient support provided to the mentorship program for nurse managers, with only 28.4% agreeing that they receive sufficient support. Additionally, 30.7% of nurse managers were neutral about their active involvement in mentorship programs, while the majority disagreed that the hospital actively encourages participation in these programs.

The inadequate training in SOPs and lack of support for mentorship programs highlight significant gaps in the hospital's approach to developing nurse managers. Straughair (2019) highlights that proper training in SOPs is crucial for ensuring that nurse managers can effectively mentor others and maintain high standards of care. Furthermore, encouraging active participation in mentorship programs is essential for

fostering a culture of continuous improvement and professional development among nurse managers.

Hospital Structure and Feedback for Mentorship Programs

The results show that 52.3% of nurse managers disagreed that the hospital has a clear structure and defined goals for the mentorship program, while only 6.8% agreed that the hospital regularly provides feedback and support to nurse mentors. Additionally, 11.4% strongly agreed, and 28.4% agreed that the hospital recognizes and rewards nurse mentors for their contributions, whereas 5.7% strongly agreed, and 34.1% agreed that the hospital seeks feedback from nurse mentors and mentees to improve the mentorship program.

Weimer (2021) argues that the lack of a clear structure and regular feedback mechanisms suggests that the hospital may not be effectively managing its mentorship program. A well-structured program with clear goals and regular feedback is essential for ensuring the success of mentorship initiatives. Recognizing and rewarding nurse mentors for their contributions can also motivate them to engage more actively in mentoring activities and enhance their leadership skills.

Management Support and Training Opportunities

The findings indicate that the hospital management values the importance of mentorship in developing the nursing workforce, providing opportunities for nurse mentors to receive training and development to enhance their mentoring skills. However, 30.7% of nurse managers disagreed that the hospital provides protected time

for nurse mentors to engage in mentoring activities, highlighting a significant barrier to effective mentorship.

Providing opportunities for training and development is crucial for ensuring that nurse mentors have the necessary skills and knowledge to guide their mentees effectively. However, without protected time for mentoring activities, nurse mentors may struggle to balance their mentoring responsibilities with their clinical duties, undermining the effectiveness of the mentorship program.

Previous studies emphasize the importance of SOPs and guidelines in developing nurse mentors, supported by a healthy organizational culture and sufficient resources (Elliott et al., 2016). The research findings support these previous studies, indicating that nurse managers who were provided with SOPs and followed them were moderately prepared for mentorship roles compared to those without SOPs. SOPs can help establish clear expectations and responsibilities for nurse managers, promoting consistency and quality in mentorship programs (Webb et al., 2017). The findings also align with Choi et al. (2019), who noted that nursing leaders play a significant role in developing mentorship skills by providing support and acting as role models. The research highlights the need for a supportive environment, adequate training, and clear organizational structures to enhance the preparedness of nurse managers for mentorship roles (Webb et al., 2017)

Table 4.5

Factors associated with the use of standard operating procedures among nurse managers

Statement	Strongly disagree	disagree	neutral	agree	Strongly agree
Nurse mentees are adequately trained in the standard operating procedures of the hospital.	25(28.4%)	26(29.5)%	26(29.5)%	11(12.5)%	0(0%)
Management provides sufficient resources to support the mentorship program for nurses.	18(20.4%)	26(29.5)%	19(21.3)%	25(28.4)%	0(0%)
Management actively encourages nurse managers to participate in mentorship programs.	20(22.7%)	41(46.6)%	27(30.7)%	0(0%)	0(0%)
The mentorship program has a clear structure and defined goals that are supported by management.	20(22.7%)	46(52.3)%	17(19.3)%	5(5.7%)	0(0%)
Management regularly provides feedback and support to nurse mentors and mentees.	20(22.7%)	35(39.8)%	27(30.7)%	6(6.8%)	0(0%)
Management recognizes and rewards nurse mentors for their contributions to the mentorship program.	10(11.4%)	21(23.9)%	22(25%)	25(28.4%)	10(11.4)%
Management seeks feedback from nurse' mentors and mentees to improve the mentorship program.	10(11.4%)	21(23.9)%	22(25%)	30(34.1)%	5(5.7)%
Management values the importance of mentorship in developing the nursing workforce.	15(17%)	16(18.2)%	42(47.7)%	15(17%)	0(00%)
Management provides opportunities for nurse mentors to receive training and development to enhance their mentoring skills.	15(17%)	21(23.9)%	37(42%)	17(17%)	(0%)
Management provides protected time for nurse mentors to engage in mentoring activities.	11(11.4%)	27(31.7)%	35(40.9)%	15(17%)	(0%)

Guidelines on Mentorship Roles

Mentorship program requires clear guidelines. The research used a Likert scale to assess the availability and utilization of the standard operating procedures. This was assessed by using nine (9) statements on a Likert scale. The Likert scale had five options 1 represented strongly disagree, 2 represented disagree, 3 represented neutral response, 4 represented agree and 5 represented strongly agree. It was evident from the results that the nurse managers were also provided with adequate resources for the mentorship program, despite 20 (22.7%) of the nurse managers disputing the fact. The management recognizes and rewards nurse mentors for their contributions, however, the majority of the participants were neutral not sure if all the nurse managers were recognized and rewarded.

The findings showed that the management provides regular training and development opportunities for nurse mentors. This was supported by 6(6.8%) and 5 (5.7%) nurse managers who strongly agreed and others who agreed respectively, however, 35 (39.8%) disagreed being supported.

The majority of nurse managers interviewed in the study reported that the hospital management rarely provides opportunities for mentor mentees to give feedback on the mentorship program. The study findings indicated that 35 (39.8%) and 33 (36.4%) of the nurse managers strongly disagreed and disagreed respectively that they are given the opportunities for feedback. It was also found that only 5 (5.7%) of the nurse managers were encouraged to share their knowledge and expertise with others, while the majority 46 (52.3%) disagreed and reported that they were not encouraged to share their expertise and accrued knowledge.

Networking is key in a health facility for easy mentorship. The majority of the nurse mentees were not given opportunities to network with other professionals. This was supported by 57 (68.7%) nurse managers who disagreed that the hospital allows mentees to network. It was also reported that the hospital does not actively promote and support mentorship programs among nurse managers. More than half of the participants reported not being supported in their mentorship roles. The nurse managers interviewed reported that they rarely get time to carry out their mentoring activities, 11 (12.5%) nurse managers also reported that the hospital provides mentorship opportunities for all nurses regardless of their experience level. According to Rohatinsky et al. (2020), effective mentorship in healthcare settings is significantly enhanced by providing structured networking opportunities and support systems, which are crucial for the professional development of both mentors and mentees.

In conclusion, it was realized that there were no clear guidelines on mentorship roles in the hospital.

Management provides adequate resources for the mentorship program

The data reveal a varied perception among nurse managers regarding the adequacy of resources for the mentorship program. While a significant portion (40.9%) agreed that adequate resources were provided, a notable proportion (29.5%) were neutral, and a smaller percentage (6.8%) disagreed. Interestingly, none of the respondents strongly disagreed or strongly agreed, suggesting a lack of consensus on this aspect. This ambiguity may stem from inconsistencies in the availability of resources or differing perceptions among nurse managers regarding their sufficiency.

Management recognizes and rewards nurse mentors for their contributions

The findings indicate a mixed perception among nurse managers regarding the recognition and rewards for nurse mentors. While a substantial proportion (42%) agreed that nurse mentors were recognized and rewarded, a significant number (22.7%) were neutral, and a smaller percentage (17%) disagreed. No respondents strongly disagreed or strongly agreed with this statement. This ambiguity may lead to dissatisfaction or disengagement among nurse mentors, affecting the overall effectiveness of the mentorship program. According to Morsiani et al. (2016), adequate recognition and rewards for nurse mentors are crucial for maintaining their motivation and commitment to mentorship roles, which in turn enhances the quality of the mentorship program and supports the professional development of mentees.

Management provides regular training and development opportunities for nurse mentors

The data indicate varying perceptions among nurse managers regarding the provision of training and development opportunities for nurse mentors. While a minority (35.2%) agreed that regular trainings were provided, a significant proportion (39.8%) disagreed. Additionally, a smaller percentage (12.5%) were neutral, and a few respondents (5.7%) agreed or strongly agreed with this statement. This disagreement among a substantial portion of nurse managers indicates a perceived inadequacy or inconsistency in the availability of such opportunities, potentially hindering the professional growth and effectiveness of nurse mentors in their roles. According to Morsiani et al. (2016), continuous training and development are essential for nurse

mentors to stay updated with best practices and effectively guide their mentees, highlighting the need for consistent and comprehensive training programs.

Management provides opportunities for mentees to give feedback on the mentorship program: The data indicate a lack of opportunities for mentees to provide feedback on the mentorship program, as evidenced by the responses of nurse managers. A considerable majority (39.8%) strongly disagreed while another significant portion (36.4%) disagreed with the availability of such opportunities. Alarming, none of the respondents agreed or strongly agreed, suggesting a systemic issue in soliciting feedback from mentees. This deficiency in feedback mechanisms could hinder the program's effectiveness and limit opportunities for continuous improvement. According to Gray and Brown (2016), regular feedback from mentees is essential for assessing the impact of mentorship programs and identifying areas for enhancement, emphasizing the need for robust feedback systems to ensure the ongoing success and relevance of such initiatives.

Management encourages nurse mentors to share their knowledge and expertise with others

The findings highlight a significant discrepancy in the encouragement of nurse mentors to share their knowledge and expertise with others. While a substantial proportion (52.3%) of nurse managers agreed, indicating some level of encouragement, a notable portion (23.9%) disagreed, suggesting a lack of support or incentives for knowledge sharing. Additionally, a smaller percentage (18.2%) were neutral, indicating uncertainty or ambivalence regarding this aspect. This inconsistency in support for knowledge sharing among nurse mentors could impede

collaboration and the dissemination of best practices within the nursing staff, potentially affecting the quality of patient care.

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Management provides opportunities for nurse mentees to network with other professionals: The data reveal a significant shortfall in opportunities for nurse mentees to network with other professionals within the hospital setting. A vast majority (68.7%) of nurse managers disagreed that such networking opportunities were provided, indicating a systemic gap in facilitating professional connections and collaboration. Moreover, a smaller percentage (13.3%) agreed, while an equally small portion (12%) were neutral, suggesting limited awareness or utilization of existing networking opportunities. This deficit in networking opportunities could hinder the professional growth and development of nurse mentees, limiting their exposure to diverse

perspectives and resources within the healthcare community. According to Cummings et al. (2018), effective mentorship and networking are crucial for developing nursing leadership and enhancing the quality of care provided, underscoring the importance of addressing this gap to support nurse mentees' professional development.

Management actively promotes and supports the mentorship program for all nursing staff

The findings underscore a lack of active promotion and support for the mentorship program among nursing staff by hospital management. A significant proportion (23.9%) of nurse managers strongly disagreed that the program was actively promoted and supported, while an equal percentage (23.9%) were neutral, indicating uncertainty or ambivalence. Notably, none of the respondents agreed or strongly agreed with this statement, suggesting a systemic deficiency in communication or advocacy for the mentorship program. This lack of active promotion and support could hinder participation and engagement among nursing staff, limiting the program's effectiveness in fostering professional development and enhancing patient care.

Management provides adequate time for nurse mentors to carry out their mentoring responsibilities

The data reveal concerning findings regarding the allocation of time for nurse mentors to fulfil their mentoring responsibilities. While a majority (60.2%) of nurse managers agreed that adequate time was provided, a notable portion (22.7%) disagreed, indicating potential challenges in time management or workload balancing for nurse mentors. Additionally, a considerable percentage (17%) remained neutral, suggesting

uncertainty or ambivalence regarding the adequacy of time allocated for mentoring activities. This disparity in perceptions regarding time allocation underscores the need for a comprehensive review of workload distribution and support systems to ensure that nurse mentors can effectively carry out their mentoring duties without compromising their other responsibilities.

Management provides mentorship opportunities for all nurses, regardless of their experience level

The findings suggest a mixed perception regarding the availability of mentorship opportunities for nurses across different experience levels. While a significant portion (40.9%) agreed that mentorship opportunities were provided regardless of experience level, a notable percentage (28.4%) disagreed, indicating potential disparities or limitations in access to mentorship for nurses with varying levels of experience. Additionally, a substantial proportion (18.2%) were neutral, suggesting uncertainty or ambiguity regarding the inclusivity of mentorship opportunities. This discrepancy in perceptions highlights the importance of ensuring equitable access to mentorship programs and resources for all nurses, regardless of their experience level, to support their professional development and enhance overall patient care outcomes. Addressing these disparities and promoting a culture of inclusivity in mentorship initiatives can contribute to a more supportive and collaborative work environment within the healthcare facility.

Table 4.6*Factors associated with guidelines on mentors' roles*

Statement	Strongly disagree	disagree	neutral	agree	Strongly agree
Nurse mentees are adequately trained in the standard operating procedures of the hospital.	25(28.4%)	26(29.5)%	26(29.5)%	11(12.5)%	0(0%)
Management provides sufficient resources to support the mentorship program for nurses.	18(20.4%)	26(29.5)%	19(21.3)%	25(28.4)%	0(0%)
Management actively encourages nurse managers to participate in mentorship programs.	20(22.7%)	41(46.6)%	27(30.7)%	0(0%)	0(0%)
The mentorship program has a clear structure and defined goals that are supported by management.	20(22.7%)	46(52.3)%	17(19.3)%	5(5.7%)	0(0%)
Management regularly provides feedback and support to nurse mentors and mentees.	20(22.7%)	35(39.8)%	27(30.7)%	6(6.8%)	0(0%)
Management recognizes and rewards nurse mentors for their contributions to the mentorship program.	10(11.4%)	21(23.9)%	22(25%)	25(28.4)%	10(11.4)%
Management seeks feedback from nurse' mentors and mentees to improve the mentorship program.	10(11.4%)	21(23.9)%	22(25%)	30(34.1)%	5(5.7)%
Management values the importance of mentorship in developing the nursing workforce.	15(17%)	16(18.2)%	42(47.7)%	15(17%)	0(00%)
Management provides opportunities for nurse mentors to receive training and development to enhance their mentoring skills.	15(17%)	21(23.9)%	37(42%)	17(17%)	(0%)
Management provides protected time for nurse mentors to engage in mentoring activities.	11(11.4%)	27(31.7)%	35(40.9)%	15(17%)	(0%)

Support to mentor nurse managers

When the nurse managers are supported adequately, they are most likely to embrace their mentorship roles effectively. The research used a Likert scale to assess the availability and utilization of the standard operating procedures. This was assessed by using five (5) statements on a Likert scale. The Likert scale had five options 1 represented strongly disagree, 2 represented disagree, 3 represented neutral response, 4 represented agree and 5 represented strongly agree. It was noted that the majority of the nurse managers 40 (45.5%) were adequately supported by the management for the mentorship roles and activities. They only lacked the time to carry out the mentorship activities. Seventeen percent of the managers reported being encouraged by the management to engage in their mentorship activities with colleagues. However, the majority of the nurse managers disagreed.

Despite the support reported, the management rarely provided resources like time, training, and tools to support mentorship activities. Only 5.7% of the participants reported being provided with time and other resources to implement their roles in mentorship. The hospital was also reported to recognize and reward mentors engaging in mentorship activities, but this was disputed by the majority 43 (48.9%) who disagreed. The majority of the nurse managers 37 (42%) reported not being allowed to engage in mentorship activities outside their working units.

In general, among the 47 nurse managers who were reported to be supported, twenty-six of them were found to be moderately prepared for the nurse managers mentorship role. However, among 41 nurse managers who were not supported, only 12 were moderately prepared for the mentorship roles.

Mentor receives adequate support from management for mentorship activities

The findings indicate that a significant proportion (45.5%) of nurse managers reported receiving adequate support from management for their mentorship activities. However, there is a notable discrepancy in perceptions, as a substantial percentage (30.7%) remained neutral, suggesting uncertainty or ambivalence regarding the level of support provided. Additionally, a smaller but still significant portion (17%) disagreed, indicating a lack of perceived support from management. This disparity underscores the importance of ensuring consistent and robust support systems from management to enable nurse managers to effectively fulfil their mentorship roles and responsibilities.

Management encourages mentors to engage in mentorship activities with colleagues

The data reveal mixed perceptions regarding management's encouragement for mentors to engage in mentorship activities with colleagues. While a minority (17%) reported feeling encouraged by management, a significant portion (42%) remained neutral, indicating uncertainty or ambiguity regarding management's stance on this matter. Furthermore, a notable percentage (23.9%) disagreed, suggesting a lack of perceived encouragement or support from management. This discrepancy in perceptions highlights the need for clearer communication and proactive efforts from management to foster a culture of mentorship and collaboration among nurse managers. Encouraging mentorship activities among colleagues can enhance knowledge sharing, skill development, and overall professional growth within the healthcare facility, ultimately benefiting patient care.

Management provides resources such as time, training, and tools to support mentorship activities

The data suggest varied perceptions among nurse managers regarding the provision of resources by management to support mentorship activities. While a considerable percentage (40.9%) agreed that management provides such resources, a substantial portion (30.7%) remained neutral, indicating uncertainty or ambiguity about the adequacy of these resources. Moreover, a noteworthy percentage (17%) disagreed, suggesting a perceived lack of provision of resources such as time, training, and tools to support mentorship activities. This discrepancy underscores the importance of ensuring that nurse managers have access to the necessary resources and support from management to effectively carry out their mentorship roles, thereby enhancing the quality of mentorship within the healthcare facility.

Management recognizes and rewards mentors for engaging in mentorship activities

The findings reveal mixed perceptions regarding management's recognition and rewards for mentors engaging in mentorship activities. While a significant percentage (48.9%) agreed that management recognizes and rewards such efforts, a notable portion (22.7%) remained neutral, suggesting uncertainty or ambiguity about the extent of recognition and rewards provided. Additionally, a smaller percentage (22.7%) disagreed, indicating a perceived lack of recognition and rewards from management for engaging in mentorship activities. This inconsistency in perceptions highlights the importance of transparent and equitable recognition and reward systems to motivate and incentivize nurse managers to actively participate in mentorship

activities, ultimately fostering a culture of mentorship and professional development within the healthcare organization. Webb et al. (2017) emphasize the significance of organizational support in fostering a culture of mentorship within healthcare settings.

Management provides opportunities for mentors to engage in mentorship activities outside of my unit

The data suggest varied perceptions among nurse managers regarding the provision of opportunities by management for mentors to engage in mentorship activities outside of their unit. While a notable percentage (42%) agreed that management provides such opportunities, a considerable portion (23.9%) remained neutral, indicating uncertainty or ambiguity about the availability of these opportunities. Moreover, a significant percentage (28.4%) disagreed, suggesting a perceived lack of opportunities from management for mentors to engage in mentorship activities outside of their unit. This discrepancy underscores the importance of fostering a supportive environment that facilitates mentorship opportunities across different units or departments within the healthcare facility, thereby promoting knowledge sharing, collaboration, and professional growth among nurse managers.

Table 4.7*Factors associated with support given to nurse managers*

Question	Strongly disagree	Disagree	neutral	agree	Strongly agree
Mentor receives adequate support from management for mentorship activities.	15(17%)	27(30.7)%	6(6.8%)	40(45.5%)	0(0%)
Management encourages mentors to in mentorship activities with colleagues.	15(17%)	21(23.9%)	37(42%)	15(17%)	0(0%)
Management provides resources such as time, training, and tools to support mentorship activities.	15(17%)	36(40.9)%	27(30.7)%	5(5.7%)	5(5.7%)
Management recognizes and rewards mentors for engaging in mentorship activities.	20(22.7%)	43(48.9)%	20(22.7)%	5(5.7%)	0(0%)
Management provides opportunities for mentors to engage in mentorship activities outside of my unit.	25(28.4%)	37(42%)	21(23.9)%	5(5.7%)	0(0%)

4.6 Motivation Factors

Nurse manager motivation and preparedness for mentorship roles

This objective was assessed by evaluating mentorship and coaching, salary remuneration, participation in leadership meetings, and training incentives.

Nurse manager mentorship and coaching

A 5 Likert scale was used to assess the nurse manager s motivation and coaching. The Likert scale had five options 1 represented strongly disagree, 2 represented disagree, 3 represented neutral response, 4 represented agree and 5 represented strongly agree. The research findings showed that the organization does not provide adequate resources for mentorship programs, this was suggested by 21 (23.9%) who disagreed

and 47 (53.4%) who were not sure if the hospital provided adequate resources. The senior management was reported by 5 (5.7%) to encourage and support mentorship programs, however, the majority of the nurse managers reported that they were not encouraged. A similar proportion was reported to be provided with regular training and development opportunities for mentors.

The organization provides adequate resources for mentorship programs

The findings reveal varied perceptions among nurse managers regarding the provision of resources by their organization for mentorship programs. While a notable percentage (35.2%) agreed that their organization provides adequate resources, a considerable portion (42%) remained neutral, indicating uncertainty or ambiguity about the adequacy of these resources. Moreover, a significant percentage (17%) disagreed, suggesting a perceived lack of provision of adequate resources for mentorship programs. This suggests a potential gap in resource allocation that may hinder the effectiveness of mentorship initiatives within the organization.

Mentorship programs are encouraged and supported by senior management

The data indicate mixed perceptions regarding the encouragement and support of mentorship programs by senior management. While a notable percentage (46.6%) agreed that senior management encourages and supports such programs, a substantial portion (28.4%) remained neutral, suggesting uncertainty or ambiguity about the extent of support provided. Additionally, a smaller percentage (19.3%) disagreed, indicating a perceived lack of encouragement and support from senior management for mentorship programs. This inconsistency in perceptions underscores the

importance of clear communication and active involvement of senior management in fostering a culture that values mentorship and professional development within the organization. This inconsistency in perceptions underscores the critical importance of clear communication and active involvement of senior management in fostering a culture that values mentorship and professional development within the organization (McHugh et al., 2021).

The organization provides ongoing support for mentor-mentee relationships

The findings suggest varied perceptions among nurse managers regarding the provision of ongoing support for mentor-mentee relationships within their organization. While a notable percentage (47.7%) disagreed that their organization provides ongoing support, a significant portion (22.7%) agreed, indicating some level of support. Moreover, an additional percentage (18.2%) remained neutral, suggesting uncertainty or ambiguity about the provision of ongoing support for mentor-mentee relationships. This highlights the need for organizations to prioritize ongoing support mechanisms to nurture and sustain effective mentor-mentee relationships, which are crucial for professional development and knowledge transfer within the nursing workforce (Douglas, 2017).

There are clear expectations and guidelines for mentorship within my organization

The data indicate mixed perceptions among nurse manager regarding the existence of clear expectations and guidelines for mentorship within their organization. While a notable percentage (30.7%) remained neutral, suggesting uncertainty or ambiguity

about the presence of clear expectations and guidelines, a significant portion (29.5%) agreed that such expectations and guidelines exist. However, a smaller percentage (22.7%) disagreed, indicating a perceived lack of clarity or absence of established guidelines for mentorship. This variability in perceptions underscores the importance of establishing transparent and well-defined expectations and guidelines to guide mentorship activities effectively within the organization.

The hospital provides opportunities for mentorship across departments and specialties

The findings suggest varying perceptions among nurse managers regarding the provision of opportunities for mentorship across departments and specialties within the hospital. While a notable percentage (43.2%) agreed that such opportunities are provided, a considerable portion (34.1%) remained neutral, indicating uncertainty or ambiguity about the availability of cross-departmental and cross-specialty mentorship opportunities. Notably, a smaller percentage (22.7%) disagreed, suggesting a perceived lack of opportunities for mentorship across different areas within the hospital. This highlights the importance of fostering collaboration and knowledge exchange across departments and specialties through structured mentorship programs, which can contribute to enhanced professional development and interdisciplinary collaboration within the healthcare organization.

Table 4.8*Factors associated with nurse manager mentorship and coaching*

Statement	Strongly disagree	disagree	neutral	Agree	Strongly agree
My organization provides adequate resources for mentorship programs.	15(17%)	31(35.2)%		5(5.7%)	0(0%)
Mentorship programs are encouraged and supported by senior management.		17(19.3%)	41(46.6)%	5(5.7%)	0(0%)
My organization provides regular training and development opportunities for mentors.	15(17%)	31(35.2%)	37(42%)	5(5.7%)	0(0%)
Mentorship is valued and recognized as an important component of professional development in the hospital	2(2.7%)	16(18.2)%	37(42%)	10(11.4%)	5(5.7%)
My organization provides ongoing support for mentor-mentee relationships.	20(22.7%)	42(47.7)%	16(18.2)%	5(5.7%)	4(5.7%)
There are clear expectations and guidelines for mentorship within my organization.	20(22.7%)	26(29.5%)	27(30.7%)	10(11.4%)	5(5.7%)
Hospital provides opportunities for mentorship across departments and specialties.	30(34.1%)	38(43.2)%	20(22.7%)	0(0%)	0(0%)

Salary remuneration

The nurse manager's salary may contribute to the nurse manager 's mentorship role. This was assessed by a Likert scale which had` five options: 1 represented strongly disagree, 2 represented disagree, 3 represented neutral response, 4 represented agree and 5 represented strongly agree. The research findings indicated that the majority of the nurse managers 36 (40.9%) received monetary allowance and benefits as mentors. This was also supported by 21 (23.9%) of the nurse mentors who reported that the hospital recognizes and rewards mentors for their contribution to the organization. However, the majority of the nurse managers 30 (34.1%) were not sure if the management provided the necessary resources and tools for mentorship.

Management provides monetary allowance and benefits for mentors

The data reveal that a significant portion of nurse managers (40.9%) reported receiving monetary allowance and benefits as mentors within the organization. This suggests that the hospital recognizes and rewards mentors for their contribution, as supported by 23.9% of nurse mentors. However, a notable percentage (18.2%) disagreed with this statement, indicating a potential discrepancy in the provision of monetary incentives for mentorship roles. Additionally, a small percentage (11.4%) remained neutral, suggesting uncertainty or lack of awareness regarding the provision of such benefits.

Management recognizes and rewards mentors for their contribution to the organization

The findings indicate mixed perceptions among nurse managers regarding the recognition and rewards provided for mentors by the management. While a notable percentage (29.5%) agreed that mentors are recognized and rewarded, a significant portion (22.7%) disagreed with this statement. Moreover, 17% remained neutral, indicating uncertainty or lack of clarity regarding the recognition and rewards for mentorship activities. This variability in perceptions underscores the importance of transparent and consistent recognition and reward mechanisms to incentivize and motivate nurse managers to actively engage in mentorship roles. Vahey et al. (2014), emphasizing the importance of organizational factors, such as recognition and reward systems, in influencing nurse satisfaction and organizational outcomes, which are pertinent to the discussion of mentorship support in healthcare settings.

Management supports mentors by providing necessary resources and tools

The data illustrate varying perspectives among nurse managers concerning the support provided by management in terms of necessary resources and tools for mentorship. A notable proportion (34.1%) agreed that management supports mentors in this aspect, indicating some level of provision. However, a substantial percentage (25%) disagreed, suggesting a perceived inadequacy in the provision of resources and tools. Furthermore, 23.9% remained neutral, reflecting uncertainty or lack of clarity regarding the extent of support provided by management in this regard. This indicates a potential area for improvement to ensure that mentors have the necessary resources to effectively carry out their roles.

Management encourages and facilitates mentor-mentee relationship-building

The findings reveal varied perceptions regarding the encouragement and facilitation of mentor-mentee relationship building by management. A significant portion of nurse managers (47.7%) agreed that management encourages and facilitates such relationships, indicating active support and promotion. However, a small percentage (5.7%) disagreed with this statement, suggesting a lack of perceived encouragement or facilitation from management. Additionally, 28.4% remained neutral, indicating a level of uncertainty or ambiguity regarding management's role in promoting mentor-mentee relationships. This highlights the importance of clear communication and active facilitation by management to foster effective mentor-mentee dynamics within the organization.

Management provides regular training and development opportunities for mentors

The data suggest mixed perceptions among nurse managers regarding the provision of regular training and development opportunities for mentors by management. While a notable proportion (42%) agreed that such opportunities are provided, indicating some level of support, a significant percentage (17%) disagreed with this statement, suggesting a perceived lack of regular training and development initiatives. Moreover, 28.4% remained neutral, reflecting uncertainty or lack of awareness regarding the extent of training and development opportunities provided by management. This underscores the importance of consistent and structured training programs to enhance the effectiveness of mentorship initiatives and support the professional growth of mentors.

Management promotes and values the importance of mentorship in achieving organizational goals

The findings indicate varied perspectives among nurse managers regarding management's promotion and valuation of mentorship in achieving organizational goals. While a substantial percentage (53.4%) agreed that management promotes and values mentorship, indicating active support and recognition, a notable proportion (17%) disagreed with this statement, suggesting a perceived lack of emphasis or recognition of mentorship's importance. Additionally, 12.5% remained neutral, reflecting uncertainty or ambiguity regarding management's stance on the significance of mentorship. Moeta and Du Rand (2019) argue that uncertainty or ambiguity regarding management's stance on the significance of mentorship highlights the

importance of aligning organizational goals with mentorship initiatives and ensuring that mentorship is valued as a strategic component of organizational development and success.

Table 4.9

Remuneration factors associated with nurse manager's mentorship roles

Statement	Strongest disagree	disagree	neutral	agree	Strongly agree
Management provides monetary allowance and benefits for mentors	10(11.4%)	21(23.9%)	16(18.2%)	36(40.9%)	5(5.7%)
Management recognizes and rewards mentors for their contribution to the organization	15(17%)	26(29.5%)	8(9.8%)	21(23.9%)	18(20.4%)
Management supports mentors by providing necessary resources and tools	10(11.4%)	21(23%)	30(34.1%)	21(23.9%)	6(6.5%)
Management encourages and facilitates mentor-mentee relationship building	5(5.7%)	42(47.7%)	25(28.4%)	16(18.2%)	(%)
Management provides regular training and development opportunities for mentors	15(17%)	37(42%)	25(28.4%)	11(12.5%)	00%)
Management promotes and values the importance of mentorship in achieving organizational goals	15(17%)	47(53.4%)	15(17%)	11(12.5%)	0(0%)

Participating in leadership meetings

During the leadership meetings, the nurse manager gains more skills. This was assessed by a Likert scale which had five options: 1 represented strongly disagree, 2 represented disagree, 3 represented neutral response, 4 represented agree and 5 represented strongly agree. Mentors were not encouraged to participate in leadership meetings as shown by 42 (47.7%). However, 18.2% of the nurse managers were

provided with opportunities for professional growth and development. The hospital was found to provide support for mentors' participation in mentorship programs and hospital managers valued and recognized mentors' contributions to the hospital. However, only 5 (5.7%) reported to be provided with constructive feedback on their performance.

The current study findings are in agreement with previous studies that have shown that mentorship and coaching can increase job satisfaction, receiving support for mentorship programs, self-efficacy, and confidence in clinical skills among nurses (Chang et al., 2016; Kipkorir et al., 2021). These factors could contribute to increased motivation among nurse managers to engage in mentorship activities. Mentorship and coaching can influence the motivation of nurse managers to take on mentorship roles, and this has been demonstrated at the global, regional, and local levels (Peltzer et al. 2015).

Mentors are encouraged to participate in leadership meetings

The data indicate varying perspectives among nurse managers regarding the encouragement of mentors' participation in leadership meetings. A significant portion (47.7%) disagreed with the statement, suggesting a lack of encouragement from management for mentors to participate in such meetings. Conversely, a smaller percentage (22.7%) agreed, indicating some level of encouragement, albeit limited. Additionally, 23.9% remained neutral, reflecting uncertainty or lack of clarity regarding management's stance on mentor participation in leadership meetings. This underscores the potential opportunity for management to actively involve mentors in

leadership discussions to enhance their skills and contribute to organizational decision-making processes.

Managers provide opportunities for professional growth and development

The findings reveal varied perceptions regarding the provision of opportunities for professional growth and development by managers. While a notable proportion (39.8%) disagreed with the statement, suggesting a perceived lack of opportunities, a smaller percentage (18.2%) agreed, indicating some level of support for professional growth and development initiatives. Moreover, 36.4% remained neutral, reflecting uncertainty or ambiguity regarding the extent of opportunities provided by managers. According to Nazir et al. (2021) uncertainty or ambiguity regarding the extent of opportunities provided by managers highlights the importance of fostering a culture of continuous learning and development within the organization to support mentorship activities and enhance the skills of nurse managers.

Managers encourage and support mentors' participation in mentorship programs

The data illustrate mixed perceptions among nurse managers regarding management's encouragement and support for mentors' participation in mentorship programs. While a notable portion (34.1%) agreed that managers encourage and support such participation, indicating some level of facilitation, a similar percentage (36.4%) disagreed, suggesting a perceived lack of encouragement or support. Additionally, 17% remained neutral, reflecting uncertainty or lack of awareness regarding management's stance on mentorship program participation. This underscores the

importance of clear communication and active support from management to promote mentorship initiatives and facilitate mentor engagement in such programs.

Managers recognize and value mentors' contributions to the hospital

The findings indicate varied perspectives among nurse managers regarding management's recognition and valuation of mentors' contributions to the hospital. While a significant percentage (42%) agreed that managers recognize and value such contributions, indicating active support and acknowledgment, a notable portion (17%) disagreed with this statement, suggesting a perceived lack of recognition or appreciation. Moreover, 23.9% remained neutral, reflecting uncertainty or ambiguity regarding management's acknowledgment of mentors' contributions. This highlights the importance of fostering a culture of appreciation and recognition within the organization to motivate mentors and enhance their engagement in mentorship activities.

My manager provides mentors with constructive feedback on performance

The data reveal diverse perceptions among nurse managers regarding the provision of constructive feedback by managers to mentors on their performance. A considerable proportion (39.8%) disagreed with the statement, indicating a perceived lack of constructive feedback provided by managers. Conversely, a smaller percentage (30.7%) agreed, suggesting some level of constructive feedback being offered, albeit not universally. Additionally, 23.9% remained neutral, indicating uncertainty or lack of clarity among nurse managers regarding the extent to which managers provide constructive feedback on mentors' performance. This highlights the importance of

effective feedback mechanisms in mentorship programs to support mentors' professional growth and enhance their effectiveness in guiding and developing their mentees.

Overall, the findings underscore the significance of constructive feedback in mentorship relationships and its impact on mentor performance and mentee development. Latimer (2015) argues that managers play a crucial role in providing mentors with meaningful feedback that can help them identify areas for improvement, capitalize on strengths, and ultimately enhance the quality of mentorship provided. Clear communication and regular feedback sessions can foster a culture of continuous improvement and professional development among mentors, contributing to the overall success of mentorship programs within the organization (Kaiser, 2017). Therefore, managers must prioritize the provision of constructive feedback to mentors, ensuring their ongoing growth and effectiveness in supporting the development of their mentees.

Table 4.4

Nurse manager participation in leadership meetings in preparation for mentorship roles

Statement	Strongest disagree	disagree	neutral	agree	Strongly agree
Mentors are encouraged to participate in leadership meetings.	20(22.7%)	42(47.7)%	21(23.9)%	5(5.7%)	0(0%)
Managers provides opportunities for professional growth and development.	35(39.8%)	32(36.4)%	5(5.7%)	16(18.2)%	0(0%)
Managers encourages and supports mentors participation in mentorship programs.	30(34.1%)	32(36.4)%	15(17%)	11(12.5%)	0(0)
Managers recognizes and values mentors' contributions to the hospital	15(17%)	37(42%)	21(23.9)%	15(17%)	0(0)%
My manager provides mentors with constructive feedback on performance.	35(39.8%)	27(30.7)%	21(23.9)%	5(5.7%)	0(0)%

Training incentives

Incentives can be used to motivate nurse managers. A Likert scale which had five options: 1 represented strongly disagree, 2 represented disagree, 3 represented neutral response, 4 represented agree and 5 represented strongly agree was used to assess the training incentives provided to the nurse managers. The hospital provides training incentives though not to all nurse managers as well as supporting the nurse managers in providing mentorship as suggested by 20 (22.7%) nurse managers. Seventeen percent of the nurse managers indicated that the management provided resources for mentorship while 21 (23.9%) and 20 (22.7%) agreed and strongly agreed that the management recognizes and rewards mentorship activities.

There was a positive linear relationship between the provision of incentives and nurse manager preparedness in their mentorship roles since out of 49 nurse managers who indicated to be given the incentives, 31 were found to be moderately prepared for nurse manager mentorship roles.

Training Incentives Provided by Management

The data regarding the provision of training incentives by management for nurse managers shows a varied response among respondents. Around 17% of nurse managers strongly agreed that training incentives are provided, while a slightly higher percentage (23.9%) expressed agreement with this statement. However, a notable portion (19.3%) responded neutrally, suggesting uncertainty or lack of clarity regarding the provision of these incentives. Additionally, 17% disagreed with the statement, indicating skepticism or a perception of insufficient training incentives, while 22.7% strongly disagreed, signifying strong disbelief or lack of awareness about the provision of such incentives.

Support for Mentors Provided by Management

Regarding the support for mentors provided by management in offering mentorship, the data reveals a similar pattern of mixed perceptions among respondents. Approximately 17% of nurse managers strongly agreed that mentors are supported by management in providing mentorship, while 29.5% agreed with this statement. However, a considerable portion (18.2%) expressed a neutral response, suggesting uncertainty or lack of awareness about the level of support provided. Moreover, 12.5% disagreed, indicating skepticism or a perception of insufficient support, while 22.7%

strongly disagreed, signifying strong disbelief or lack of awareness regarding the support provided for mentors.

These findings underscore the critical need for healthcare organizations to enhance clarity and consistency in support mechanisms for mentorship initiatives. Kajander-unhuri et al. (2018) emphasize the importance of organizational support in promoting effective mentorship programs, highlighting that clear management involvement and support can significantly influence the success and perceived effectiveness of mentorship roles among healthcare professionals.

Management's Provision of Resources for Mentorship Activities

The data on management's provision of resources for mentorship activities shows varying responses among respondents. Around 28.4% of nurse managers strongly agreed that management provides resources for mentorship activities, while 18.2% agreed with this statement. However, a notable portion (36.4%) disagreed, suggesting skepticism or a perception of insufficient resources provided for mentorship activities. Additionally, 17% expressed a neutral response, indicating uncertainty or lack of awareness about the provision of resources, while 0% strongly disagreed, implying a lack of belief or awareness regarding the provision of such resources.

Management's Recognition and Rewards for Mentorship Activities:

Regarding management's recognition and rewards for mentorship activities, the data indicates mixed perceptions among respondents. Approximately 28.4% of nurse managers strongly agreed that management recognizes and rewards mentorship activities, while 12.5% agreed with this statement. However, a significant portion

(12.5%) disagreed, indicating skepticism or a perception of insufficient recognition and rewards for mentorship activities. Moreover, 23.9% strongly disagreed, signifying strong disbelief or lack of awareness regarding the recognition and rewards provided for mentorship activities.

Table 4.11

Training incentives for nurse managers in preparation for mentorship roles

Statement	Strongest disagree	disagree	neutral	agree	strongly agree
Training incentives are provided by the management	15(17%)	36(31.67%)	17(19.3%)	10(11.3%)	10(11.3%)
Mentors are supported by management in providing mentorship	15(17%)	26(29.5%)	16(18.2%)	11(12.5%)	20(22.7%)
Management provides resources for mentorship activities	25(28.4%)	8(8.2%)	32(36.4%)	15(17%)	8(9.3%)
Management recognizes and rewards mentorship activities	21(23.4%)	2(2.5%)	11(12.5%)	34(39%)	20(22.7%)

4.7 Training Factors

Association between Nurse manager training and Preparedness for Mentorship

Roles

This was the fourth objective of the research. It was assessed by assessing continuous medical education, communication, and career development opportunities.

Continuous medical education

Nurse managers need to continuously update their skills through continuous medical education. This was assessed by use of a 5 Likert scale which had five options: 1 represented strongly disagree, 2 represented disagree, 3 represented neutral response, 4 represented agree and 5 represented strongly agree. The majority of the nurse managers 57 (64.8%) interviewed were not sure if the hospital provided resources to support continuous medical education for nurses. Similarly, almost half of the nurse managers 36 (40.9%) were not sure if the hospital was committed to investing in nurse's continuous medical education. However, 16 (18.2%) of the nurses reported being given off time to attend continuous medical education. The hospital was found to recognize and reward the nurse managers who participated in continuous medical education as well as giving opportunities for nurse managers to apply what they learn during continuous medical education.

Continuous Medical Education Resources:

The data regarding the provision of resources to support continuous medical education for nurses indicates mixed perceptions among nurse managers. Only 17% strongly agreed and 12.5% agreed that the hospital provides resources for this purpose. However, a significant majority of 64.8% expressed uncertainty about the hospital's provision of such resources, suggesting a lack of clarity or awareness. Additionally, 5.7% disagreed with this statement, indicating skepticism or a perception of insufficient resources allocated for continuous medical education.

Commitment to Investing in Nurses' Continuous Medical Education:

Regarding the hospital's commitment to investing in nurses' continuous medical education, the data shows similar mixed perceptions among nurse managers. While 17% strongly agreed and 25% agreed with this statement, indicating some level of confidence in the hospital's commitment, 40.9% expressed uncertainty. Furthermore, 11.4% disagreed with the statement, suggesting skepticism or a perception of inadequate investment in nurses' continuous medical education.

Provision of Adequate Time Off for Nurses to Attend Continuous Medical Education:

The data regarding the provision of adequate time off for nurses to attend continuous medical education shows a varied response among nurse managers. While 5.7% strongly agreed and 64.8% agreed that nurses are provided with sufficient time off, 11.4% expressed uncertainty about this provision. Additionally, 18.2% disagreed with the statement, indicating skepticism or a perception of insufficient time off allocated for continuous medical education.

Recognition and Rewards for Nurses Participating in Continuous Medical Education:

Regarding the hospital's recognition and rewards for nurses who participate in continuous medical education, the data reveals mixed perceptions among nurse managers. While 5.7% strongly agreed and 46.6% agreed with this statement, indicating some level of recognition and rewards, 23.9% disagreed, suggesting skepticism or a perception of inadequate recognition and rewards. Additionally, 5.7%

strongly disagreed, signifying strong disbelief or lack of awareness regarding the recognition and rewards provided for continuous medical education participation.

Opportunities to Apply Learning in Work:

Regarding opportunities for nurses to apply what they have learned in their work after participating in continuous medical education programs, the data indicates varied perceptions among nurse managers. While 47.7% disagreed and 23.9% expressed uncertainty about such opportunities, 22.7% agreed and 5.7% strongly agreed that nurses are given opportunities to apply their learning.

Table 4.12

Continuous medical education-related factors that affect nurse manager preparedness for mentorship roles

Statement	strongly disagree	disagree	neutral	agree	strongly agree
The hospital provides resources to support continuous medical education for nurses.	41(47%)	20(22.5%)		23(25.7%)	4(5%)
	24(27%)	13(25%)	36(40.9%)	10(11.4%)	5(5.7%)
Management provides adequate time off for nurses to attend continuous medical education	11(17.1%)	57(64.8%)		16(18.2%)	0(0%)
The hospital's management recognizes and rewards nurses who participate in continuous medical education.	10(11.3%)	12(14%)	14(8.2%)	42(47.%)	10(11.3%)
Nurses who participate in continuous medical education programs are given opportunities to apply what they have learned in their work.	42(47.7%)	21(23.9%)	20(20.7%)	5(5.7%)	0(0%)

Communication

It is essential to communicate well. Level of communication was assessed by use of a 5 Likert scale which had five options: 1 represented strongly disagree, 2 represented disagree, 3 represented neutral response, 4 represented agree and 5 represented strongly agree. There was a lack of communication with senior management regarding the importance of mentorship 35 (39.8%), senior management does not provide ample resources to support mentorship programs with the hospital. The results indicated that the senior management actively promoted mentorship opportunities to nursing staff as reported by 32 (36.4%). Almost half of the participants 42 (47.7%) were not sure if the hospital recognized the value of mentorship in developing nursing staff as well as being involved in the mentorship process by providing guidance to mentors and mentees.

Communication with Senior Management Regarding Mentorship Importance

The data regarding communication with senior management indicates significant dissatisfaction among nurse managers. While only 5.7% strongly disagreed and 39.8% disagreed with the lack of communication regarding the importance of mentorship, a substantial 42% remained neutral, suggesting a lack of clear communication on this crucial aspect. Moreover, 12.5% agreed that there was a lack of communication, indicating a notable perception of inadequate communication between nurse managers and senior management regarding the importance of mentorship.

Senior Management Providing Ample Resources for Mentorship Programs

Regarding the provision of ample resources by senior management to support mentorship programs within the hospital, the data shows a similar trend of dissatisfaction among nurse managers. While 5.7% strongly disagreed and 39.8% disagreed with the statement, a substantial 54.5% agreed, indicating a widespread perception of inadequate resource allocation. Furthermore, no respondents strongly agreed with this statement, emphasizing the severity of the issue.

Senior Management Actively Promoting Mentorship Opportunities

The data regarding senior management's active promotion of mentorship opportunities to nursing staff reveals mixed perceptions among nurse managers. While 5.7% strongly disagreed and 28.4% disagreed with this statement, a notable 36.4% agreed, indicating some level of active promotion. However, a considerable 29.5% remained neutral, suggesting uncertainty or a lack of awareness regarding senior management's promotion efforts.

Senior Management Recognizing the Value of Mentorship

Regarding senior management's recognition of the value of mentorship in developing nursing staff, the data shows mixed perceptions among nurse managers. While 5.7% strongly disagreed and 28.4% disagreed with this statement, a significant 47.7% remained neutral, indicating uncertainty or a lack of clarity on this aspect. Additionally, 18.2% agreed with the statement, suggesting some level of recognition by senior management.

Senior Management Involvement in Mentorship Process

The data regarding senior management's involvement in the mentorship process and provision of guidance to both mentors and mentees also reveals mixed perceptions among nurse managers. While 11.4% strongly disagreed and 22.7% disagreed with this statement, a notable 47.7% remained neutral, suggesting uncertainty or lack of awareness regarding senior management's involvement. Additionally, 18.2% agreed with the statement, indicating some level of involvement by senior management in the mentorship process.

Overall, the communication factor within the nurse managers mentorship framework underscores a critical area of concern within healthcare institutions. The data portrays a landscape marked by significant dissatisfaction and uncertainty among nurse managers regarding communication with senior management regarding the importance of mentorship and the provision of resources for mentorship programs. Inayah et al. (2017) emphasize that despite some indications of active promotion of mentorship opportunities by senior management, there remains a pervasive sense of ambiguity and lack of clarity regarding their involvement in the mentorship process and recognition of its value in developing nursing staff. This lack of clear communication not only impedes the effective implementation of mentorship programs but also hinders nurse managers preparedness in their mentorship roles (Gray & Brown, 2016). Addressing these communication challenges is paramount to fostering a supportive environment that nurtures mentorship initiatives and facilitates the professional development of nursing staff, ultimately contributing to improved patient care outcomes and organizational success.

Table 4.13

Communication-related factors that affect nurse manager preparedness for mentorship roles

Statement	Strongest disagree	disagree	neutral	agree	Strongly agree
Regarding the importance of There is lack of Communication with senior management mentorship	5(5.7%)	35(39.8%)	37(42%)	11(12.5%)	0(0%)
Senior management provides ample resources to support mentorship programs within the hospital.	5(5.7%)	35(39.8%)	48(54.5%)	0(0%)	0(0%)
Senior management actively promotes mentorship opportunities to nursing staff.	5(5.7%)	25(28.4%)	26(29.5%)	32(36.4%)	0(0%)
Senior management recognizes value of mentorship in developing nursing staff.	5(5.7%)	25(28.4%)	42(47.7%)	16(18.2%)	0(0%)
Senior management is involved in the mentorship process and provides guidance to both mentors and mentees.	10(11.4%)	20(22.7%)	42(47.7%)	16(18.2%)	0(0%)

Career development opportunities

As nurse managers, career development opportunities are key. This was assessed by use of a 5 Likert scale which had five options. It was reported that the management encourages nurses to participate in mentorship and allocated enough resources for mentorship. The majority of the nurse Managers 42 (47.7%) indicated that they were not sure if the management recognized and rewarded mentorship efforts with only 32 (36.4%) agreeing that the hospital provided adequate support for mentorship. It was also found that the hospital provided career development opportunities for the nurses. There was a positive linear relationship between the provision of career development opportunities and nurse manager preparedness in their mentorship roles since out of

32 nurse managers who indicated to be given the opportunity for individual career development, 23 were found to be moderately prepared for nurse manager mentorship roles.

A related study by Gong and Li (2022) posits that establishing mentorship initiatives in the nursing field is crucial because they have numerous benefits, including improving retention, enhancing job satisfaction, and reducing compassion fatigue among nurses. Furthermore, mentorship relationships contribute to the improvement of confidence, competence, and personal growth for both mentors and mentees (Straughair, 2019). In addition to training programs, career development opportunities have also been identified as potential influencers of nurse manager mentorship role preparedness. Brown (2015) discusses how educating nurse managers for board service can broaden their perspectives on healthcare management and improve their leadership skills. Collette (2015) similarly suggests That leadership development programs can enhance nurse managers' abilities to lead and promote patient safety.

The management encourages nurses to participate in mentorship.

Seventeen percent of respondents strongly disagreed, and 23.9% disagreed, indicating a lack of encouragement from management for nurses to engage in mentorship. However, 28.4% provided a neutral response, suggesting uncertainty or mixed perceptions regarding management's encouragement. Meanwhile, 30.7% agreed, and no respondents strongly agreed, indicating a modest level of encouragement but not overwhelmingly so.

The findings suggest that there may be room for improvement in how management encourages nurses to participate in mentorship programs. A significant portion of respondents expressed disagreement or uncertainty, indicating potential gaps in communication or support from management. Enhancing this encouragement could lead to greater engagement in mentorship activities, fostering a culture of learning and professional development among nurses.

The management allocates enough resources to mentorship.

Seventeen percent of respondents strongly disagreed, and 18.2% disagreed, indicating a perception of inadequate resource allocation by management for mentorship. However, 35.2% provided a neutral response, suggesting uncertainty or mixed perceptions regarding resource allocation. Meanwhile, 29.5% agreed, and no respondents strongly agreed, indicating a portion of respondents acknowledged some level of resource allocation but not overwhelmingly so. The findings suggest a perceived deficiency in resource allocation for mentorship activities by the management. A notable proportion of respondents expressed disagreement or uncertainty, implying potential challenges in accessing necessary resources for effective mentorship programs. Walton et al. (2015) argue that addressing these resource gaps could enhance the quality and effectiveness of mentorship initiatives, ensuring that nurses have the support and tools needed for professional development and growth.

The management provides adequate support for mentorship.

The data indicates that only 22.7% of respondents agreed that management provides adequate support for mentorship, while a concerning 36.4% disagreed. Furthermore, a significant portion of respondents, 34.1%, provided a neutral response, suggesting uncertainty or mixed perceptions regarding the level of support provided. Notably, no respondents strongly agreed, highlighting a lack of overwhelming consensus on adequate support from management for mentorship initiatives.

The findings reveal a perceived inadequacy in the level of support provided by management for mentorship programs. Stalter and Arms (2016) argue that with a substantial proportion of respondents expressing disagreement or uncertainty, there appears to be a gap in the support structures necessary for effective mentorship. Addressing these shortcomings could involve enhancing communication channels, allocating dedicated resources, and establishing clear guidelines to ensure that mentorship initiatives receive the necessary backing from management, fostering a conducive environment for professional development and knowledge exchange among nurses.

The management recognizes and rewards mentorship efforts.

Only 17% of respondents agreed that management recognizes and rewards mentorship efforts, while a notable 47.7% disagreed. Additionally, 23.9% provided a neutral response, indicating uncertainty or mixed perceptions regarding the recognition and reward of mentorship activities. Interestingly, a small portion of respondents, 5.7%,

strongly agreed, suggesting a minority viewpoint acknowledging management's efforts in this regard.

The data suggests a perceived lack of recognition and reward for mentorship efforts by management, with a significant proportion of respondents expressing disagreement or uncertainty. This indicates a potential area for improvement in acknowledging the contributions of mentors within the organization. Recognizing and rewarding mentorship efforts can serve as a vital motivator for nurses to actively engage in mentorship activities, fostering a culture of knowledge sharing and professional growth. Enhancing these recognition mechanisms could strengthen the effectiveness of mentorship programs and contribute to overall staff satisfaction and retention.

The management provides career development opportunities for nurses.

Seventeen percent of respondents agreed that management provides career development opportunities for nurses, while 30.7% disagreed. Additionally, 22.7% provided a neutral response, indicating uncertainty or mixed perceptions regarding the provision of career development opportunities. Notably, 5.7% of respondents strongly agreed, suggesting a minority viewpoint acknowledging management's efforts in this regard.

The findings suggest a perceived inadequacy in the provision of career development opportunities for nurses by management. With a notable proportion of respondents expressing disagreement or uncertainty, there appears to be a gap in the availability of opportunities for professional growth and advancement within the organization. Addressing these shortcomings could involve implementing targeted training programs, mentorship initiatives, and clear pathways for career progression to support

nurses' ongoing development and contribute to their overall job satisfaction and retention.

Table 4.14

Career development opportunities provided to nurse managers in preparation for mentorship roles

Statement	Strongest disagree	disagree	neutral	agree	Strongly agree.
The management encourages nurses to participate in mentorship.	15(17%)	21(23.9%)	25(28.4%)	27(30.7%)	0(0%)
The management allocates enough resources to mentorship.	15(17%)	16(18.2%)	31(35.2%)	26(29.5%)	0%
The management provides adequate support for mentorship	20(22.7%)	6(6.8%)	30(34.1%)	32(36.4%)	0%
The management recognizes and rewards mentorship efforts.	15(17%)	21(23.9%)	42(47.7%)	5(5.7%)	5(5.7%)
The management provides career development opportunities for nurses	15(17%)	27(30.7%)	20(22.7%)	21(23.9%)	5(5.7%)

4.8 Correlation matrix for factors associated with nurse manager mentorship

role preparedness:

It was found that some variables were statistically significant at 0.01 and others at 0.05 while others were not. The current study used a significance level of 0.05. Therefore, among all the factors entered into the bivariate correlation, only the workload and time constraints together with nurses' involvement in policy making were found to be significantly associated with nurse manager preparedness for mentorship roles. The nurses' workload determined the free time left for mentorship. The nurses who had free time for mentorship were found to be prepared for the mentorship role and this association was significant at $r(87) = .411$, $p < .001$. it was also found that nurses' level of involvement in policymaking was significant at $r(87) = .281$, $p = .008$. The nurse

managers are best placed to offer mentorship to other nurses, especially to junior nurses who have joined the profession. Therefore, their input in policy making especially on mentorship policy is key. For the nurses whose inputs were taken into consideration for policy making, they were found to be prepared for the mentorship role. However, those whose inputs were not put into consideration were poorly prepared for the role. During the mentorship, the mentor and the mentee need time for the program, therefore, the nurses' workload will determine the availability of the required time for mentorship. These results are in agreement with the previous studies done in the USA that availability of time, and less workload contributed to effective mentorship (Kramer et al., 2021; Frankenberger et al., 2021). Another study conducted in Hong Kong, by Chan et al., (2019) indicated that where there is conflict in management, poor teaching techniques, and a lack of support to mentors, there is poor mentorship in progress. In Australia, Fernandez et al., (2020) and Macey et al., (2022) also found that nurse involvement in mentoring junior nurse staff needed preparedness for the role. They indicated that role conflict and lack of clear guidelines hindered the mentorship roles of nurse managers. The table gives a summary of associations examined in the current study.

Table 4.15*Correlation matrix*

	Level of Nurse Involvement in policy- making	Workload and time constraints	Level of nurse manager preparedness
Level of Nurse Involvement in policy-making	1		
Workload and time constraints	.465**	1	
Level of nurse manager preparedness	.281*	.411*	1
	0.008	0	

The independent factors were cross tabulated with the dependent variable and the results are indicated in the table shows that level of mentorship support for nurse leaders and being involved in decision making were significantly associated with preparedness. nurse manager

Table 4.16

Association between independent variables and the nurse manager preparedness for mentorship roles

Variable	preparedness		P value, Chi-square
	Poor	Moderate	
Leadership support for nurse managers			
Poor	33	14	P=.013
Good	18	23	$\chi^2=6.22$
Management in supporting nurse leaders			
Low support	30	15	P=.090
Moderate support	21	22	$\chi^2=2.86$
Mentorship support for nurse leaders			
Low support	30	27	P=.013
Moderate support	21	10	$\chi^2=6.22$
Involvement in policy making			
Not involved	20	5	P=.008
Involved	31	32	$\chi^2=6.96$

4.9 Discussions of the findings

Leadership factors: findings 62 (70.5%) were not prepared for mentorship roles, due to time constraints, workload, and lack of management support. This aligns with a study finding by Liang et al. (2016). And contradicts a study by (Morsiani et al., 2015) argues that nurses do not generate income therefore they lack support from their leaders.

Policy factors: The study confirmed 47.7% nurse managers were not prepared for mentorship roles. Lack of clear guidelines for mentorship programs despite existing standard operating procedures within nurse manager unit. These findings agree with a

study by (Tuomikoski et al., 2020) who found that, nurse involvement in policymaking is crucial to address the challenges facing the nursing profession, including the shortage of skilled nurses and inadequate resources for training and mentorship.

Motivation factors: majority were found to be motivated, they received enumeration as responsivity allowance but not for mentorship as result indicated that there was no policy agrees with study findings by Douglas (2017) whose findings revealed that low salaries and inadequate compensation were significant challenges facing the nursing workforce in the African region, including Kenya.

Training factors: Most nurse managers were not prepared, due lack of time, for professional development mentorship this study contradicts a study by Kennedy (2019) revealed that the level of preparedness in mentoring among nurse managers is dependent on the underlying level of interaction and information delivery through proper communication channels.

CHAPTER FIVE

SUMMARY, CONCLUSION AND RECOMMENDATION

5.1 Introduction

This chapter entails a brief summary of the study shall be given followed by a discussion of the results based on the objectives outlined in Chapter One. Conclusions will be drawn from the study findings and recommendations made based on the conclusions.

5.2 Summary of the results

The current study focused on preparedness of nurse manager's mentorship role at Kenyatta National Hospital. Kenyatta National Hospital is one of the biggest referral hospitals in Kenya and East Africa. The nurse managers are obligated to mentor junior nurses, other staffs and students who are the mentees. Specifically, it scrutinized the landscape of preparedness in mentorship role within Kenyatta National Hospital, to discern prevalent gaps and challenges hindering nurse managers from effectively fulfilling their mentorship duties. In line with this exploration, it was imperative to underscore the significant.

The study reveals that nurse manager preparedness for mentorship roles was (58%) poor while 42% were moderately prepared.

Demographic factors reveal 50(56.5%) of the residents were aged above 50years, and had served as a nurse manager for 5year and above. 42% were male while majority 58% were female. They have varied education levels ranging from higher diploma to

master level.48.9% had degree This correlation was statistically significant, as indicated by the correlation coefficient $r(86) = 2.92$, with a p-value of less than 0.01. This suggests that gender plays a significant role in determining the level of preparedness for mentorship among nurse managers, with male nurse managers demonstrating a higher likelihood of being prepared for these roles than their female counterparts. 50(56.5%) of the residents were aged above 50years, and had served as a nurse manager for 5year and above. 42% were male and 58% female. They have varied education levels ranging from higher diploma to master level.48.9% had degree. For the appointment of nurse managers, the nurses are mostly promoted as they gain more experience, and the experience comes with age. In other cases, individual training qualifications are considered. It is evident in the current study that nurse managers had been appointed based on their age and experience. Therefore, it is expected to have nurses of varied age.

Leadership: Most of nurse managers, 70.5% lacked leadership resources, while 46.6%lacked leadership support for Mentorship roles. However35.2%lacked mentorship program 47% had time and constraints. Meanwhile 56% strongly disagreed to have participated in mentorship meetings.

Leadership support could be enhanced through support from senior management but majority of participants, 62 (70.5%), strongly disagreed that the leadership at Kenyatta National Hospital (KNH) provides the necessary resources and support for nurse mentorship programs.

A majority of the participants, 70.5%, strongly disagreed that the management values the role of mentorship in nursing practice. The findings revealed that 41 participants

(46.6%) strongly disagreed that hospital management encourages staff to participate in mentor ship programs. A majority of nurse managers, 53 (60.2%), disagreed that the management provides adequate time for staff to engage in mentor ship activities. The studies also highlighted that a total of 31 participants (35.2%) strongly disagreed, and 32 (36.4%) disagreed that the leadership recognizes and rewards staff who participate in mentor ship program. A majority of nurse managers, 53 (60.2%), disagreed that the management provides adequate time for staff to engage in mentorship activities. Specifically, 26 participants (29.5%) were neutral, while 27 (30.7%) disagreed that management promotes such a culture. A significant portion of the participants, 31 (35.2%), strongly disagreed, and 27 (30.7%) disagreed that the management fosters an environment of trust and mutual respect among staff engaged in mentorship activities. The study found that 47 participants (53.4%) disagreed that the management provides ongoing evaluation and feedback for staff engaged in mentorship activities. Finally, 53 participants (60.2%) disagreed that the management recognizes the contributions of both mentors and mentees in the organization. The study found that the majority of the nurse managers rated leadership resources support from the management as poor as indicated 47 nurse managers who had poor support, due to work load and time constraints. It was also noted that the majority of the participants 67% nurse managers strongly disagreed that the management does not provide adequate funding for nurse 36 (40.9%) mentor ship programs. Additionally, 63.6% disagreed, and 17% strongly disagreed that management promotes and recognizes the importance of. nurse mentorship.

Regarding policy: 47.7% were not actively involved in policy-making processes, their contributions were often disregarded during policy development, leading to a lack

of clear guidelines for mentorship programs despite existing standard operating procedures within nurse manager units, while training programs and opportunities for career development were available for nurses, poor communication with senior management hindered their preparedness for mentorship roles. It was also noted that the majority of the participants 50% strongly disagreed that the management does not provide adequate funding for nurse 36 (40.9%) mentor ship programs. Additionally, 63.6% disagreed, and 17% strongly disagreed that management promotes and recognizes the importance of. nurse mentorship. 47.7% disagreed that they were not involved in policy making process. 52.5% nurse managers strongly disagreed that the hospital has mentorship guidelines. It was also found that 27 (30.7%) were neutral to shared governance and involving nurses in decision-making related to policy development. This lack of adequate training is reflected in the insufficient support provided to the mentorship program for nurse leaders, with only 28.4% agreeing that they receive sufficient support. Additionally, 30.7% of nurse leaders were neutral about their active involvement policy making on mentorship programs, while the majority disagreed that the hospital actively encourages participation in these programs.

The inadequate training in SOPs and lack of support for mentorship programs highlight significant gaps in the hospital's approach to developing nurse managers. The research findings showed that the organization does not provide adequate resources for mentorship programs, this was suggested by 21 (23.9%) who disagreed and 47 (53.4%) who were not sure if the hospital provided adequate resources. agree. Mentors were not encouraged to participate in leadership meetings as shown by 42 (47.7%). However, 18.2% of the nurse managers were provided with opportunities for

professional growth and development. The data reveal diverse perceptions among nurse leaders regarding the provision of constructive feedback by managers to mentors on their performance.

Motivation;

53.4% strongly disagreed involvement in mentorship coaching while 46.6 %also disagreed that there was a mentorship coaching program in the hospital.40.9% of nurse managers received monetary allowances as a responsibility allowance` not related to mentorship as there is no known mentorship program.no mentorship coaching or participation in leadership meetings moreover a considerable proportion (39.8%) disagreed with the statement, indicating a perceived lack of constructive feedback provided by managers. Conversely, a smaller percentage (30.7%) agreed, suggesting some level of constructive feedback being offered, albeit not universally. However the hospital provides training incentives though not to all nurse leaders as well as supporting the nurse leaders in providing mentorship as suggested by 20 (22.7%) nurse leaders. Seventeen percent of the nurse leaders indicated that the management provided resources for mentorship while 21 (23.9%) and 20 (22.7%) agreed and strongly agreed that the management recognizes and rewards mentorship activities. However nurse managers were incentivized by remuneration and training incentives, the absence of feedback on their performance as mentors proved demotivating. Managers 42 (47.7%) indicated that they were not sure if the management recognized and rewarded mentorship efforts with only 32 (36.4%) agreeing that the hospital provided adequate support for education programs but not on mentorship.

Training. 57 (64.8%) nurse managers were not sure if the hospital provided resources to support continuous medical education for nurses. Similarly, almost half of the nurse managers 36 (40.9%) were not sure if the hospital was committed to investing in nurse's continuous medical education. The data regarding the provision of adequate time off for nurses to attend continuous medical education shows a varied response among nurse managers. According to the findings, 17% of nurse leaders strongly disagreed, and 40.9% disagreed that the hospital demonstrates a communication Carrier development opportunities and leadership worker shops. nurse managers. While 5.7% strongly agreed and 64.8% agreed that nurses are provided with sufficient time off, 11.4% expressed uncertainty about this provision. Additionally, 18.2% disagreed with the statement, indicating scepticism or a perception of insufficient time off allocated for continuous medical education continuous medical education the majority of the nurse.

There was a positive significant correlation between workload and preparedness for mentorship ($r = .411$, $p < .01$) and between involvement in policy-making and preparedness ($r = .281$, $p = .008$). Additionally, there was a positive significant association between the provision of standards on mentorship ($r = 3.18$, $p = .02$) and training programs ($r = 3.18$, $p = .02$) with preparedness. There was a positive significant correlation between the four variables used in the study.

5.3 Conclusions

The researcher deduced several key conclusions from the study's findings after testing the four variables.

Demographic factors reveal 50(56.5%) of the residents were aged above 50years, and had served as a nurse manager for 5year and above. 42% were male and 58% female. They have varied education levels ranging from higher diploma to master level.48.9% had degree. and most had attained degree and masters. For the appointment of nurse managers, the nurses are mostly promoted as they gain more experience, and the experience comes with age. In other cases, individual training qualifications are considered. It is evident from the current study that nurse managers had been appointed based age, education level and years of experience.

The findings a conclusion was made that there is a positive significant correlation between demographic factors and preparedness of nurse managers mentorship role.

The researcher deduced several key conclusions from the study's findings after testing the four variables. Leadership, policy, motivation. and training factors were found to be positively significantly associated with preparedness of nurse managers mentorship roles.

Leadership factors: The study revealed that it was evident that nurse managers ' preparedness in mentorship roles could be significantly enhanced through support from senior management, particularly in the provision of resources and adequate time with reduced workloads, a creating conducive mentoring environment.

Policy factors: The study confirmed that there was no mentorship policy regarding preparedness. lack of clear guidelines for mentorship programs despite existing standard operating procedures within the nurse managers unit.

Motivation factors: Majority of the nurse managers were found, to be motivated they received enumerations as a responsibility allowance but not related to mentorship as there was no existing program, guideline on mentorship policy.

Training factors: The study revealed that while training programs and opportunities for career development were available for nurses, poor communication with senior management hindered their preparedness for mentorship roles. These conclusions underscore the importance of addressing various organizational factors, such as resource allocation, policy development processes, feedback mechanisms, and communication channels, to effectively support nurse managers in fulfilling their mentorship responsibilities and ultimately enhance the quality of mentorship within healthcare settings. After correlation analysis was performed to determine the association between independent and dependent variables there was a positive correlation. There was also positive significant correlation between the four variables used in this study.

5.4 Recommendations

The study therefore makes the following recommendations

Based on the study findings, several recommendations are proposed to enhance preparedness of nurse manager mentorship roles:

1. Deputy Director nursing services `should prioritize increasing leadership support for nurse managers. This elevated support is crucial for elevating nurse manager preparedness from moderate enabling them to effectively fulfil their mentorship responsibilities.

2. It is imperative for the DDNS to actively involve all stakeholders, including ward in charges in the policy development process. Considering the input of alongside other stakeholders will ensure that policies regarding mentorship programs are comprehensive and inclusive.
3. There should be a system in place for providing regular feedback to nurse managers regarding their performance as mentors. Constructive feedback is essential for guiding their mentorship activities and fostering continuous improvement.
4. Deputy director nursing services must consider implementing clear, open, and efficient communication channels across all head units in the organization. This will facilitate effective communication and ensure that the perspectives and contributions of all members, including nurse managers, are heard and considered in decision-making processes.

5.5 Suggestions for future research

For future research endeavours, it is recommended to conduct:

1. Similar studies to be carried out by other researchers' similar institution for comparison.
2. Influence of leadership style on nurse managers mentorship role preparedness.
3. Exploring how different leadership styles impact nurse managers ' ability to fulfil their mentorship roles can provide valuable insights for optimizing mentorship programs within healthcare organizations.

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APPENDICES

Appendix I: Participant's informed consent

Dear respondents, my name is Julita Mwasi pursuing a postgraduate master's degree in nursing education at Kenya Methodist University Registration number **MSN-3-1816-3/2019** and contact number 0722757748. I am conducting research on the assessment of institutional factors associated with nurse managers' preparedness for mentorship roles at Kenyatta National Hospital. You are selected to participate in the study. Kindly assist by filling this questionnaire.

Purpose of the study: This study will recommend strategies for improving preparedness of nurse managers' mentor roles.

Confidentiality: Confidentiality will be maintained and the information you provide will only be used for the intended purpose of the study only.

Anonymity: Your name will not be required on any forms. All materials used during the study will be under lock and key and only the personnel involved in this study will have access to them.

Participation: Participation in this study is voluntary. Refusal to take part will not attract any penalty. You retain the right to withdraw from the study without any consequences.

Benefits: There is a direct benefit to you as a nurse manager working at KNH as the information provided will assist the institution to improve the status of nurse managers' preparedness to mentorship roles to junior nurses and students and the patients under their care.

Reward: There will be no reward or payment offered if you agree to participate in this study.

Contact information: if you have a question about this study call the principal investigator JULITA THIRINDI MWASI MOBILE 0722757748.and you can also email her at julitamwasi073@gmail.com.als however for further clarification my supervisors' contact is DR SUSAN NJUGUNA 0722 383 401 email njunarssm@gmail.com. Dr MOSES MULU 0720763753,email Moses .mulu@kemu.ac.ke if you have a question about your right as a study participant you may contact- KNH-UoN ERC telephone 726300-9extension 43355,44102 email uonknh-erc@uonbi.ac.ke

Participates statement

I confirm that the above information regarding my participation in the study is clearly understood by me, that participation in this study is voluntary and I can withdraw my participation at any time without penalty. That my information will be confidential when I agree to participate in this study.

Consent: Having understood the above information, I do hereby accept to participate in the study.

Participant signature..... Date.....

Researcher's statement.

I confirm that I have explained information fully to the participant in a language they understand the procedure to be followed in the study and the benefits, no risks involved.

NAME.....

SIGNATURE.....

DATE.....

Appendix II: Questionnaire

Instructions

I'm conducting a study on the assessment of institutional factors influencing the preparedness of nurse managers' mentorship roles at KNH, Kenya. You are kindly requested to provide the information required by the questionnaire. Your cooperation is highly appreciated. The findings of this research study.

SECTION 1: DEMOGRAPHIC INFORMATION

What is your gender

Male () b. Female ()

What is your age?

a)20-30 yrs.() b) 31-40 yrs. ()

c)41-50 yrs. () d)51 yrs. and above ()

Years of experience as a nurse manager.....

Highest level of education completed:(TICK APPLICABLE BOX)

Diploma in nursing ()

Higher diploma in nursing ()

Degree in nursing ()

Master's degree in nursing ()

Doctoral degree of which your leadership supports your preparedness as a nurse manager.

- a).....
- b).....
- c).....
- d).....
- e).....

6) Explain four ways in which your policy contributes to your preparedness in mentorship roles.

- a).....
- b).....
- c).....
- d).....

3) Explain three ways in which the management rewards and recognizes preparedness in mentorship efforts.

- a).....
- b).....
- c).....

4) State three ways in how management evaluates preparedness in mentorship programs

a).....

b).....

c).....

Section2: Leadership factor

Using the Likert scale below on leadership resources rate the following statements as either strongly agree (1), agree (2), neutral (3), disagree (4) strongly disagree (5)

Leadership Resources	1	2	3	4	5
Management provides resources and support for nurse mentorship programs.					
Management values the role of mentorship in nursing practice.					
Management encourages staff to participate in mentorship programs.					
Management recognizes and rewards staff who participate in mentorship programs.					
Management provides adequate time for staff to engage in mentorship activities.					
Management ensures that mentorship activities align with organizational goals and values.					
Management promotes a culture of learning and development through mentorship programs.					
Management fosters an environment of trust and mutual respect among staff engaged in mentorship activities.					
Management provides ongoing evaluation and feedback for staff engaged in mentorship activities.					

Management support					
Management recognizes the contributions of both mentors and mentees in the organization.					
Management supports and encourages the development of nurse mentorship programs.					
Management provides adequate funding for nurse mentorship programs.					
Management promotes and recognizes the importance of nurse mentorship					
Management provides opportunities for nurses to participate in mentorship programs.					
Management monitors the effectiveness of nurse mentorship programs.					
Mentorship for nurse leadership program					
The hospital has a formal nurse mentorship program for leadership development.					
Nurse managers are encouraged to participate in mentorship programs.					
The mentorship program for nurse managership is well-structured and effective					
Nurse managers receive adequate support and resources for their mentorship program					
Mentorship programs have positively impacted nurse manager's leadership skills					
Workload and time constraints					
The hospital has a formal mentorship program for nurses seeking leadership positions.					
I am aware of the mentorship opportunities available to me for advancing my career as a nurse leader.					
The mentorship program provides adequate training and support for nurse leadership development.					
I believe that participating in the mentorship program would help me become a better nurse leader.					

SECTION THREE POLICY FACTOR

Using the Likert scale below on policy influence, rate the following statements as either strongly (1), agree (2), neutral (3) disagree (4), or strongly disagree (5)

Involvement in Policy Making	1	2	3	4	5
Nurses are included in discussions and decision-making processes related to policy making in the hospital.					
The hospital values the input of nurses when it comes to policymaking.					
Nurses are provided with opportunities to provide feedback and suggestions on policymaking.					
The hospital seeks out the opinions and perspectives of nurses when developing policies.					
Nurses feel empowered and supported to speak up and provide input for policy-making					
The hospital provides training and resources to help nurses participate in policymaking.					
Nurses are recognized and rewarded for their contributions to policymaking					
The hospital has a transparent and accessible process for involving nurses in policymaking.					
Believe their input is was taken into consideration in the development of policies					
The hospital demonstrates a commitment to shared governance and involving nurses in decision-making related to policy development.					
Standard operating procedures					
Nursementees are adequately trained in the standard operating procedures of the hospital.					
Management provides sufficient resources to support the mentorship program for nurses.					
Management actively encourages nurse managers to participate in mentorship programs.					
The mentorship program has a clear structure and defined goals that are supported by management.					
Management regularly provides feedback and support to mentors and mentees.					

Mentors are encouraged to participate in leadership meetings.				
Managers provides opportunities for professional growth and development.				
Managers encourage and support mentor's participation in mentorship programs.				
Recognize mentors' contributions to the hospital				
My manager provides mentors with constructive feedback on performance.				
incentives				
Training incentives are provided by the management				
Mentors are supported by management in providing mentorship				
Management provides resources for mentorship activities				
Management recognizes and reward mentorship activities				
Training incentives are provided by the management				

SECTION FIVE: TRAINING FACTORS

Using the Likert scale below on mentorship continuous medical education, rate the following statements as either Strongly Agree (1), agree (2), neutral (3) disagree (4), or strongly disagree (5)

Continuous medical education	1	2	3	4	5
The hospital provides resources to support continuous medical education for nurses.					
Management is committed to investing in nurses 'continuous medical education.					
Management provides adequate time off for or nurses to attend continuous medical education					
The hospital's management recognizes and rewards nurses who participate in continuous medical education.					
Nurses who participate in continuous medical education programs are given opportunities to apply what they have learned in their work.					

Communication					
There is a lack of Communication with senior management regarding					
Senior management provide sample resources to support mentorship programs with in the hospital					
Senior management actively promotes mentorship opportunities for nursing staff.					

Appendix III: Nacosti Permit

 REPUBLIC OF KENYA	
	
	

Appendix IV: Letter from Kenyatta National Hospital



UNIVERSITY OF NAIROBI
FACULTY OF HEALTH SCIENCES
P O BOX 19676 Code 00202
Telegrams: varsity
(254-020) 2726300



KNH-UoN ERC
Email: uonknh_erc@uonbi.ac.ke
Website: <http://www.erc.uonbi.ac.ke>
Facebook: <https://www.facebook.com/uonknh.erc>
Twitter: @UONKNH_ERC https://twitter.com/UONKNH_ERCs



KENYATTA NATIONAL HOSPITAL
P O BOX 20723 Code 00202
Tel: 726300-9 Ext 44355, 44102
Fax: 725272
Telegrams: MEDSUP, Nairobi

Ref: KNH-ERC/A/157

23rd April, 2024

Julita Thirindi Mwasi
Reg No. MSN-3-1816-3/2019
Dept. of Nursing
School of Medicine & Health Sciences
Kenya Methodist University

Dear, Julita,

ETHICAL APPROVAL-RESEARCH PROPOSAL: AN ASSESSMENT OF INSTITUTIONAL FACTORS ASSOCIATED WITH NURSE MANAGERS PREPAREDNESS IN MENTORSHIP ROLE AT KENYATTA NATIONAL HOSPITAL, KENYA (P40/01/2024)

This is to inform you that KNH-UoN ERC has reviewed and approved your above research proposal. Your application approval number is **P40/01/2024**. The approval period is 23rd April 2024 – 22nd April 2025.

This approval is subject to compliance with the following requirements:

- i. Only approved documents including (informed consents, study instruments, MTA) will be used.
- ii. All changes including (amendments, deviations, and violations) are submitted for review and approval by KNH-UoN ERC.
- iii. Death and life threatening problems and serious adverse events or unexpected adverse events whether related or unrelated to the study must be reported to KNH-UoN ERC 72 hours of notification.
- iv. Any changes, anticipated or otherwise that may increase the risks or affected safety or welfare of study participants and others or affect the integrity of the research must be reported to KNH-UoN ERC within 72 hours.
- v. Clearance for export of biological specimens must be obtained from relevant institutions.
- vi. Submission of a request for renewal of approval at least 60 days prior to expiry of the approval period. Attach a comprehensive progress report to support the renewal.
- vii. Submission of an executive summary report within 90 days upon completion of the study to KNH-UoN ERC.

Yours sincerely,

[Signature]

c.c. The Dean, Faculty of Health Sciences, UoN
The Senior Director, CS, KNH
The Chairperson, KNH- UoN ERC
The Chair, Dept. of Nursing, KEMU
Supervisors: Dr. Susan Njuguna, School of Nursing Daystar University
Dr. Moses Mutua, Dept. of Nursing, KEMU

Appendix V: Letter from Kenya Methodist University



KENYA METHODIST UNIVERSITY

P. O. Box 267 Meru - 60200, Kenya
Tel: 254-064-30301/31229/30367/31171

Fax: 254-64-30162
Email: deanrd@kemu.ac.ke

DIRECTORATE OF POSTGRADUATE STUDIES

January 22, 2024

Commission Secretary,
National Commission for Science, Technology and Innovations,
P.O. Box 30623-00100
NAIROBI.

Dear Sir/Madam,

RE: JULITA THIRINDI MWASI – (REG. NO. MSN-3-1816-3/2021)

This is to confirm that the above named person is a bona fide student of Kenya Methodist University, in the School of Medicine and Health Sciences, Department of Nursing undertaking a Master's Degree in Nursing Education. She is conducting research on: "An Assessment of Institutional Factors Influencing Nurse Managers Preparedness in Mentorship Role at Kenyatta National Hospital, Kenya".

We confirm that her research proposal has been presented and approved by the University.

In this regard, we are requesting your office to issue a research license to enable her collect data.

Any assistance accorded to her will be appreciated.

Yours sincerely,


22 JAN 2024
Dr. John M. Muchiri (PhD)
Dean, Postgraduate Studies

Cc: Dean SMHS
CoD, HSM
Program Coordinator -HSM
Student Supervisors



KENYA METHODIST UNIVERSITY

P. O. BOX 267 MERU - 60200, KENYA
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January 22, 2024

KeMU/ISERC/MSN/03/2024

JULITA THIRINDI MWASI
MSN-3-1816-3/2019

Dear Julita,

SUBJECT: "AN ASSESSMENT OF INSTITUTIONAL FACTORS INFLUENCING NURSE MANAGERS PREPAREDNESS IN MENTORSHIP ROLE AT KENYATTA NATIONAL HOSPITAL, KENYA".

This is to inform you that Kenya Methodist University Institutional Scientific Ethics and Review Committee has reviewed and approved your research proposal. Your application approval number is KeMU/ISERC/MSN/03/2024. The approval period is 22nd January, 2024 to 22nd January, 2025.

This approval is subject to compliance with the following requirements:-

- I. Only approved documents including (informed consents, study instruments, MTA) will be used.
- II. All changes including (amendments, deviations, and violations) are submitted for review and approval by Kenya Methodist University Institutional Scientific Ethics and Review Committee.
- III. Death and life-threatening problems and serious adverse events or unexpected adverse events whether related or unrelated to the study must be reported to KeMU ISERC within 72 hours of notification.
- IV. Any changes, anticipated or otherwise that may increase the risks or affected safety or welfare of study participants and others or affect the integrity of the research must be reported to KeMU ISERC within 72 hours.

- V. Clearance for export of biological specimens must be obtained from relevant institutions.
- VI. Submission of a request for renewal of approval at least 60 days prior to expiry of the approval period. Attach a comprehensive progress report to support the renewal.
- VII. Submission of an executive summary report within 90 days upon completion of the study to KeMU ISERC.

Prior to commencing your study, you will be expected to obtain a research license from National Commission for Science, Technology and Innovation (NACOSTI) <https://oris.nacosti.go.ke> and also obtain other clearances needed.

