

## Policy Factors Associated with Nurse Managers' Preparedness in Mentorship Role at Kenyatta National Hospital, Kenya

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### Abstract

**Purpose:** 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 who, at the same time, are ward managers, posing challenges in effectively conveying their multifaceted responsibilities. This research aimed to assess policy factors associated with the preparedness of nurse managers for mentorship roles at Kenyatta National Hospital.

**Methodology:** The study employed a descriptive cross-sectional design, utilizing a simple random sampling strategy to engage 88 respondents. Data collection involved a carefully designed self-administered questionnaire comprising a blend of open-ended and closed-ended inquiries to ensure a comprehensive exploration. Data analysis was done using descriptive statistics and correlation analysis.

**Results:** Key findings revealed that 42% of participants were moderately prepared for mentorship roles, while 58% were inadequately prepared due to time constraints, workload, and lack of management support. Correlation results revealed 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.

**Conclusion and Recommendations:** The study concluded that while nurses were 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. It is imperative for the hospital management to actively involve all stakeholders, including nurse Managers in the policy development process. Considering the input of nurse managers alongside other stakeholders will ensure that policies regarding mentorship programs are comprehensive and inclusive.

**Keywords:** Policy factors, nurse managers, preparedness in mentorship role

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### 1.0 Introduction

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 (AlSabei Ross & Lee, 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, Lee, Regor, Davey, Wong, Paul, & Stafford, 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, Moon, Steinecke, & Prescott, 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 (WHO) in 2020 accentuates the significance of comprehending leadership functions within nursing (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.

### **1.1 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.

However, a pressing concern emerges within the context of Kenyatta National Hospital (KNH), where issues about nurse managers' preparedness for their mentorship roles have given rise to uncertainty. The criteria governing the elevation of nurses to nurse manager positions remain undefined, raising questions about the foundation upon which such roles are built (Kenyatta National Hospital, 2019). An examination by Kemboi (2019) focusing on career planning and succession practices among clinicians at KNH exposed a lack of specified mentorship programs, which has led to ineffective guidance and inadequate mentorship for nursing staff. Despite the hospital's attempts to provide mentorship training, nurses often find themselves ill-equipped to undertake the mentorship mantle. This deficiency contributes to a significant challenge in clarifying the role of nurse managers, undermining the potency of mentorship and its consequences on patient care.

As highlighted within the hospital's context, challenges persist. 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. This intricate landscape underscores the need to assess the readiness of nurse managers at KNH for their mentorship roles, identify deficiencies, and devise strategies to enhance their preparedness, which will bolster the caliber of patient nursing care. This study explores the institutional factors influencing nurse managers' readiness for their mentorship roles at KNH, illuminating the path toward informed improvements within the healthcare ecosystem.

In policy, a comprehensive approach is imperative to address the challenges of nurse manager mentorship preparedness at Kenyatta National Hospital (KNH). Establishing clear and well-defined criteria for the selection and elevation of nurse managers is paramount. This entails formulating explicit guidelines delineating the qualifications, competencies, and experiences requisite for assuming mentorship roles. Furthermore, implementing structured mentorship training programs aligned with KNH's specific needs should be a cornerstone of policy intervention. Such programs should encompass theoretical knowledge, practical skills, and leadership development, equipping nurse managers with the multifaceted proficiencies required for effective mentorship. Another pivotal policy avenue is emphasizing mentorship within the hospital's broader professional development strategy and allocating dedicated resources for mentorship initiatives. Ensuring mentorship is viewed as an essential aspect of nursing leadership roles could be achieved through performance assessments that encompass mentorship contributions. Ultimately, a comprehensive policy approach that interweaves mentorship readiness into nurse manager roles is crucial for fostering a culture of continuous learning, elevating patient care, and nurturing the growth of nursing professionals within the hospital.

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 policy factors associated with the preparedness of nurse managers in mentorship roles at Kenyatta National Hospital.

## **2.0 Literature Review**

### **2.1 Theoretical Review**

In this study, the theoretical framework draws upon Donabedian's hypothesis (2018) 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 (Desharnais, 2018). 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.

## **2.2 Empirical Review**

### **2.2.1 Nurse Involvement in Policymaking**

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 policymaking 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.

### **2.2.2 Standard**

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, 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. KNH (2018) 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 workload (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. Web beta. (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.

### **3.0 Methodology**

The study employed a descriptive cross-sectional design, utilizing a simple random sampling strategy to engage 88 respondents. Data collection involved a carefully designed self-administered questionnaire comprising a blend of open-ended and closed-ended inquiries to ensure a comprehensive exploration. Before this study, a pre-test was done at KUTRRH to improve the tool's validity and reliability. The resultant quantitative data was analyzed using

SPSS version 27, with implications unveiled through tables, figures, and pie charts. Necessary permissions were obtained from relevant authorities, including the Kenya Methodist Scientific and Ethical Review Committee (KEMU-SRC), the National Commission for Science, Technology, and Innovation (NACOSTI), and the Kenyatta Hospital and University of Nairobi Research and Ethics Committee (KNH-OUN-ERC) and deputy director nursing services (DNS) KNH. Participants' informed consent was diligently obtained, safeguarding voluntariness, confidentiality, and anonymity. Numerical codes were used to ensure privacy on questionnaires, meticulously secured when not in use. The correlation coefficient was used to determine the association between variables.

## **4.0 Results and Discussion**

### **4.1 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.

#### **4.1.1 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. Considering nurses' input 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 1: 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%)          |

**4.2.2 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 (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 2: 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%)           |

#### **4.2.3 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 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.

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. According to AlSabei et al. (2019), fostering a

culture that encourages knowledge-sharing among nursing staff is crucial for improving clinical outcomes and enhancing the overall work environment within healthcare institutions.

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 fulfill 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 3: 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   | 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%)           |

#### **4.2.4 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 (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 (48.9%) who disagreed. The majority of the nurse managers (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 manager 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 fulfill 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, Jeffs, and Diamond-Wells (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: Factors associated with support given to nurse managers**

| Question                                                                                             | Strongly disagree | Disagree  | neutral   | agree     | Strongly agree |
|------------------------------------------------------------------------------------------------------|-------------------|-----------|-----------|-----------|----------------|
| The 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%)          |

**4.2 Correlation Analysis**

The findings indicated 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. (2018) and Macey et al. (2021) 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.

**Table 5: Correlation matrix**

|                                             | Level of Nurse Involvement in Policy-making | Level of nurse manager preparedness |
|---------------------------------------------|---------------------------------------------|-------------------------------------|
| Level of Nurse Involvement in Policy-making | 1                                           |                                     |
| Level of nurse manager preparedness         | .281*<br>0.008                              | 1                                   |

**4.3 Summary**

The study reveals that level of nurse manager preparedness for mentorship roles was poor (58%). Demographic factors reveal that 50(56.5%) of the residents were aged above 50 years and had served as a nurse manager for 5 years 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 a degree. While nurses were 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. Thirdly, although nurse managers were incentivized by remuneration and training incentives, the absence of feedback on their performance as mentors proved demotivating. Lastly, 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. It was also noted that the majority of the participants 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. 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. 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. The data reveals that a significant portion of nurse managers feel unsupported by the management in developing nurse mentorship programs. 34.1% of findings show that 40.9% of nurse managers strongly disagreed, and 34.1% disagreed that management provides adequate funding for nurse mentorship programs. The survey results indicate that 63.6% of nurse managers disagreed, data reveals that 53.4% of respondents disagreed, and 22.7% strongly disagreed that management provides opportunities for nurses to participate in mentorship programs. Disagreed that management promotes and recognizes the importance of nurse mentorship. Effective monitoring 40.9% disagreed that the management is crucial in assessing the success and areas for improvement in mentorship programs. 59.1% of nurse managers reported that the mentorship program for nurse leadership is not well-structured. 59.1% disagreed. According to the findings, 17% of nurse leaders strongly disagreed, and 40.9% disagreed that the hospital demonstrates communication. 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 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 in mentorship programs, while the majority disagreed that the hospital actively encourages participation in these programs.

## 5.0 Conclusion

The study concluded that while nurses were 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.

## 6.0 Recommendations

It is imperative for the hospital management to actively involve all stakeholders, including nurse Managers in the policy development process. Considering the input of nurse managers alongside other stakeholders will ensure that policies regarding mentorship programs are comprehensive and inclusive.

## References

- AlSabei, S. D., Ross, A.M., & Lee, C. S. (2019). Factors influencing nurses' willingness to lead. *Journal of Nursing Management*. 27.2 (2019): 278-285. <https://doi.org/10.1111/jonm.12698>
- Bodur, S., Infal.S.(2015). Nurses' working motivation sources and related factors: a questionnaire survey. *International Journal of Human Science*, 12(1),70-79<http://dx.doi.org/10.14687/ijhs.v12i1.2793>
- Brown, S., & Gray, D. (2016). Household finances and well-being in Australia: An empirical analysis of comparison effects. *Journal of Economic Psychology*, 53, 17-36.
- Choi, A. M., K., Moon, J.E., Steinecke, A., & Prescott, J. E. (2019). Developing a culture of mentorship to strengthen academic medical centers. In *Academic Medicine*. 94.(5). 630. <https://doi.org/10.1097/ACM.0000000000002498>
- Cummings, G., Lee, H., Mac G Regor, T., Davey, M., Wong, C., Paul, L., & Stafford, E. (2018). Factors contributing to nursing leadership: A systematic review. *Journal of Health Services Research and Policy*.13. (4) 240-248.Available at: <https://doi.org/10.1258/jhsrp.2008.007154>
- Douglas, M. (2017). Opportunities and challenges facing the future global nursing and midwifery workforce.*JournalofNursingManagement*,19. (6) 695-699. <https://doi.org/10.1111/j.1365-2834.2011.01302.x>
- Frankenberger, W. D., Roberts, K. E., Hutchins, L., & Froh, E. B. (2021). Experience of burnout among pediatric inpatient nurse preceptors. *Nurse Education Today*, 100, 104862.
- Institute of Medicine (2016) *The future of nursing: Leading change, advancing health*. The National Academies Press. Available at: <https://doi.org/10.17226/12956>
- Latimer, G. E, (2015). Trustee: The basics of boards. *Nursing Administration Quarterly* 39(1):18-22. Available at: <https://doi.org/10.1097/naq.0000000000000073>

- Manion, A., Griffin, P. E., & Van Dam, P. J. (2021). Nurses' perceptions of preparedness for acting as Nurse Unit Managers: A cross-sectional study. *Collegian*, 28(6), 685-691.
- Nagle, C., Omonaiye, O., & Bennett.(2021).Valuing nurse and midwifery ward managers' voices: a qualitative approach. *BMC Nursing*.20. (1): 1-9. Available at: <https://doi.org/10.1186/s12912-021-00680-6>
- Walton, A., Lake, D., Mullinix, C., Allen, D., Mooney, K. (2015). Enabling nurses to lead change: The orientation experiences of nurse to boards.*Nursing Outlook* 63(2):110-116. Available at: <https://doi.org/10.1016%2Fj.outlook.2014.12.015>