

Empowering Leadership: A Journey of Growth and Insight Through a Mentoring Program for Nurses in Leadership Positions

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Aim: This study explores the experiences of mentors and mentees participating in a mentor program for nurses in leadership positions, aiming to identify areas for program improvement.

Design and Methods: A qualitative approach was used, with semi-structured interviews conducted with 20 nurses in leadership roles. The participants, 10 mentees and 10 mentors, were involved in the Norwegian Nurses Organization's "Mentor Program for Nurses as Leaders". Thematic analysis was applied to the data.

Results: Participants in the mentorship program reported increased leadership awareness, stronger motivation, better stress-coping mechanisms, and greater confidence as leaders. They received valuable feedback and support from their mentors, boosting their motivation to pursue leadership roles. Both mentees and mentors expressed a desire for a longer program and emphasized the importance of networking opportunities, along with the need for predictability and long-term planning to improve program effectiveness.

Conclusion: Participants reported that the mentorship program increased their awareness, motivation, coping skills, and confidence as leaders, encouraging them to pursue leadership roles. The results show that the NNO's mentor program positively influences leadership aspirations of new nurse leaders, with potential for further development in networking and program duration.

Keywords: mentoring, nurses, evaluation, leadership, experiences

Implications for the Profession and/or Patient Care

Mentor programs can be an effective method in leadership development. The findings have implications for the development of this specific mentor program but also demonstrate, more broadly, the significance of mentor programs in enhancing competence and motivating nurses in leadership positions.

"No Patient or Public Contribution".

The article contributes by presenting evidence that:

Mentor programs are effective in fostering leadership development among nurse leaders.

Positive experiences which incorporate digital tools into leadership development programs are valuable.

Collaborative networking is of great significance in leadership development.

Introduction

In a time marked by constantly evolving demands and challenges within the healthcare sector, nurses in leadership positions face complex issues that demand qualified leadership. Following an extensive leadership survey conducted by the Norwegian Nurses Organisation (NNO) in 2021,¹ significant challenges were identified in ensuring competent leadership in healthcare services, particularly concerning the working conditions of nurses in leadership roles. To address

these challenges, the association has implemented various strategies, one of which includes the development and testing of a mentor program tailored for nurses in leadership positions within the field of mental health and substance abuse.

This article seeks to address the mentioned challenges by exploring the potential of mentor programs for nurses in leadership positions, especially within the realms of mental health and substance abuse. By examining the experiences and outcomes of such a program, we aim to provide valuable insights that can enrich the understanding of nursing leadership and mentor programs in healthcare.

Background

In 2021, the Norwegian Nurses Organisation (NNO) conducted a survey that documented challenges in ensuring qualified leadership in healthcare services and highlighted demanding working conditions for nurses in leadership positions.¹ The NNO has also implemented various efforts to recruit, motivate and retain nurses in leadership positions, one of which is the development and testing of a mentor program for nurses in leadership positions within the field of mental health and substance abuse.²

Nurses in leadership positions may find it challenging to lead healthcare organizations, which could be variously related to nurse leaders having numerous and varied responsibilities, experiencing a gap between responsibility and authority, lacking support from senior management, and having limited resources.³ Combined with a strong sense of responsibility for the quality of care they are responsible for delivering, this can lead to stress and a negative impact on their quality of life. At the same time, this may signal that some nurses in leadership positions struggle to define their leadership role, and that the leadership role is very demanding for various reasons.⁴ If a leader is not confident and satisfied in their role, it can negatively affect the staff, which, in turn, can have an adverse effect on patient care. Specifically, within psychiatric care, ambivalence in the leadership role has been found to be prominent among nurses, where a sense of responsibility and the experience of being engaged in meaningful work are mixed with a sense of powerlessness and uncertainty. Among other things, a lack of authority and power to lead can increase feelings of uncertainty in the leadership role.⁵

Empowering leaders is crucial in all organizations. Knowledge sharing has become essential for organizations as it is a source of competitive advantage. A study conducted by⁶, shows that empowering leaders influences knowledge-sharing behavior. Leaders with a high learning goal orientation are more likely to share knowledge when they are psychologically empowered. Furthermore, a study conducted in an IT company shows that empowering leadership contributes to psychological safety in the workplace, promotes employees' knowledge-sharing behavior, and leads to employee agility.⁷ This underscores the importance of empowering leaders, regardless of the organization they belong to, to ensure a safe and productive work environment.

Internationally, it has been shown that the exercise of leadership by nurse leaders is a significant factor for nurses who work directly with patients in relation to their intention to stay or leave their current workplace. An Australian study, which included 1673 nurses in clinical practice, revealed that nurses valued "human" skills more than other leadership qualities. "Human qualities" included the leader's communication with nurses regarding concerns, clarity in performing work tasks, inviting participation in decision-making, and encouragement in daily work.⁸ Strong leadership qualities in nursing unit leaders are associated with greater job satisfaction, reduced turnover, positive intentions among nursing staff, and improved patient outcomes. Good nursing leadership has been shown to reduce turnover among nurses in mental health care and, at the same time, increase patient satisfaction with the care they receive.⁹ Extensive research in the field shows clear correlations between leadership and patient outcomes, with supportive and motivating leadership style leading to increased patient satisfaction with treatment and support.

Leaders who promote a collaborative and supportive work environment in health care organizations is associated with higher employee satisfaction and reduced burn out among staff.^{10,11} Therefore, it is crucial to understand the factors that contribute to recruiting nurses into leadership positions and to motivate skilled nurse leaders to both remain in and advance in their roles.¹²

Supporting and developing nurses as leaders will be essential in ensuring the quality of nursing services in the future. Mentoring of nurses in leadership positions has been shown to have a positive impact on leadership skills.^{13,14} Furthermore, mentoring of leaders has been shown to have a positive impact on employee health and well-being, employee relationships, work culture, and collaboration.¹⁵

The evidence supporting the benefits of mentoring, especially for those new to a role, is well documented.^{16–18} However, there is limited research specifically on how mentor programs impact the development of leadership skills in nurses. This represents a gap in understanding how nurses can acquire the necessary leadership competencies to meet the complex demands of the healthcare system.^{6,19}

Mentoring

Mentoring has been defined as a relationship between a senior and a junior person with the purpose of providing experience-based discussions, reflection, emotional support, and other assistance for career development for both beginners and leaders. Being part of a mentor program can result in the leader developing their communication skills and leadership style, which can contribute to creating a more supportive culture and a better working environment. These changes can, in turn, contribute to better patient care.²⁰ Therefore, mentor programs are promising arenas for developing leadership skills.²¹ Mentor programs are quite different from short-term courses and require a long-term commitment from both individuals and their organizations. In mentoring, the focus should be on each participant's current role and everyday practices, helping the participant develop and demonstrate clinical leadership skills in these contexts.¹⁴

Mentor Program for Nurses as Leaders

In 2021, the Norwegian Nurses Organisation developed, designed and implemented the “Mentor Program for Nurse Leaders” to support nurses who were new to a leadership position. Following the implementation of the mentor program, we conducted a research study to evaluate its effectiveness and identify potential opportunities for further development and enhancement.

In designing the mentor program, international literature and conversations with those responsible for mentor programs in other sectors were consulted. On behalf of the literature and the purpose of the program, the following definition on leadership mentoring was created:

Leadership mentoring is a mutually respectful and developmental relationship between an experienced leader and a less experienced leader, both with a nursing background. Conversation techniques are used purposefully for reflection, support, development, meaning-making, expanded understanding, deeper insight into leadership-related matters, confidence, and well-being in the leadership role. The overarching goal is the optimization, integration, and application of combined expertise in the exercise and development of leadership.(2)

A program manager, a program leader, and a coordinator planned and carried out implementation of the program. They were responsible for recruitment, interviews, matching, program content facilitation, implementation, and evaluation. In case of specific challenges, mentors and mentees could contact the program manager for assistance.

A prerequisite for matching and inclusion was that participants should not be from the same organization, and participants from all over the country should be able to participate. When it came to mentors, efforts were made to achieve an equal distribution of men and women.

Ten mentors were headhunted, while mentees applied to the program after a call for applications in the Norwegian Nursing journal (Sykepleien), ten mentees were included. Mentors and mentees were interviewed and assessed individually. Competencies, challenges, focus areas, experiences, and ambitions were considered. Mentors and mentees were matched to ensure optimal compatibility of skills and goals.

At start, mentors received an introduction to mentoring as a pedagogical method in a digital day session. The participants were gathered in four digital seminars, each lasting 4 hours and spread over a 10-month period. These seminars had pre-introduced themes, such as strategic leadership, how to manage stress in the leadership position and development of leadership qualities. The final session was in person and included a two-day program. Mentor-mentee pairs met every 3 weeks. Mentees prepared topics for each mentoring session based on their experiences as leaders, their mutual interests and objectives. Mentors and mentees agreed on timing and duration.

The NNO's mentor program is based on a collaborative relationship between a mentor and a mentee, where objectivity, responsibility, honesty, trust, and confidentiality are essential. The mentor's role is to assist and support the mentee in their reflections and learning journey, helping to develop leadership skills, enhance performance, maximize

potential, and enable the mentee to become the leader they aspire to be. The mentor–mentee relationship is grounded in mutual respect, where knowledge and experiences are exchanged and applied with the shared goal of the mentee’s growth in the leadership role. The program emphasized that the mentees should utilize their leadership positions to practice leadership and reflect on their potential. Three collaborative seminars were held with mentors and mentees, where working seminars provided direction for the themes in group sessions. The mentor-mentee pairs met for about 1.5 hours every 3 weeks, with the mentee responsible for preparation and the choice of topics. The mentorship program was conducted through four digital group sessions and a joint two-day in-person seminar.

Aim of the Study

The aim of this study is to explore mentor and mentee’s experience of participating in a mentorship program for nurses in leadership positions. Further, to identify potential avenues for expansion and enrichment of the mentorship program.

The study aims to understand which components of the mentorship program most effectively support the leadership development of nurses in leadership positions. The research questions focus on identifying critical success factors and barriers within the program, as well as how mentorship schemes can contribute to improved nursing leadership. This research contribution is significant as it expands the existing literature on nursing leadership, an area increasingly recognized as crucial for the quality of healthcare services. The study had two research questions: 1). What are the experiences of mentors and mentees with participation in the mentorship program? And 2). How can a mentorship program for nurses in leadership positions be further developed?

Method

Design

In the research following the pilot of the “Nurse Leadership Mentorship Program”, experienced interviewers conducted individual interviews with mentors and mentees both before the program started and after its completion.

In pursuit of the study’s objective, a qualitative methodology was employed, involving semi-structured interviews conducted with 20 nurse leaders. Thematic analysis was utilized to examine the collected data.²² This approach provides a nuanced exploration of the participants’ perspectives.

Participants and Settings

Participants were recruited from NNO’s “Mentoring program”. This study included 20 nurses occupying leadership positions, and the data utilized was collected after the participants completed the program. The nurse leaders featured a range of leadership experience in mental health services, spanning from 2 to nearly 20 years. Each participant possessed clinical expertise in mental health services and had undergone management training. Prior to inclusion in the study, participants were provided with detailed written and verbal information about the research, and all willingly confirmed their informed consent through signed documentation.

Data Collection

Data were gathered through individual telephone interviews conducted in May 2022. A single interviewer, well versed in research and interviewing techniques, led all interviews using a semi-structured interview guide, see [Appendix 1](#). In this study, the research team developed a specialized questionnaire to gain insights into the experiences of both mentors and mentees who participated in the leadership development program, “The Mentorship Program”. The questionnaire was designed to explore key components of the program, focusing on how participants perceive the mentorship relationship, leadership development, and the practical application of leadership skills. This instrument allowed for a structured assessment of critical areas such as communication, personal growth, and the mentees’ ability to reflect on and enhance their leadership potential. Each interview lasted approximately 45 minutes. It is important to note that the interviewer had no prior relationship with the participants. The interviewees’ responses were carefully documented and reiterated, providing them with the opportunity to review and elaborate on their statements. This process aimed to identify and rectify any misunderstandings or ambiguities.

To ensure thoroughness, all interviews were both conducted and analyzed by two distinct members of the research team, namely SS and EML. A meticulously maintained code list adhered to the protocols and guidelines set forth by the Sikt- Norwegian Agency for Shared Services in Education and Research (Sikt) and Oslo Metropolitan University. This systematic approach enhances the reliability and validity of the collected data.

Ethical Considerations

A thorough information process was conducted for the participants, including both written and verbal details about the study. Before participating, participants provided written confirmation of informed consent. Participation was voluntary, and participants had the right to withdraw from the study at any time without consequences. No participants withdrew from the study.

To safeguard participant confidentiality, pseudonyms/numbers have been used when reporting quotes in the study. The participants' informed consent included publication of anonymized responses/direct quotes.

This study complies with the principles of the Declaration of Helsinki and the study has been conducted with respect for human rights, ethical standards, and scientific integrity. The design of the current study adhered to the general guidelines for research ethics set forth by the Norwegian National Research Ethics Committee. Additionally, the research protocol was assessed and approved by the SIKT – Norwegian Agency for Shared Services in Education and Research.

Sikt – Norwegian Agency for Shared Services in Education and Research ref. number: 386161. This study is not considered a medical or health research project and is therefore not reviewed by the Research Ethics Committee. This is in accordance with the Norwegian Act on Medical and Health Research (Health Research Act).²³

Analysis

Thematic analysis was used to analyze the data. We followed the six steps for analysing the material outlined by Clarke and Braun.²⁴

The first step of the analysis was to become familiar with the data. This was done by each author individually reading through each transcribed interview. Then, all interviews for mentors and mentees were read through. In the second step of the analysis, each author went through the material, searching for relevant codes within the data. The relevant codes and quotes that formed the basis for the codes found were transferred into a table. In the third step, preliminary themes were formulated based on the codes and statements. In this phase, the entire dataset was reviewed again to ensure that the preliminary theme names were logical and descriptive of the overall dataset.

After the initial analysis was conducted individually by each author (EML and SS), a joint meeting was held where each author presented their preliminary findings. During this meeting, the preliminary results were discussed, and a shared understanding of the themes in the material was reached. The authors' analyses were largely aligned. In cases of discrepancies, the original data were revisited, and a shared understanding was reached. Together, the authors went through the data and selected quotes or statements that were indicative of the themes that emerged in the final analyses.

Researcher Characteristics and Reflexivity

The semi-structured interviews were conducted by an experienced interviewer who had no relationship to the participants. The authors of this article were granted access to anonymized transcribed material. The analysis process is described in the analysis chapter.

Findings

The findings are presented in two sub-sections related to the two research questions that have been formulated. Firstly, the findings related to (1.0) “What are the experiences of mentees and mentors in the mentorship program?” are described, followed by findings related to (2.0)

“What are the potential avenues for expansion and enrichment of the mentorship program”.

Experiences of Mentees and Mentors in the Mentorship Program

Initially, findings that are common for both mentees and mentors are presented, followed by findings specific to mentees.

Mentees and Mentors Have Had Positive Experiences in Participating in the Mentor Program

All mentees and mentors expressed having positive experiences from participating in the Mentorship Program. Every mentee conveyed high satisfaction with their participation in the program and would recommend it to other leaders. One mentee stated,

Yes, I would definitely recommend the program to all new leaders. I can imagine being a mentor (A.8).

All mentors were also content with their participation in the mentorship program, with one mentor expressing,

We absolutely recommend the program, got a lot out of it ourselves (M.2).

The Mentorship Program Has Contributed to Learning, Development, and New Insights for Both Mentees and Mentors

Mentees and mentors emphasized that their participation in the Mentorship program had led to learning, development, and new insights.

Mentees explained that their interaction with mentors increased their reflection and awareness of their leadership roles. Statements from mentees that support this include:

I have had the opportunity to reflect on my own situation and leadership (A2).

Mentors Highlighted That Working with Mentees Had Brought Their Knowledge to the Forefront

Mentors describe knowledge being brought to the forefront through collaboration and reflection with mentees, such as

Meeting the mentee and their experience has given me opportunities to recall past situations and develop my own scope of action (M.4) and Good discussions and reflections, even though we had different opinions and perspectives (M.2).

Effective Collaboration Between Mentees and Mentors Was Acknowledged

Both mentees and mentors emphasized that the collaboration between mentees and mentors had worked well. One mentee described the collaboration with their mentor as follows:

The collaboration with my mentor has been very good and constructive. It was easy to talk with my mentor (A6).

A mentor described the collaboration with the mentee like this

I had a very good collaboration with my mentee, it has been an exciting and close cooperation. We were a very good match (M6).

Mentoring is a systematic learning alliance between a mentee and a mentor, with the process aimed at developing the mentee's leadership skills. The following findings describe the development process from the mentees' perspective.

Mentees Experienced Increased Awareness, Motivation, Coping, and Confidence in Their Leadership Roles

Mentees participating in the mentorship program described an increased awareness, coping, and confidence in their leadership roles. One mentee stated,

I have become more aware of the kind of leader I want to be. I have learned to say no - something important to endure (A3).

Several mentees mentioned that the mentorship program and the mentor relationship had boosted their motivation and energy. One mentee said,

I have gained new energy (A2),

another emphasized increased motivation in facing the challenges in the leadership role, stating,

The mentorship program has contributed to endure in the leadership position (A4).

Moreover, several mentees expressed that having a mentor had led to increased confidence in their leadership roles. For example, one mentee said,

I make decisions more quickly, and I have become more confident in the role of a leader (A10).

Mentees Felt They Received Confirmation of Their Value as Leaders

Mentees felt they had received confirmation from their mentors, with one mentee stating,

I have become more confident and received positive confirmation of who I am as a leader (A2).

Mentees Experienced Support in Setting Priorities

Several mentees mentioned that they had received help and support in prioritizing tasks. Example statements from mentees included,

Became more aware of own responsibilities and what should be delegated to others (A1) and I have received help with practical matters, self-leadership, and prioritizations (A9),

as well as

I have found balance and can sort better (A2).

Mentees Expressed Increased Motivation for a Leadership Career

The mentoring had increased the mentees' motivation to continue as leaders and aspire to more strategic leadership positions. Statements such as

I want to continue as a leader and seek for a higher leadership position (A10) and I want to move further- as a leader. (A8) exemplify this.

Developing the Mentorship Program for Nurses in Leadership Positions

Findings related to the organization and implementation of the program are presented initially, together for mentees and mentors, followed by findings specific to mentees and mentors.

Positive Experiences with Digital Implementation of Mentoring

Both mentees and mentors expressed positive experiences with conducting mentoring digitally. Digital meetings were highlighted as time-efficient and provided additional opportunities. A mentee stated,

The digital meetings have been efficient, convenient, and time-saving (A10),
and one mentor said

The digital solution has been time-saving (M5).

Digital meetings increased the possibilities for selecting mentors outside mentees organizations, as a mentor said,

Conversations work very well digitally; a mentee can have a mentor from another organization and this is good for confidentiality (M6).

Additionally, both mentees and mentors emphasized the importance of physical meetings at the program's beginning and end. Statements from interviews include:

I want the Physical meetings at the beginning and end (M5).

Mentees and Mentors Desire a Mentorship Program of Longer Duration

Both mentees and mentors expressed the need for a longer program. Three mentees stated:

I would have liked a longer program and physical meetings at the start and end (A3).

I would have liked a longer program (A6) and One year is too short; perhaps 1.5 years in length? (A1).

Several mentors said that a longer program duration would be beneficial, with one mentor mentioning,

I would have liked a longer due to the complex challenges the mentees struggle with in their leadership positions (M7).

Mentees and Mentors Have Different Needs for Interaction Networks

Findings from the analysis show that both mentees and mentors need to collaborate with other participants, either fellow mentees or mentors. Mentees highlighted that they received valuable support from their fellow mentees through platforms like Facebook groups, suggesting a buddy system for mutual support. Statements from mentees that illustrate the need for support and collaboration within their group include:

I could see myself being a 'buddy' with one of the mentees to push each other further (A5),

I had good support from the mentor and Facebook group for mentees (A5), and I want to keep in touch in the Facebook group with mentees since we face many similar challenges (A6).

Mentors also expressed a need for their own mentor gatherings or collaboration with other mentors. Statements from mentors included:

I would have liked a sparring partner among the other mentors to discuss with (M3) and I think mentor meetings and gatherings are a good idea. then we could discuss various mentor challenges together (M4).

Mentees and Mentors Require Predictability and Long-Term Planning

The analyses revealed that mentees and mentors have different needs related to program improvements. Mentees emphasized the need for more time for preparation and reflection related to mentor meetings, as seen in statements like:

It's challenging to retain what you have learned, to set aside time for reflection afterward (A5) and It has been challenging in terms of preparation - should have set aside more time for it (A3).

On the other hand, mentors indicated a need for greater predictability and long-term planning for meetings. One mentor expressed

I wish that all meeting days were scheduled at the beginning so it could be added to the calendar (M8).

Discussion

The findings demonstrate that the mentorship program has contributed to learning, development, and new insights for both mentees and mentors. The aim of the mentorship program is to explore mentoring, where an experienced professional

(mentor) assists another (mentee) in becoming more confident, skilled, and competent in their professional leadership practice. Consequently, mentee experiences in the program will be emphasized prominently in the discussion.

Participation in the mentorship program has increased awareness, motivation, mastery, and confidence for mentees in their leadership roles. They have received confirmation of their potential as leaders and thereby increased their own confidence as leaders. Participation in the mentorship program has also boosted their motivation for a leadership career.

Concerning program implementation, participants report that digital mentoring has worked well. It has been both timesaving and strengthen confidentiality. Nevertheless, also the significance of physical gatherings at the program's commencement and conclusion is highlighted. Both mentees and mentors express the need for dedicated collaborative forums as part of a mentor program. Lastly, there is an emphasis on the necessity for long-term planning of meeting times and time allocation.

Relationship and Interaction as Foundations for Learning and Development

A strong collaborative relationship between mentee and mentor contributed to mutual development and learning. Establishing a positive relationship or working alliance between mentor and mentee is known as a crucial element in guidance and mentorship.²⁵

In the Mentorship program, 10 experienced leaders were invited to take on the mentor role based on their experience and leadership competence. The motivation of the mentees to participate was driven by a desire to enhance their leadership skills. Interviews with both mentors and mentees, which evaluated competencies, challenges, areas of focus, experiences, and ambitions, were used as the basis for forming effective mentor-mentee pairs. The results highlight that this matching process has been a key success factor in fostering a strong working alliance. All mentees and mentors report positive collaboration and a developmental mentoring experience. Such a matching is assumed to enhance confidence in the relationship. When individuals feel secure, they are more likely to experience internal motivation, linked to increased well-being, engagement, and effort.²⁶ While time-consuming, matching in this study has proven beneficial for fostering collaborative relationships, other studies caution that assigned mentorship can have negative effects, with mentees feeling forced into the relationship.²⁷ Successful mentoring can also result from formal assignment, depending on the individuals involved.²⁸ The same studies suggest that self-identification of mentors is often perceived favorably, facilitating a more comfortable and effective relationship.^{27,28}

Mentees' Mastery, Motivation, and Ambition

Mentees have gained increased awareness, motivation, mastery, and confidence in leadership roles. Support and affirmation from mentors have enhanced mentees self-esteem, resulting in increased confidence and motivation for a leadership career.

Confidence and self-esteem as leaders are required to manage leadership tasks and responsibilities in different situations. Bandura's self-efficacy theory emphasizes the importance of coping experiences for self-esteem and success.²⁹ The mentors' support and affirmation of mentee self-esteem have provided opportunities for coping and increased confidence as leaders. Experiences of coping increase self-confidence, belief in one's abilities, and internal motivation to continue challenging oneself.²⁹ Research shows that individuals who cope with challenges are more likely to set ambitious goals, work harder, and achieve better results.³⁰ Adequate support from mentors can impact a new leader's confidence to take on challenging tasks, and thereby contribute to increased self-confidence and proactivity in their learning process.³¹ Nevertheless, being a mentee requires a willingness to learn and engage, and motivation for development was evident in mentee participants who sought to enhance their leadership skills.

The mentee's indication of increased motivation for a leadership career after completing the mentor program suggests heightened job satisfaction.

Both mentors and mentees highlight that participation in the mentorship program has created a valuable network for leaders. Many individuals in leadership positions experience feelings of loneliness. Social support and having a discussion partner are valuable resources motivating people in work situations and can act as a buffer against job-related stress.³² Furthermore, support from leaders has been found to prevent turnover and burnout.³³ The results of this

study show that the mentorship program has strengthened factors such as engagement, relationships/network, and recognition, all positively influencing job satisfaction.

Time, Planning, and Digital Communication

Participation in a structured mentorship program provides opportunities for reflection and development. However, as our participants point out, the time to prioritize leadership support, is limited for nurses in leadership positions. Effective time-planning, structured mentoring and use of digital communication are helpful methods. Our results align with Lacerenza's meta-studies, concluding that leadership and management development require time for reflection to be useful.³⁴

Understanding leadership, where leaders at different levels have experiences about "what works best", proving to be of great value.³⁵ Dialogue, reflection, and support from experienced leaders in the form of mentors can be valuable in the development of younger leaders. Insights into tacit knowledge can create added value for individuals and organizations in mastering current or future challenges.

Digital mentoring has been effective and worked out well in NNO's mentor program. Dialogue, collaboration, and reflection are central activities for development and learning, whether occurring face-to-face or through asynchronous web discussions. Digital tools can be useful in creating conducive learning situations, as supported by research in the field.³⁶ Digital mentoring offers new possibilities as mentors' expertise can be applied beyond geographic constraints. Digital mentoring is also time-efficient in a busy everyday life.

Strengths and Limitations

This study explores the perceptions and experiences of 10 mentors and 10 mentees who participated in a mentoring program designed for nurses in leadership positions. Although the participants' age and clinical experience varied, their educational backgrounds were similar, with all holding a bachelor's degree in nursing. Including more participants would have been beneficial, but participation in the mentoring program was the central inclusion criterion, which created an inherent limitation for recruitment. The strength of the sample lies in the fact that participants came from across the country and represented various levels of healthcare services. The analysis was based on a structured method, which enhances the validity of both the process and our findings. The interview guide was specifically developed for this study, and the small sample size limits the generalizability of the results. Nevertheless, this study provides valuable insights into the experiences of nurse leaders participating in leadership development programs with a focus on mentoring.

Conclusion

NNO's mentorship program for nurses in leadership has provided new leaders with knowledge, motivation, and ambitions for a leadership career. The study further shows that experienced leaders also perceive self-development in leadership by participating in the program as mentors. The research suggests that new leaders require a mentor program that extends over a longer duration due to complex challenges. The study indicates that digital mentoring is a time-efficient method that both mentors and mentees find satisfying. However, there is a need for more research on the significance of various mentoring approaches to support nurses who are inexperienced as leaders.

Implications

Implications for future research

The findings from this study highlight positive experiences associated with participation in the mentor program. Future research should explore the specific factors contributing to these positive experiences for both mentors and mentees in such programs. This may include investigating aspects such as the mentor's approach, program structure, and the support provided. It is important to examine the long-term effects of mentor programs on learning, development, insight, leadership skills and career development over time.

Given the positive experiences with digital implementation, research should also focus on optimizing digital platforms for mentorship programs. Further, to identify possible advantages and challenges of digital mentoring compared to traditional methods.

Moreover, it is crucial to understand how mentor programs can be tailored to meet the diverse needs of mentors and mentees. This may involve exploring various interaction networks and support mechanisms that can cater to differing individual requirements.

Implications for practice

Mentor programs should be designed to promote continuous learning and development. This could involve providing resources and tools that facilitate reflection and self-development for both mentors and mentees.

With the positive feedback from digital mentoring, organizations should consider integrating digital platforms into their mentor programs, potentially making these programs more accessible and flexible.

Mentor programs should also be adaptable, catering to the individual needs of participants. This could involve offering various types of support and interaction options based on participants' preferences and goals. These implications can enhance both research and the practical implementation of mentorship programs, thereby strengthening leadership development among nurses.

Funding

This research received no specific grant from any funding agency in the public, commercial, or not-for-profit sectors.

Disclosure

There are no conflicts of interest.

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