

# THE EFFECTIVENESS OF MENTORING AND COACHING IN THE CAREER DEVELOPMENT OF NURSES INTO THE TERTIARY HEALTHCARE

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## ABSTRACT:

Mentoring and coaching are fundamental strategies in the career development of nurses in tertiary healthcare settings fostering professional growth, clinical competency and job satisfaction. This study explores the effectiveness of mentorship programs identifying key challenges and areas for improvement. The findings indicate that while most nursing mentors express confidence in their ability to guide students, inconsistencies in structured mentorship programs and feedback mechanisms hinder their overall effectiveness. Many mentors demonstrate motivation to engage in student development yet a lack of formal training and standardized mentoring approaches results in varied mentorship quality. The research highlights a significant gap in structured goal-setting with some mentors failing to provide clear learning objectives or engage in progress discussions limiting student competency development. Additionally, while some mentors provide constructive feedback, others struggle with balancing positive reinforcement and critical evaluations which can negatively impact student motivation and learning outcomes. The study also emphasizes the absence of formal mentorship programs in

many healthcare institutions leading to missed opportunities for skill transfer, leadership development and professional networking among nurses. To address these challenges, the study suggests implementing structured mentorship programs providing targeted mentor training and incorporating regular feedback and reflection practices into nursing education. By improving mentorship consistency and effectiveness healthcare institutions can enhance job satisfaction, strengthen clinical competency and cultivate a well-prepared nursing workforce capable of meeting the demands of modern healthcare. This research underscores the critical need for institutional support in establishing sustainable mentorship programs that not only benefit nursing professionals but also improve overall patient care and healthcare system efficiency.

**Keywords:** Nursing Coaching, Career Development, Clinical Competency, Job Satisfaction, Healthcare Mentoring

## 1. INTRODUCTION

### 1.1 Background study:

Coaching and mentoring are critical components in the career development of nurses within the tertiary healthcare setting that significantly improve professional growth and clinical competency. Mentoring fosters long term relationships where experienced nurses guide novices which reducing stress and improving retention rates by formal mentorship program that decreased new graduate nurses turnover by up to 18 months(Hoover et al., 2020). Coaching emphasize short term goals oriented partnerships using frameworks like the clear coaching model like contract, listen, explore action, review to develop leadership and problem solving skills which enhanced workplace culture and decision and making in high pressure environment. These individual nurses capability while contributing while to economics savings through reduce recruitment cost and better patient satisfaction via improved care qualities .By implementing evidence based on coaching activities in tertiary health care institutes cultivated resilient nursing work forces acquired to handle advanced medical complexities evidence suggest that mentorship program significantly enhance job certification among nurses that reducing stress and burnout(Carter et al., 2019). By providing emotional and professional support these program help new nurses integrate into work force and build confidence in their roles by enhancing patient care and safety a well told nursing work force is more likely to provide compensate higher

competency levels that better decision making skills and improve improved patient communication that leading to better patient outcomes. And the reduction in compassion fatigue and burnout nurses faces emotional exhaustion due to the demanding nature of their work the mentorship programs(Ohue & Menta, 2024) address this issue by providing guidance psychological support and professional development opportunities on the other hand mentorship helps nurses to strengthened leadership and career development skills that promoting career advancement and professional growth . Through structured mentoring relationship nurses gain exposure to leadership roles which enhance they are ability to take a managerial and supervisory responsibilities(Abou Hashish & Bajbeir, 2022) .

### **1.2 Problem statement:**

While the benefits of coaching and mentoring in nurses are widely acknowledged that their remains critical gap in empirical research detailing their direct impact on creative development job satisfaction and overall performance. Many tertiary health Care institutions lack structured mentorship programs leaving nurses without essential sport for professional growth and leadership department. This options of formal guidance leads to skill gaps clear stagnation and decline in job satisfaction ultimately contributing to higher turnover rates. Without effective mentorship nurses often struggle to transition from novice to expert roles impacting their confidence clinical decision making and ability to deliver high quality patient care. Addressing this challenge requires a strategic approach to mentorship ensuring that nurses received the necessary guidance, professional development and leadership training needed to thrive in demanding healthcare environment and sustain a competent motivated workforce.

### **1.3 Significance:**

Despite these positive outcomes there is still limited understanding of which specific aspect of mentoring education are most effective for developing particular competencies. Further research is needed to refine these programs and maximize their impact on professional growth and patient care. Mentoring and coaching in healthcare play a clear critical role in foresting the professional development of healthcare professionals in clinical setting.

#### **1.4 Objective:**

To evaluate the effectiveness of coaching and mentoring programs in enhancing professional development and clinical competency among nurses in tertiary healthcare settings.

#### **1.5 Hypothesis**

##### **Null Hypothesis:**

Coaching and mentoring programs do not have a significant impact on professional development in tertiary health care.

##### **Alternative Hypothesis**

Coaching and mentoring programs have a significant positive impact on professional development in tertiary health care.

#### **1.6 Limitations of Mentoring in Nursing**

This study acknowledges several limitations.

##### **1. Time Constraints of Nurses**

Due to high workloads and patient care responsibilities nurses often struggle to allocate time for regular mentoring sessions limiting the effectiveness of mentorship programs.

##### **2. Shortage of Skilled Mentors**

Many healthcare institutions lack experienced mentors leading to inconsistent mentorship quality and reduced opportunities for nurses to gain valuable career guidance and leadership development.

#### **3. METHODOLOGY**

##### **3.1 Proposed Place of Work and Facilities Available**

The study was conducted in tertiary hospitals in Pakistan. These hospitals serve as training centers for various healthcare professionals including nurses, doctors, medical laboratory scientists, physiotherapists, and radiographers.

##### **3.2 Plan of Work and Methodology Adopted**

The study adopted a cross-sectional survey design to examine the perceived effectiveness of coaching and mentoring among nurses in tertiary healthcare facilities. A cross-sectional design

was chosen as it allows for data collection at a single point in time providing a snapshot of nurses' experiences and perspectives regarding mentorship in their professional environment.

### 3.3 Parameters

#### 3.3.1 Inclusive criteria

Inclusive parameters encompass all nurses regardless of their age, gender, experience level, or specialization, emphasizing equal access to professional development opportunities.

#### 3.3.2 Exclusive criteria

Exclusive parameters, on the other hand, are tailored to specific groups, such as newly graduated nurses needing foundational guidance or senior nurses aiming for leadership roles.

### 3.4 Methods of Data Collection

In this study that data was collected with the help of adoptive questionnaire.

### 3.5 Sample Size

The sample size for this study was 30 nurses is selected by the researcher of ward of tertiary hospital.

Formula that is use to follow

$$\text{Sample size} = N1 + N * e^2$$

N=population size

e =margin for error

### 3.6 Data analysis

The data has been analyzed and interpreted statically through SPSS (statistical packages for social sciences) and EXCEL.

## 4. DATA FINDING AND ANALYSIS

### 4.1 Demographic Data

	Frequency	Percent %	Valid percent%	Cumulative frequency
		3388		

Nurses	10	33.33	33.33	10
Charge nurse	7	23.33	23.33	17
Staff nurse	6	20.00	20.00	23
Nursing officer	5	16.67	16.67	28
Others	2	6.67	6.67	30
Total	30	100.00	100.00	30

#### 4.1.1 Findings:

The largest occupational group consisted of Nurses (33.33%), followed by Charge Nurses (23.33%) and Staff Nurses (20%). Nursing Officers accounted for 16.67%, contributing to leadership and structured mentorship programs. 6.67% of respondents fell into the “Other” category, representing diverse mentoring roles.

#### 4.1.2 Data Analysis:

A strong representation of Nurses (including Staff and Charge Nurses) indicates that direct patient-care providers play a pivotal role in mentoring. Higher-ranking Nursing Officers contribute to mentorship policies, ensuring institutionalized mentoring practices. The low percentage in the “Other” category suggests that mentoring is largely structured within nursing roles, with minimal external contributions.

#### 4.1.3 Discussion:

Mentorship programs should be customized to accommodate the different responsibilities of Nurses, Charge Nurses, and Nursing Officers. Charge Nurses and Nursing Officers may require leadership-based mentorship training to ensure structured mentoring frameworks. Collaboration with external healthcare educators can enhance mentorship diversity and introduce interdisciplinary mentoring approaches.

#### 4.2 Mentor Motivation

	Frequency	Percent %	Valid percent%	Cumulative frequency
<b>Highly motivated</b>	12	40.00	40.00	12
<b>Motivated</b>	8	26.67	26.67	20
<b>Neutral</b>	5	16.67	16.67	25
<b>Not motivated</b>	3	10.00	10.00	28
<b>Less motivated</b>	2	6.67	6.67	30
<b>Total</b>	30	100.00	100.00	30

#### 4.2.1 Findings:

40% of mentors reported being Highly Motivated, followed by 26.67% as Motivated. 16.67% of mentors remained Neutral, while 10% identified as Not Motivated. 6.67% were Less Motivated, indicating a small but significant group with low engagement.

#### 4.2.2 Analysis:

The data indicates that most mentors have strong intrinsic motivation, which is essential for effective mentorship. 66.67% of respondents rated their motivation at 4 or higher, demonstrating a high level of commitment. However, the 16.67% Neutral and 16.67% Not/Less Motivated responses suggest that some mentors may be disengaged due to institutional barriers, lack of incentives, or inadequate mentorship training.

#### 4.2.3 Discussion & Implications:

Mentor motivation directly influences mentee satisfaction and learning outcomes. High motivation levels are indicative of positive mentor-mentee relationships, institutional support, and personal fulfillment in the mentoring role. However, the presence of unmotivated mentors highlights a need for professional development programs, recognition incentives, and mentorship skill-building workshops to sustain mentor engagement.



### 4.3 Practice in the Workplace

	Frequency	Percent %	Valid percent %	Cumulative frequency
<b>Always</b>	11	36.67	36.67	11
<b>Sometimes</b>	9	30.00	30.00	20
<b>Often</b>	5	16.67	16.67	25
<b>Rarely</b>	4	13.33	13.33	29
<b>Never</b>	1	3.33	3.33	30
<b>Total</b>	30	100.00	100.00	30

#### 4.3.1 Findings:

36.67% of mentors reported always engaging in workplace mentoring, while 30% did so Sometimes. 16.67% engaged often, whereas 13.33% reported rarely mentoring in the workplace. Only 3.33% indicated never, signifying minimal disengagement.

#### 4.3.2 Analysis:

The majority (83.33%) of mentors practice workplace mentoring at least sometimes, confirming that structured mentoring is well-integrated into workplace culture. However, the 16.67% reporting Rarely/Never highlights workplace barriers such as time constraints, workload pressures, or lack of formal mentoring structures.

#### 4.3.3 Discussion & Implications:

Workplace mentoring is essential for professional skill development. Organizations with structured mentoring enhance employee competency, confidence, and job satisfaction. To address the Rarely/Never group, workplaces should implement scheduled mentorship sessions, formal mentorship programs, and mentor-mentee pairing strategies to institutionalize mentoring as a core workplace function.

### 4.4 Reflection during Mentoring

	Frequency	Percent %	Valid percent %	Cumulative
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				<b>frequency</b>
<b>Moderate</b>	<b>15</b>	<b>50.00</b>	<b>50.00</b>	<b>15</b>
<b>Rare</b>	<b>6</b>	<b>20.00</b>	<b>20.00</b>	<b>21</b>
<b>Limited</b>	<b>5</b>	<b>16.77</b>	<b>16.77</b>	<b>26</b>
<b>Extensive</b>	<b>4</b>	<b>13.33</b>	<b>13.33</b>	<b>30</b>
<b>Total</b>	<b>30</b>	<b>100.00</b>	<b>100.00</b>	<b>30</b>

#### 4.4.1 Findings:

50% of mentors engage in Moderate Reflection, while 13.33% engage in Extensive Reflection. 20% reported Rare Reflection, and 16.67% engaged in Limited Reflection.

#### 4.4.2 Analysis:

Reflection is a critical component of effective mentorship, enabling mentors to assess their methods and improve their approaches. While 63.33% of mentors engage in Moderate or Extensive Reflection, the 36.67% engaging in Limited or Rare Reflection suggests that many mentors lack structured reflection practices.

#### 4.4.3 Discussion & Implications:

Structured reflection enhances mentorship quality by allowing mentors to identify challenges, adapt approaches, and enhance mentee engagement. Organizations should implement formalized reflection mechanisms such as post-mentoring debriefs, peer discussions, and self-assessment tools to encourage continuous improvement.

#### 4.5 Constructive Feedback

	<b>Frequency</b>	<b>Percent %</b>	<b>Valid percent %</b>	<b>Cumulative frequency</b>
<b>Very frequently</b>	12	40.00	40.00	12
<b>Frequently</b>	5	16.67	16.67	17
<b>Occasionally</b>	5	16.67	16.67	22
<b>Rare</b>	4	13.33	13.33	26
<b>Never</b>	4	13.33	13.33	30

<b>Total</b>	30	100.00	100.00	30
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#### 4.5.1 Findings:

40% of mentors provide Very Frequent Constructive Feedback, while 16.67% provide it frequently or Occasionally. 13.33% report Rare Feedback, and another 13.33% report Never providing feedback.

#### 4.5.2 Analysis:

While 73.33% of mentors engage in frequent feedback, the 26.67% Rare/Never responses indicate that a quarter of mentors may not provide sufficient feedback. Constructive feedback is integral to mentee development, and its absence could impact learning outcomes.

#### 4.5.3 Discussion & Implications:

Feedback is an essential tool for skill development, performance improvement, and confidence building. Organizations should train mentors in effective feedback delivery by introducing structured feedback models (e.g., the “Sandwich Method” or “Pendleton’s Model”), ensuring feedback is timely, specific, and actionable.

#### 4.6 Goal-Oriented Mentoring

	Frequency	Percent %	Valid percent %	Cumulative frequency
<b>Sometimes</b>	9	30.00	30.00	9
<b>Always</b>	8	26.67	26.67	17
<b>Rarely</b>	6	20.00	20.00	23
<b>Often</b>	6	20.00	20.00	23
<b>Never</b>	1	3.33	3.33	30
<b>Total</b>	30	100.00	100.00	30

#### 4.6.1 Findings:

30% of mentors reported Sometimes setting clear learning objectives. 26.67% reported Always, while 20% engaged Rarely or Often. 3.33% reported Never, indicating a lack of structured goal-setting.

#### 4.6.2 Analysis:

Although 76.67% of mentors set goals at least sometimes, the 23.33% who Rarely/Never engage in goal setting may struggle with mentee progress tracking. The lack of structured learning objectives could result in an unfocused mentorship experience.

#### 4.6.3 Discussion & Implications:

Goal-oriented mentoring enhances mentee clarity, motivation, and performance. Organizations should implement SMART goal frameworks (Specific, Measurable, Achievable, Relevant, and Time-bound) to ensure that mentors establish clear learning objectives. Training mentors in structured goal-setting techniques can significantly improve mentee outcomes.

#### 4.7 Student-Centered Evaluation

	Frequency	Percent %	Valid percent %	Cumulative frequency
<b>Highly motivated</b>	12	40.00	40.00	12
<b>Neutral</b>	8	26.67	26.67	20
<b>Focused</b>	7	23.33	23.33	27
<b>Less focused</b>	3	10.00	10.00	30
<b>Total</b>	30	100.00	100.00	30

#### 4.7.1 Findings:

40% of mentors engage in a Highly Focused Student-Centered Evaluation, while 23.33% are Focused. 26.67% remain Neutral, and 10% are Less Focused.

#### 4.7.2 Analysis:

Although 63.33% of mentors prioritize student-centered evaluations, the 36.67% Neutral or Less Focused responses indicate that some mentors may not fully adapt evaluation methods to individual student needs.

#### 4.7.3 Discussion & Implications:

Student-centered evaluation ensures that mentees receive personalized learning experiences. Mentors should adopt formative assessment techniques such as self-reflections, one-on-one discussions, and performance-based evaluations to ensure student needs are prioritized.

## **DISSCUSION AND CONCLUSION**

The study highlights that mentorship plays a critical role in enhancing professional growth, clinical competency and job satisfaction among nurses. However, despite a high percentage of mentors expressing confidence in their ability to guide students the practical application of effective mentoring strategies remains inconsistent across different levels of nursing professionals. Coaching and mentoring are essential for nurses' professional development in tertiary healthcare, enhancing clinical competency, leadership skills and job satisfaction while reducing stress and turnover rates. The current research confirms that mentorship fosters long-term professional relationships helping novice nurses transition smoothly into the workforce. Coaching on the other hand focuses on short-term goal-oriented development, improving leadership, decision-making and problem-solving skills in high-pressure environments. These programs contribute to economic savings by reducing recruitment costs and improving patient satisfaction. However, major challenges persist, including the lack of structured mentorship programs time constraints due to heavy workloads and a shortage of experienced mentors. Earlier studies emphasized mentorship's role in skill development and job satisfaction while the current research expands on its broader impact on leadership training, adaptability to healthcare advancements and emotional resilience. Previous findings indicated that mentorship lowers turnover rates but the present study further links it to reducing burnout and compassion fatigue strengthening nurses' ability to handle workplace stress. Coaching is highlighted as a tool for immediate performance improvement while mentoring supports long-term career progression ensuring a sustainable nursing workforce. Despite persistent challenges, innovations such as virtual mentorship interprofessional collaboration and leadership-focused coaching present new opportunities. Unlike earlier research the current study also emphasizes cultural competence in mentorship highlighting the need for inclusive programs that cater to diverse healthcare professionals and patients. Overall, both past and current studies confirm that coaching and

mentoring significantly impact career growth, retention, and patient care. But addressing existing gaps and leveraging digital solutions will be key to maximizing their effectiveness in nursing.

### **Conclusion**

This research highlights the critical role of coaching and mentoring in enhancing professional growth, clinical competency and job satisfaction among nurses in tertiary healthcare settings. Mentorship fosters long-term professional relationships helping novice nurses transition smoothly into the workforce while coaching focuses on short-term goal-oriented development, improving leadership, decision-making and problem-solving skills. These programs contribute to economic savings by reducing recruitment costs and improving patient satisfaction. However, major challenges persist, including the lack of structured mentorship programs, time constraints due to heavy workloads and a shortage of experienced mentors. Despite these barriers, mentorship has been shown to lower stress, burnout and turnover rates while strengthening nurses' ability to handle workplace challenges. Coaching serves as a tool for immediate performance improvement whereas mentoring supports long-term career progression ensuring a sustainable nursing workforce. Innovations such as virtual mentorship interprofessional collaboration and leadership-focused coaching offer new opportunities to maximize the impact of these programs. The findings align with the alternative hypothesis, confirming that coaching and mentoring programs have a significant positive impact on professional development in tertiary healthcare. Addressing existing gaps and leveraging digital solutions will be key to optimizing mentorship and coaching ultimately improving career growth, nurse retention and patient care quality.

### **RECOMMENDATIONS:**

#### **1. Establishment of Structured Mentorship Programs**

Healthcare institutions should implement well-defined mentorship programs with standardized guidelines ensuring consistency in mentor-mentee interactions and goal-setting to enhance professional development.

#### **2. Integration of Digital Coaching Platforms**

Utilizing online coaching and virtual mentoring tools can help address time constraints allowing nurses to receive guidance and support flexibly without disrupting their demanding work schedules.

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