CPD for mentors: creating a portfolio

Mentors can use a portfolio of evidence to show continuing professional development.

In this article...

- Why mentors need a CPD portfolio
- How to create a portfolio of evidence
- Using a SWOT analysis to identify strengths and weaknesses

Since the Nursing and Midwifery Council updated its code of professional conduct (NMC, 2008a) there has been a renewed focus on mentor competency.

All qualified nurses and midwives have a responsibility to facilitate learning within clinical settings, and those who take on formal mentoring roles must have completed an NMC-approved course to prepare them for this role (NMC, 2008b).

Developing the skills of mentors in practice areas gives students the best possible experiences for learning.

The NMC set out standards of proficiency in nursing education to ensure pre-registration students are deemed fit for practice, both at the point of registration and beyond (NMC, 2004). It stipulated that nurse education should be 50% practice focused, which would lead to pre-registration students becoming professionally proficient.

The updated standards add that: “Practice learning providers must ensure that a mentor or practice teacher is available to the student for at least 40% of the time during periods of practice learning” (NMC, 2010). The 2010 standards also stipulate that: “Students are supervised directly or indirectly at all times during practice learning by a mentor, practice teacher or other suitably prepared registered professional.”

Mentors are expected to be able to develop and train students and the practice placement is the best place to build nursing knowledge, skills and professional attitudes (Levett-Jones and Lathlean, 2008). Practice placements are an important part of nurse education during which students have the opportunity to translate theory into practice, experience the “real world of working”, learn about professional values and beliefs, and fulfil statutory requirements for registration with the NMC (Higginson, 2004).

Improving the skills of mentors is a priority. National research reveals that mentors need more streamlined preparation and structured support to fulfil a diverse and demanding role as supervisors and assessors (Pope et al, 2003). This extra education and support is intended to ensure they are fit for practice and purpose (Duffy, 2004). However, mentors have reported that they feel unsupported (Duffy, 2004b) and struggle to appreciate the requirements of the role and the importance of their continuing professional development (CPD). Meeting the standards necessary to support learning and assessment in practice is crucial to ensure a high-quality workforce and that qualified nurses are prepared for the mentoring role (NMC, 2008b).

After completing an NMC-approved mentor preparation programme, nurses are qualified to support, teach and assess pre-registration students during practice placements (NMC, 2008b). This is crucial in developing student nurses’ professional abilities, although it is recognised as a challenging role due to the lack of protected time (NMC, 2008b). However, higher education institutions rely on high-quality mentoring to ensure students achieve as well in practice as they do in the classroom or academic setting.

A Nursing Times survey identified that, while mentors are aware of the value of mentoring students (Gainsbury, 2010), they are challenged as to how to commit fully to the role within the constant demands of their core job. They identified that work demands had a significant impact on their ability to engage in mentor activities, such as mentoring students and attending updates and relevant courses.

Mentors have also expressed concerns about accountability and supporting failing students (Duffy and Hardicre, 2007). Mentorship preparation and the ongoing development of nurse mentors...
Nurses and midwives have a responsibility to continually develop themselves for professional growth. Mentors play a pivotal role in protecting the public by ensuring students are fit for purpose and practice need support in both clinical practice and academic settings. Andrews and Chilton (2000) further identified that mentors felt unsupported and unprepared for this role. Career pathways to develop nurse mentor roles have tended to offer limited opportunity for progression.

However, the NMC introduced the developmental framework (NMC, 2008b) that was designed to facilitate personal and professional development so that nurses and midwives can include CPD as part of their personal development plan. Most managers and clinicians recognise the benefits of participating in ongoing CPD for staff, the health service and students. Providing CPD opportunities for mentors can only enhance performance and competence, as well as their motivation, capability and job satisfaction. Mentors must demonstrate their knowledge, skills and competence on an ongoing basis and have a duty to provide students with a variety of learning opportunities to enable them to achieve their learning objectives.

Those who have not done an NMC-approved mentorship programme but have an equivalent qualification should ensure that an approved education institutional has approved or accredited their alternative experience or qualification before they assess pre-registration students. This article explores how mentors can create a portfolio of evidence to gain or maintain mentorship status through CPD, therefore ensuring they maintain competence as outlined by the developmental framework (NMC, 2008b).

The portfolio of evidence

The Standards to Support Learning and Assessment in Practice (NMC, 2008b) require all registered nurses to map their knowledge and skills against the domains within the developmental framework. Mentors can develop a portfolio of evidence to help them to fulfil their role as a stage 1 and 2 mentor by providing a self-assessment and simple mapping exercise. Nurses can self-assess against the NMC domains for mentors and identify any learning needs they may have, to enable them to meet the domains.

What is a stage 1 mentor?

The term stage 1 mentor applies to all registered nurses or midwives and is an introduction to the roles and responsibilities of being a mentor (Kinnell and Hughes, 2010) (Box 1).

All registered practitioners are required to “facilitate students and others to develop their competence” (NMC, 2008a). However, while stage 1 mentors are able to support, supervise and teach students, this must be done under the supervision of a stage 2 mentor who is accountable for those students’ assessments. This means stage 1 mentors can contribute towards the assessment process in consultation with individual students’ stage 2 mentors, who must sign all assessment documents.

A stage 1 mentor might be newly qualified and working within their preceptorship programme to meet the requirements for their knowledge and skills (KSF) framework portfolio (Department of Health, 2004). To become a stage 2 mentor, they must first meet the stage 1 standards so that their line manager will be able to recommend them for the Preparation for Mentorship module at a university.

If they do not meet the stage 1 standards, the mentor and manager or professional lead can develop an action plan to identify issues and consider how these can be addressed. The aim is for stage 1 mentors to develop and progress to stage 2 as part of their CPD, so meeting the requirements of the second gateway within the KSF (Royal College of Nursing, 2007).

What is a stage 2 mentor?

Nurses can become stage 2 mentors when they have been registered for a minimum of one year and successfully completed a mentorship module or course meeting all the outcomes of stage 2 (NMC, 2008b). This also applies to those who have not recently attended a specific mentor preparation module at a university as outlined by the NMC.

The regulator says: “The NMC does not expect mentors, practice teachers and teachers who have undertaken a preparation programme previously approved by one of the National Boards, or since April 2002 undertaken preparation approved by programme providers, to have to repeat such preparation” (NMC, 2008b).

Qualifications are recorded on the local register of mentors within trusts, so mentors need to ensure they continue to...
meet and maintain the stage 2 outcomes for the mentor domains (Box 2). Stage 2 mentors must demonstrate their knowledge, skills and competence on an ongoing basis. These must be reviewed and verified every three years if they are to remain on the local register.

All stage 2 mentors must facilitate teaching, learning and assessment in practice. They have a duty to offer students a variety of learning opportunities to enable them to achieve their learning outcomes.

What can you do to remain a competent mentor?
Portfolio of evidence
Mentors can keep a portfolio of evidence containing anonymised information such as a record of all students they have mentored.

This can include: level and year of study; evidence of practice-based teaching and learning strategies used; formative and summative assessment strategies; reflections on mentoring experiences; action plans; and strategies used when managing challenging or failing students.

Mentors will need to consider what can be included in their portfolio to demonstrate that they have met all the outcomes found in the eight domains. For example, a preliminary interview demonstrates mentors are able to set goals or learning outcomes and actions and the intermediate interview shows they are able to formatively assess, give verbal or written feedback and evaluate learning. The final interview (also known as the ongoing achievement record) demonstrates mentors are able to summatively assess the learner against specific criteria and give constructive feedback, focusing on strengths and areas for development.

Mentors must gain students’ consent if they wish to photocopy student documentation for their portfolio.

Examples of evidence are not meant to be prescriptive as there may be additional evidence to help meet the outcome – it is for mentors and managers to decide whether outcomes have been met. Actual evidence offered should be against each domain or against development needs identified with the manager.

Competencies linked with annual appraisal/triennial review
Stage 1 and 2 mentors can map the domains found in the NMC Standards to Support Learning and Assessment in Practice (NMC, 2008b) and link these with their annual appraisal.

This is developmental and aimed at using the annual appraisal to identify areas in which mentors need to be developed. For example, the appraisal may look at whether a stage 2 mentor has attended an annual update and has documentary evidence such as a certificate of attendance, or has mentored at least two students over a three-year period and provided a summary of teaching, learning and assessment activities.

If the appraisal system is used effectively, in the third year or at the triennial review, stage 2 mentors can be confident that they have maintained and verified the necessary skills and competencies to remain on the mentor register for another three years. They should consider the eight domains as defined in the standards with related criteria and determine the extent to which they meet each one. They should also document in their portfolio once they have met the indicated domains, and provide examples from their experiences. Any supporting evidence can be filed in the portfolio.

SWOT analysis
A SWOT analysis is a self-assessment exercise that mentors can use to examine their strengths, weaknesses, opportunities and threats to mentoring. They can use the results to identify priorities for action (Finkelman, 2006). The main aim of doing such an analysis is to empower mentors by focusing on strengths as a motivational tool. They can file the completed analysis in their portfolio as evidence of reflection and CPD.

Mentors can also use the SWOT analysis during annual appraisals with managers; it is also a useful tool to use with learners to identify strengths and weaknesses and then use as a starting block in the preliminary interview.

Strengths

» What are your good qualities as a mentor?
» What skills are you good at in relation to teaching, learning and assessing?
» What do other people see as your strengths?
» What else are you good at?
» What are your personal strengths as a mentor?
» What type of leader are you?

If you are having difficulty answering these questions, try writing down a list of your characteristics as a mentor – hopefully, some of these will be strengths. In considering your strengths, think about them in relation to the development of learners in your workplace, for example, if you think you are well motivated, or you have an excellent rapport with your learners.

Weaknesses

» What could you improve in your development of mentorship skills?
» What do people see in you that are likely to be a weakness as a mentor?
» What do you think are your areas of weakness?
» Where are you inexperienced and how do these missing areas affect your development as a mentor?
» Do other people seem to perceive weaknesses that you do not see?
» Do your students evaluate you well – or not?

Speak to other staff in your workplace or develop an anonymous questionnaire asking colleagues to identify what your weaknesses may be as a mentor. Be honest with yourself. It is best to be realistic now, so you can be supported as soon as possible.

Opportunities

» What opportunities are there for you as a mentor?
» What interesting developments are you aware of?
» What opportunities are there to help you achieve competence in mentoring skills?

Useful opportunities can come from such things as:
» Your mentor or manager;
» Your friends;
» Your colleagues at work;
» The link lecturers from the university;
» The internet;
» Students.

A useful approach to looking at opportunities is to consider your strengths and ask yourself whether these open up any opportunities. Alternatively, look at your weaknesses and ask yourself whether you could open up opportunities by eliminating them.

Threats or barriers

» What obstacles do you face – do you find failing a student difficult?
» What barriers prevent you from effectively teaching, learning and assessing in your workplace?
» Do you have difficulties creating professional boundaries?
» Are the specifications for your role as a mentor changing as you progress through your career?
» Does changing technology threaten you?
» Could any of your weaknesses seriously threaten you as a mentor?
» Are you adverse to change?
» Do you have the skills to support challenging students?
» Do you find giving verbal or written feedback daunting?

Reflection
Reflections can be documented on your involvement with student nurses that contribute to personal practice and/or continued professional development as a stage 2 mentor. Remember to link this to the evidence that is provided for the eight domains.

Critical friend
In order to get constructive and critical feedback on your performance as a mentor, consider finding yourself a “critical friend” – someone who will support you and engage in your journey as a mentor.

Titchen (2001) describes critical companionship as a metaphor for a helping relationship in which critical companions accompany less experienced practitioners on their personal, experiential learning journeys. This will also enable you to evaluate your mentoring performance and develop an insight into yourself as a person and professional.

Keep a record
Keep a summary of the students you mentor – this does not necessarily need to include their names – year and level is adequate.
Keep a record of all the teaching, learning and assessment strategies you use as well as any challenging situations you might face.

If you formulate any action plans with your students, file these in your portfolio so you can refer to them again if necessary. However, you should not keep your own separate student progress records as everything should be recorded in students’ assessment of practice documents (NMC, 2010).

Conclusion
Career development and mentoring skills are essential to delivering change in health services and improving student education. By undertaking CPD, mentors can ensure they maintain their competence.

Developing a mentor portfolio will build confidence and skills, and support mentors not only in their professional development but also in managing challenging students and failing poor performance.

Mentors play an important role in developing the competence of student nurses and midwives as they progress towards registration. They also play a pivotal role in protecting the public by ensuring students are fit for purpose and practice through planning and supporting learning experiences and robust assessment processes.

It is well accepted that student nurses must be supported and assessed by mentors. If mentors are to fulfil this role, higher education institutions and stakeholders have a responsibility to continuously prepare and support them. This in turn will enhance both the student experience and patient care.

References
Duffy K (2004b) Mentors need more support to fail incompetent students. British Journal of Nursing; 13: 10, 582.
Nursing and Midwifery Council (2010) Standards for Pre-Registration Nursing Education. London: NMC. tinyurl.com/NMC-education-standards
Nursing and Midwifery Council (2008b) Standards to Support Learning and Assessment in Practice. London: NMC. tinyurl.com/NMC-assessment-standards
Nursing and Midwifery Council (2004) Standards of Proficiency for Pre-Registration Nursing Education. London: NMC. tinyurl.com/NMC-proficiency-standards