Abstract
The Lothian and Borders Mentorship Steering Group has considerable experience of preparing and supporting a large number of student mentors cohorts who have completed the mentorship in practice preparation programme. In order to address the lack of data relating to the impact of the NMC (2006, 2008) Standards for Learning and Assessment in Practice and NES (2009) framework outcomes for the preparation of mentors to support pre-registration student nurses and midwives, a small scale study was undertaken.

Methodology
Qualitative study employing a mixed methods of data collection using participant questionnaires and focus groups to capture the experience of mentors (n=19), who and completed the course, sign off mentors (SOM’s) (n=6) and clinical nurse managers (n=6) in practice who had supported mentor candidates throughout this new approach to mentorship preparation. Data analysed using a phenomenological approach described by Gadamer (1976; 1996).

Results
Preparedness for the Mentorship in Practice Module as Mentor Candidate SOM to Mentor Candidates and Manager
The majority of Mentor candidates, SOM’s and Managers had access to information on the NMC standards and the mentorship module, provided by NMC website, line managers, other colleagues, Mentorcentre, PEF’s and Link Lecturers. There was awareness of the role of the SOM and preparation for role although limited detailed understanding of the SOM role in support of the mentor candidate.

Confusion in relation to the amount of time required to undertake the module in particular what was meant by the 5 days protected time and the 5 days unprotected time in practice.

Mentor candidates and SOM’s felt prepared for their roles following completion of their relevant preparation programmes.

However, difficulties in linking the principles of mentorship to practice with poor understanding of the role of the mentor in assessing students in practice using specific student assessment documentation.

Poor understanding and limited previous experience of using a portfolio as an assessment tool in module.

However there was some degree of support from Charge Nurse/ Mangers in the facilitation of 5 days unprotected protected time with SOM.

References
Nursing and Midwifery Council (2006;2008) Standards for Learning and Assessment on Practice London: NMC

Abstract
Benefits of undertaking the Module for Mentor Candidate SOMs and Managers
Increased personal knowledge of theories underpinning mentorship, learning and teaching in practice.

A holistic approach to student support & learning adopted using a more structured approach.

Increased linking of theory to practice and reflection on own practice, reaffirming of good practice and facilitating personal professional development.

Increased teamwork in practice to support and improve clinical learning environment and partnership working with HEI.

More mentors within clinical learning environment with which to support students share workload and enhance student learning environment.

Challenges of undertaking the Module for Mentor Candidate SOMs and Managers
Perceived high workload of the module for mentor candidate and motivating staff to undertake this even when linked to PDP and KSF.

Lack of engagement from some candidates on the module with the content who suggested that they were “sent” on the module and had not volunteered for this.

Lack of time to undertake the mentorship portfolio and difficulties in online learning skills for some candidates.

Lack of time in practice setting with frequent conflicts between the 5 days unprotected time and the workload of their role as an RN.

Limited understanding in practice of the SOM role in support and assessment of the mentor candidate and of assessing pre-registrations students and provision of time to undertake the role.

Time pressures and financial constraints for managers of release of staff to undertake the module.

Conclusion
A number of welcome developments since introduction of this new approach to mentorship preparation in the development of their knowledge and skills in the support of the student in practice. However, despite availability of information since 2006, there remains limited understanding of the requirements and structure of the NMC mentorship preparation course by mentor candidate, SOM’s and Managers in practice. Additionally, there is limited understanding of how the theories of mentorship can be applied to the clinical learning environment specifically major difficulties in undertaking assessment of the student/ mentor candidate in practice settings.

Recommendations
HEI’s should provide more information on the requirements of the module communicating this to Mentor candidates, SOM’s and Managers for use prior to application.

HEI’s should develop module content to include assessment in practice workshops and portfolio building / assessment workshops.

HEI’s should assist Managers / SOMs to facilitate of the module outcomes for mentor candidates during the 5 days unprotected time in practice, identifying approaches to apply theories of mentorship.

SOM’s / mentor candidates should ensure preparation for module and individual planning prior to commencing.

Clinical Managers / health organisations should plan the support of the mentor candidate in advance ensuring adequate resources available to allow achievement of outcomes.

Clinical Managers / health organisations should consider how the facilitation of learning and the application of the mentorship theories in practice can be achieved during the 5 days unprotected time.