An Evidence based discussion around the role of the ‘Sign off Mentor’ in supporting less experienced mentors and students in practice.

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The Sign off Mentor (SOM)

- The NMC 2006 introduced the role of the SOM
- The role facilitates the SOM to ‘sign off’ students that have attained the level of competency at final assessment of practice in order to achieve entry onto the nursing register
- The role seeks to ensure that student assessments are more robust and credible therefore increasing validity
- Helps to ensure that the newly qualified nurse is fit for practice and equipped for their new role
- Is required to undertake additional training and necessitates wider experience
Tripartite Relationship (Casey and Clark, 2012)

• The SOM is supervising both the mentor and the student – a three-tiered relationship exists between the student, placement mentor and SOM.
• Recognises that the relationship can be intense and complex.
• Acknowledges that the supervising SOM required support and that a collaborative approach is required.
• Identifies that the relationship will be viewed differently from all three members.
• Importance of reflection and discussion in maintaining standards.
• Requires Motivation.
Benefits

• Personal and job satisfaction
• Improved personal performance
• On-going professional development
• Greater levels of self awareness
• New knowledge and skills specific to the SOM – enhanced leadership and interpersonal skills
• Participating in and positively influencing the professional identity of mentors and students can be motivational – especially when you can identify a direct link between mentoring and excellence in practice
• Positive dynamic SOMs can influence the culture and uphold quality in practice and the broader ethos of nursing
• The SOM is ideally placed to provide the needs & requirements to influence student outcomes

(Morton-Cooper and Palmer, 2000)
The Challenges (Chandon and Watts, 2012)

- The role is complex with additional levels of accountability and responsibility with the SOM influencing both the mentor and student.
- Requires adequate support and training in order to be effective. Mentors can report a lack of support with little or no reduction in workload to accommodate the time required to mentor successfully.
- Inadequate mentor numbers, especially SOMs.
- Recruiting new members and ensuring standards are maintained.
- Risk of dilution as the role of the SOM is cascaded to the next generation.
- Degree programmes may have left some mentors feeling inadequate.
- Mentors can feel the additional role of mentoring and skills required are undervalued and go unrecognised by peers, management and local organisations.
Supporting the tripartite relationship
Mentors benefit from support in practice
(Hyatt et al 2008, Sharples et al 2007)

- Strong relationships between universities and clinical placements to maintain impetus and standards which result in a collaborative approach
- Link roles, practice education facilitators, PD teams and education leads
- Protected time and training opportunities
- Literature and research into the role of the SOM and its benefits, growth and requirements
In summary

- Should not be undertaken lightly and by those with a passion and interest in nurse education
- Necessary to research and investigate the extent of responsibilities and impact of the SOM if standards are to be maintained
- The resources, skills and professionalism of the SOM should not be underestimated
- Strong links between universities and clinical settings need to continue to be forged
- Studies to help identify if the role of the SOM should be a generic or specialist role (Robinson et al 2012) – the role of the mentor has evolved from ‘general guidance’ to formal assessment of competencies and proficiency
Thank you

Any Questions?