

Mentorship Impact for Advanced Practice Registered Nurses and Physician Assistants/Associates

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ABSTRACT

BACKGROUND

Advanced Practice Registered Nurses (APRNs) and Physician Assistants/Associates (PAs) are healthcare professionals who require experience, time, guidance, and skills to be successful. Mentorship has been identified as a critical component of success in medicine

OBJECTIVE

To provide insights into APRN and PA mentorship professionally and assess their personal satisfaction with their mentee-mentor relationship.

METHODS

A survey was sent via email to all APRNs/PAs at a single academic medical center (AMC) and its associated health system. The univariable analysis included Chi-square and Kruskal-Wallis tests to compare those with and without a mentor. The multivariable analysis determined if any selected factors were independent predictors of factors associated with mentorship.

RESULTS

The response rate was 32.4% (n = 934). 185 (19.8%) respondents identify having a mentor. Multivariable analysis shows those with a mentor are more likely to function as a mentor (OR 1.8 [1.2-2.7], p = .003), have an academic rank of assistant professor or higher (OR 2.9 [1.7-4.9], p = .001), be < 45 years old (OR 2.6 [1.6-4.2], p < .001), and be < 10 years into their career (OR 1.8 [1.2-2.8], p = .006). Those with a mentor are more likely to be satisfied with mentorship (84.3% vs. 25.1%, p < .001) and agree that mentorship was important for academic success (80.5% vs. 7.3%, p < .001) and attaining leadership positions (69.7% vs 48.2%, p < .001).

CONCLUSIONS

This study demonstrates that mentorship for APRNs and PAs is notable and can affect academic and career satisfaction. Future research may explore more profound organizational and professional benefits of mentorship among APRNs and PAs.

OBJECTIVES

PRIMARY AIM

To determine if APRNs/PAs employed at an AMC and its associated health system identify a mentor within their professional life and determine satisfaction and importance in their mentee-mentor relationship

Secondary AIMS

To determine if biodata and elements of employment or the presence of a mentorship program are factors that predict the presence, or lack thereof, of a mentor,

To determine if having a mentor is associated with having a leadership role or academic rank.

METHODS

A survey using 23-40 question electronic tool modified for APRNs/PAs was sent from June to August 2022 with subanalysis performed on the data by participant profession.

Statistical analysis included:

- Counts and percentages for categorical, median and IQR for continuous variables.
- Univariable analysis with Chi-square and Kruskal-Wallis tests to compare responses of those with and without a mentor.
- Multivariate logistical regression analysis determined independent predictors of factors associated with mentorship.

RESULTS: RESPONDENTS

The survey was sent to 2,854 individuals at our institution, of which 2,051 (71.9%) are APRNs and 803 (28.1%) PAs. A total of 934 completed the survey (response rate 32.7%). Respondents include 632 (67.7%) APRNs and 295 (31.6%) PAs. Respondents are distributed across the academic medical center and health system.

RESULTS: MENTORSHIP

Attitudes and Beliefs about Mentoring



QUESTIONS

Comparison of APRNs vs PAs

Variable (a, %)	APRN	PA	P value
Demographics	· · · · · · · · · · · · · · · · · · ·		
	N = 632	N = 295	
Gender/Gender Identity			
Man	81 (12.8)	73 (24.7)	+ 0.001
Woman	529 (83.7)	216 (73.2)	~ 0.001
Other/Choose Not to Disclose	22 (3.5)	6(2.1)	
Age			
18-24 years old	0 (0)	0 (0)	
25-34 years old	104 (16.5)	113 (38.3)	
35-44 years old	270 (42.7)	109 (36.9)	= 0.001
45-54 years old	165 (26.1)	50 (17.0)	
55+ years old	91 (14.4)	22 (7.5)	
Did not respond	2 (0.3)	1 (0.3)	
Primary Area of Clinical Practice			
Family Medicine	79 (12.5)	23 (7.8)	
Internal Medicine	73 (11.6)	54 (18.3)	
Surgical Specialty	204 (32.3)	101 (34.2)	→ 0.001
Medical Specialty	233 (36.9)	82 (27.8)	
Emergency Medicine	10 (1.6)	26 (8.8)	
Did not respend	33 (5.1)	9(3.1)	
Academic Rank			
Instructor	231 (36.6)	122 (41.4)	
Assistant Professor/Associate Professor/Professor	73 (11.6)	39 (13.2)	0.17
Does not hold Academic Rank	328 (51.9)	133 (45.1)	
Did not respond	0 (0)	1 (0.3)	
Current Full-Time Equivalency			
1.0	385 (60.9)	224 (75.9)	
0.8-0.99	172 (27.3)	45 (15.3)	= 0.001
0.55-0.79	47 (7.4)	15 (5.1)	- 0.001
Less than 0.55	24 (3.8)	8 (2.7)	
Did not respond	4 (0.6)	3 (1.0)	
Additional Formal Training Seyond APRNIPA Degree			
Yes	167 (26.5)	56 (19.0)	0.02
No	461 (72.9)	234 (79.3)	0.01
Did not respond	4 (0.6)	5 (1.7)	1



DISCUSSION

- No statistical difference between APRNs and PAs having a mentor.
- PAs are more likely to have a physician mentor, whereas APRNs are more likely to have an APRN mentor.
- APRNs and PAs are more likely to have a mentor when a division/department has a formal mentoring program.
- Those with a mentor are more likely to mentor others, hold academic rank and progress in rank, and believe that mentorship assisted with obtaining a leadership position.

CONCLUSIONS

- Mentorship for APRNs/PAs at our AMC and associated health system is notable and can affect academic and career satisfaction.
- · More research is needed to assess APRN and PA mentoring relationships, identify gaps, and formulate informal/formal mentoring to optimize career progression and satisfaction.

MATERIALS

References and Additional Materials

