



Editor's Note: Before you begin the exciting mentoring journey, consider your purpose and role as a mentor. It is not the same as orienting a new person and can hold many growth opportunities for you as well as your mentee.

The Difference between Orientation and Mentoring

Orientation

When a new employee is hired or transfers to a new department, he or she intentionally is scheduled for orientation for a set amount of time. This time usually includes time observing and working side-by-side a fellow healthcare professional — the preceptor. The purpose of orientation is to introduce the new hire to policies, procedures and the social milieu of the hospital and to ensure competency with skill sets so that safe and competent care is delivered. The completion of this process is key for success. The preceptor has many roles with the new hire that include being a role model, educator, socializer, friend and confidant. Preceptors model new skills, observe and help the new employee with these skills, and evaluate the new hire accomplishing these skills. For example, the preceptor will explain the policy on what is expected from this individual when there is a disaster drill. The preceptor will then demonstrate the task, such as where to find the needed equipment and observe the new employee with this process, evaluating his or her competency to do this task independently. Orienting usually involves an intense time commitment and has well-defined outcomes. The formal orientation relationship ends with the completion of orientation, although the relationship may continue.

Mentoring

Ideally after the employee completes orientation, he or she will be mentored. Experienced employees can also benefit from being mentored. Mentoring may be a formal or informal process that works best when it is intentional. The purpose of mentoring is to encourage, support and guide employees in their positions so that they will continue to grow personally and professionally. Mentors are coaches, advisors, friends, cheerleaders and counselors. Mentors are not responsible for the day-to-day activities of the employee or for solving problems. Mentors do not evaluate the mentee and should have no direct link to the mentee's supervisor. Mentors generally do not teach specific position-related skills or tasks. Mentors offer a non-judgmental listening ear for the mentee. Depending on what the mentee needs and desires, the mentor may help with continued socialization within the institution, communication issues, career goals and problem solving. Through their own experiences and expertise, mentors can help the mentee determine what steps to take and appropriate resources. The mentoring relationship is built on trust and is confidential. A formal mentoring relationship is usually time-limited, anywhere from six months to a year; however, some mentoring relationships become life-long.

This reference manual is called the Healthcare Mentoring Toolkit. Its purpose is to enable mentors to develop an effective and meaningful relationship with their mentees.