Mentoring and Coaching
A Model Guiding Professional Nurses to Executive Success

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Although many nurses aspire to executive positions, they lack the knowledge, support, and guidance to handle the challenges. To succeed at the executive level, ongoing deliberate skill development coupled with support is crucial across a nurse’s career trajectory. This article introduces a model emphasizing the importance of mentoring and/or coaching for the aspiring executive nurse leader.

The healthcare environment has changed dramatically over recent decades, heightened by advances in technology, regulatory constraints, and financial pressures. The role of the nurse executive (NE) has become increasingly complex and demanding. Contract management, negotiation prowess, financial proficiency, and an aptitude in healthcare economics are among the new skills NEs are expected to possess. Recognizing these expectations, the American Organization of Nurse Executives recommends 5 areas for nurse leader competence: communication and relationship building, knowledge of the healthcare environment, leadership skills, professionalism, and business skills.1 The Future of Nursing report2 includes recommendations including advancing education to prepare nurses for critical new roles in leadership across the healthcare system.

Advancing to Nurse Executive Roles

The NE is integral to operational and strategic leadership in most healthcare organizations. Candidates who aspire to NE roles should also be strategic in their career development in preparation for these complex challenges. Leadership competencies should be identified through a variety of assessment mechanisms including self-reflection and addressed in a systematic plan. A career coach and appropriate mentors should be identified to provide expert guidance in professional development on the path to NE practice. In reality, many nurses find themselves in executive leadership positions by default or in a nonlinear career pathway. Frequently, nurses are asked to consider promotions or interim roles based on a combination of prior excellent clinical performance and appropriate educational credentialing. A recent study found that 79% of healthcare organizations do not include succession planning in their strategic plan.3 With succession planning lacking, the tendency may be to quickly promote the most senior nurse in the organization, whether or not that person has executive role potential. Failure in these roles can lead to negative outcomes for patient care, the nursing workforce, and ultimately disillusionment of good potential leadership candidates.

Nurse Executive Turnover

Successful NEs are able to translate and apply previous leadership and management experience and competencies to larger-scale decisions. Balancing evolving financial and regulatory constraints, creating a culture...
of effective communication and collaborative practice, expanding knowledge of the healthcare environment, and advancing business skills are ongoing and current challenges for the NE. Turnover among NEs is expected to reach 60% in the coming years for reasons including stress in the changing healthcare landscape, conflict with the chief executive officer, involuntary resignation, and transitioning to new roles. In addition, NEs are aging along with the general nursing population, with the average age being 56 years. Enculturation of new and potential NEs through executive coaching and a formal mentoring initiative should be considered an essential component of a development plan.

**Essential Skills**

Skills needed for success in an NE role differ from those needed for other roles in nursing. The accountabilities related to quality outcomes are an example of this difference. Staff nurses directly impact quality outcomes by providing care for patients in accordance with evidence-based guidelines, policies, and protocols. Nurse managers operationalize organizational strategy at the department level to develop systems and processes to improve outcomes supporting goals. Nurse executives develop a vision for outcomes in accordance with organizational strategy and provide guidance and resources for groups of nurse leaders, staff nurses, and others to move toward the vision. Skills needed for each of these essential roles in addressing quality are varied in terms of scope, approach, and leadership capacity but all performed by nurses.

Interviews by Kirk with successful NEs identified 12 factors contributing to overall success. Factors include having a vision, effective communication and collaboration, influence and knowledge, courage, political awareness, outcomes, managing quality and people, providing nurses with the right tools, and having business acumen. Kirk contends that proficiency requires enlisting the support of others. Critical skills can be reinforced through repetitive, ongoing experiences, deliberate reflection, and the opportunity for guidance from a leader who has demonstrated successful competence in a similar position. Components of each of these should be addressed in advanced academic curricula, while reinforcement in the workplace is required for skill mastery. The authors of this article suggest that understanding and practicing the skills needed to succeed as an NE can best be accomplished with the support of a mentor and/or an executive coach.

**Mentoring and Coaching**

Coaching and mentoring are often used interchangeably. In the following section, the authors distinguish these roles and suggest how each, alone or together, can support the successful professional development of an NE. Each role is different, has different values, and provides a nurse leader with specific benefits, advantages, and levels of support.

**Mentoring**

To help others succeed requires not just telling them what to do, but also showing them. Aspiring NEs should be shown the way by someone who has previously demonstrated success. Support from a mentor can be invaluable. Mentors are typically seasoned professionals who share experience and expertise and promote career development. For the nurse manager aspiring to an executive role (mentee), the mentor may be a successful, established NE. The mentor supports the career aims of the NE by suggesting projects or positions in the organization that would provide the mentee with the opportunity to develop skills and experience needed to prepare for an executive position. A mentor may suggest leadership development workshops deemed helpful to strengthen identified needs. Through sharing personal stories, mentors provide case studies for mentees for discussion and reflection. Mentors serve as role models for mentees and help them avoid mistakes the mentors may have made.

A nurse's story (see Document, Supplemental Digital Content 1, [http://links.lww.com/JONA/A136](http://links.lww.com/JONA/A136)) offers an example of a nurse leader trying to advance to an executive level in a health system. In this example, was the chief NE (CNE) acting as a mentor as well as an employer to Grace? Did the CNE have the expertise to identify system-level skills and expertise Grace needed? Did Grace consider the CNE as a mentor? Did the CNE block Grace’s promotion to fulfill current initiatives? Did the CNE understand the value of guiding her employees and providing them with opportunities to develop skills needed for advancement? These are examples of questions that must be explored in these situations to increase motivation and understanding.

Studies indicate that effective mentoring relationships have 3 necessary characteristics. The 1st is a well-defined purpose that consists of helping the mentee to acquire both the necessary competencies for the position as well as pertinent work relationships for their chosen career path. The 2nd is the development of a collaborative learning relationship in which mentors are committed to share knowledge, and mentees are committed to learn from them. Third is the recognition that the mentor-mentee relationship develops over time, evolves through phases, and is more than a casual relationship. A nurse's story (see Document, Supplemental Digital Content 1, [http://links.lww.com/JONA/A136](http://links.lww.com/JONA/A136)) illustrates the need...
for effective mentoring of promising junior-level employees, who can be vital to the future success of an organization. The outcome of the story could have significantly changed if Grace had received adequate mentoring from an individual who had clearly accepted the role as mentor.

Coaching

Executive coaching is another distinct form of support that can be beneficial in helping people reach and succeed toward their career goals. Coaching is “partnering with clients in a thought-provoking and creative process that inspires them to maximize their personal and professional potential.”11(para 11) The Sherpa executive coaching process defines executive coaching as “a personal and frequent one-on-one meeting designed to produce specific, positive changes in business behavior within a fixed time frame.”12(p1)

The role of the coach differs from that of a mentor because normally the coach does not offer advice, opinions, or solutions or share much about his/her experiences. In contrast, the focus of the coach is upon the client. Upon determining the needs of a particular client, a coach will design a customized approach to meet those specific needs. By listening intently and asking probing, provocative questions, the coach can act as a conduit for evoking change and growth in the behaviors required for the client’s goals. A coach will work with a client to identify behavioral strengths and areas for development while devising strategies to use those behaviors in dealing with challenging situations. The coach assists the client in developing and practicing leadership, communication, and interpersonal skills, necessary for career success. An additional, important role of the coach is that of serving as an accountability partner. In a coaching relationship, it is critical to execute relevant action steps with goals and accountabilities identified. Professionals who enlist the support of both a mentor and coach benefit from the synergy created when everyone is moving in the same direction and the skills of both approaches are synthesized. Ideally, a mentee will benefit from a cohort of mentors and coaches over time from inside and outside the mentee’s organization throughout his/her career.10

There are advantages and disadvantages from having a coach or mentor from both inside and outside the organization or work unit. An internal professional coach employed by the organization or a senior employee functioning as a mentor may have a better understanding of personnel issues, management styles, and culture present inside the organization. It is important to be aware of potential conflicts of interest inherent in this situation. Objectivity is a benefit of working with a coach and a mentor outside an organization. In either case, support in the form of a coach and/or mentor who understands the values, goals, and culture of the organization is key to adequately supporting the professional advancement of the mentee/client.13 Table 1 offers a comparison of advantages and disadvantages to internal and external support in both mentoring and coaching roles.

Seeking support early in the process of career development is a critical step. Chin14 describes a support system for career advancement in which preceptors, professional clinical supervisors, coaches, and mentors assist individuals in establishing a connection between theory and practice to develop self-awareness. A

Table 1. Advantages and Disadvantages of Mentors and Coaches Inside and Outside an Organization

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<tr>
<th>Advantages of Mentors and Coaches Inside an Organization</th>
<th>Advantages of Mentors and Coaches Outside an Organization</th>
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<tbody>
<tr>
<td>Helps client overcome organization-specific hurdles</td>
<td>Provides objective general advice about skills needed to succeed at the executive level</td>
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<tr>
<td>Helps client recognize and adapt to the cultural and political atmosphere</td>
<td>Introduces client to influential colleagues outside the organization</td>
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<tr>
<td>Identifies and introduces client to key contacts in the organization</td>
<td>Is a source of novel ideas and approaches not currently part of the client’s organizational culture</td>
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<tr>
<td>Uses a consistent process or approach</td>
<td>Can be selected among a larger pool for specific needs of the client</td>
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<th>Disadvantages of Mentors and Coaches Inside an Organization</th>
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<tbody>
<tr>
<td>Can be a conflict of interest if client reports directly or indirectly to the mentor/coach</td>
<td>May not understand the particular cultural and political atmosphere of the organization</td>
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<tr>
<td>Finding a sufficient number of trained mentors and coaches willing to function in this capacity Perpetuate the status quo</td>
<td>May not be as committed to a formal mentoring/coaching program of the client’s organization</td>
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<td></td>
<td>May not understand the complexity of the organization</td>
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recent study illustrated the benefit of adding one-on-one executive coaching sessions to a leadership symposium series in the professional development of a group of new nursing academic administrators. The report demonstrated how a coach can reinforce skills learned through structured professional development activities.

Who Is More Effective—A Mentor or a Coach?

The authors propose that aspiring NEs should work with both a mentor(s) and a coach. Whereas the mentors provide specific advice and opinions about actions to take and skills to develop, the coach works with the nurse to put that advice into action. A coach may be more available to a mentee than a busy mentor because being a mentor may be a role above and beyond normal responsibilities.

A Model for Success

The authors developed a model that incorporates key elements from the literature required for nurses who aspire to an executive position. The trimodel for executive success (Figure 1) represents a 3-phased approach including support from preceptors, mentors, and/or coaches for nurses to advance to an executive level. In phase 1, the novice nurse gains additional knowledge through oversight by a clinical preceptor. This precept is supported by numerous studies including the work of Aaron and Giallonardo et al.

In phase 2, knowledge is expanded through experiential learning in an environment that is supported by a mentor and/or coach. This concept is supported by the work of Gorringe and Baillie. In the final phase, personal experiences and advanced system-thinking skills are supported by an executive mentor and/or coach. This component is supported by Brinkert and Lyttle.

The Table in Supplemental Digital Content 2, http://links.lww.com/JONA/A137, provides definitions for concepts presented in the model (Figure 1). Phase 1 describes the period immediately after a nurse graduates from a nursing program. New graduate nurses are usually assigned a preceptor who assists in applying academic knowledge to clinical practice. The authors believe key to this phase is the nurse’s ability to validate existing knowledge, improve skill development, and gain confidence. During phase 2 of professional growth, nurses achieve a higher level of knowledge through experiential learning. This type of learning requires purposeful attention to practice to further develop and acquire additional skills within an environment supporting growth. During this phase, support shifts from a preceptor’s oversight to the role of a mentor and/or coach. In this phase, the mentor and/or coach consciously guides the nurse to reflect on current and past situations in the context of the environment in which the events occurred and to assess the positive and negative impact of the experiences. It has been suggested that relating and reflecting on experiences are necessary for experiential learning.

Key to successfully advancing to an executive level is an understanding of the current environment and culture. In a nurse's story (see Document, Supplemental Digital Content 1, http://links.lww.com/JONA/A136), one would ask, “Was Grace supported in a manner to develop the skills needed by an NE at a system-level position?”

In phase 3 of professional growth, the midlevel nurse manager can transition successfully to an executive level by using advanced-level system thinking blending experiences in an environment supported by an executive coach and/or mentor. Seeing the larger picture, understanding how interrelationships between situations, people, departments, and time frames impact the overall success of an organization, is an expectation of an executive leader. Executive mentors and/or coaches can support this transition by helping nurses reflect on their personal experiences; evaluate their skills, behavior, and performance; and help determine how they are perceived by others. Did Grace and the CNE reflect on the various systems-level interactions Grace had while working on corporate office initiatives? How could the CNE have guided Grace in assessing what others may have perceived as her weaknesses and need for further mentoring and experience? Was the CNE an appropriate mentor for Grace? How could an executive coach have helped to bridge any gaps?

In order for mentors and coaches to fully assist nurses to executive success, they need to understand other key factors that may influence the individual’s ability to succeed. Figure 2 illustrates the interconnection of these factors. By visualizing an inverted triangle superimposed on Figure 1, 3 new triangles are
formed reflecting 3 core concepts: (a) person, (b) ability, and (c) support. The person triangle synthesizes the uniqueness of the individual in the context of the environment in which they are employed. This core concept requires an individual to grow through a variety of experiences and situations.

The ability triangle represents how wisdom emerges as basic fundamental knowledge is supplemented with experiential learning and, ultimately, advanced system thinking. Overall success is achieved when the person and ability are supported through each phase by the appropriate support personnel. Although continued learning and skill development may be generally accepted as necessary to professional advancement and success, the value of formal and informal support is often overlooked. Traditionally, a preceptor is assigned upon entering the nursing profession. The 3 core concepts in this model create the foundational platform supporting professional advancement. The concepts are interdependent in the transition through each phase of the model. Ultimately, when nurses reach the outermost triangle, they are successfully advancing to an executive position (Figure 3).

Although this model was designed to describe the successful advancement of nurses to an executive level, the model is applicable to other professions.

**Conclusion**

In today’s world, NEs need to be strong leaders while preparing the next generation to succeed us. Using a framework illustrating how mentors and/or coaches can support aspiring nurse leaders to create a succession plans supports organizational success. Nurses at all career stages should have strategic professional plans if they aspire to transition to NE roles. Mentoring and coaching relationships can be beneficial for this transition as well as other career progression among nurses. The authors suggest that mentoring and coaching are critical components to the success of the NE. This article introduces a model that outlines 3 key phases that mentors and coaches can use to guide nurses to executive positions. Further research is being designed to further validate each phase and test the model (Figure 2). As the healthcare environment becomes more complex and thus places more demands on nursing leaders, evidence is needed to support the best methods for preparing and developing nurse leaders to become future NEs. If nurses are going to lead the redesign of the healthcare system and demonstrate the value we bring to the quality healthcare, nurses cannot afford to delay efforts that will support the development of competencies and skills necessary to lead and succeed.

**References**


