

## **Evaluation of the ADEA Mentoring Program**

### **Introduction**

Credentialed Diabetes Educators in Australia must participate in and complete a six month mentoring program as part of the Australian Diabetes Educators Association (ADEA) credentialling pathway. The ADEA mentoring program underwent changes in 2014 and has previously not been formally evaluated. Current literature provides evaluation techniques and outcomes for many professional mentoring programs, however these evaluations have been mainly qualitative evaluations on small numbers of voluntary participants and do not extend to the evaluation of a formal mentoring program for diabetes educators.

### **Aim**

The aim of this project was to evaluate the ADEA mentoring program and provide recommendations for the future of the program.

### ***Objectives***

The objectives of this project were to:

- Measure the satisfaction of the ADEA mentoring program participants.
- Ascertain any difference to the satisfaction of the ADEA mentoring program following the changes to the program in 2014.
- Explore best practice mentoring programs to develop recommendations for the ADEA mentoring program in the future.
- Recommend directions and changes for future mentoring programmes based on project findings.

### **Method**

A mixed methods action research approach was used to evaluate the ADEA mentoring program. Consent was obtained from the ADEA to use pre-collected questionnaire data and from the Curtin Human Research Ethics Office to undertake the project. The secondary

data from ADEA were analysed using descriptive statistics and thematic analysis. Semi-structured in-depth interviews were also conducted with participants of the mentoring program and analysed using thematic analysis.

## **Results**

Data from 476 questionnaires were analysed and 13 semi-structured in-depth interviews were conducted. Quantitative and qualitative results showed very high satisfaction of the mentoring program. Benefits were experienced by both mentors and mentees. Comparison of results before the changes to the program and after the changes did not differ greatly, however some aspects did improve slightly such as the number of mentor registrants, time taken to complete the mentoring partnership and credentialling program, and the satisfaction of the ADEA support from staff and resources. Qualitative data provided suggestions for the future of the mentoring program, including review and development of resources.

## **Conclusion**

Structured mentoring is valued by mentoring participants, however it is preferential that mentees and mentors choose their mentoring partner.

Results of the data analysis compared features of participants and mentoring partnerships, and along with review of current literature, has assisted in developing key criteria for successful mentoring.

The project has addressed gaps in current literature for the evaluation of a mentoring program for diabetes educators. Recommendations for evaluation technique and the components of mentoring programs for improved outcomes have been made. These recommendations may be applicable for all mentoring programs and partnerships.

## **Key words**

Mentoring, evaluation, satisfaction, diabetes educators, best practice, ADEA.

## ***Recommendations***

The results of this project are supported by the literature and therefore may be transferable to other organisations who are setting up a mentoring program or developing an evaluation and improvement process for an existing mentoring program. The recommendations resulting from this research project are listed below.

- 1- The ADEA mentoring program should continue as a compulsory part of the initial credentialling pathway for CDEs in Australia. The program benefits both mentees and mentors and is highly regarded by participants.
- 2- The changes made to the ADEA mentoring program in 2014 should continue. There have been improved outcomes for some aspects of the program.
- 3- Promotion of the mentoring program should occur to encourage CDEs to continue in mentoring partnerships throughout their professional careers, both as mentees and mentors. Mentoring is regarded as an essential part of career progression and personal growth.
- 4- Online resources should be developed or improved to better support the mentoring experience. Suggestions include:
  - Provide the ability to complete forms / paperwork online.
  - Ensure the online platform is easy to find on the ADEA website.
  - Develop and provide succinct flowcharts and diagrams to define the mentoring partnership process and structure.
  - Develop and implement guidelines for recommended contact requirements to assist in planning of participant's time that are able to be individualised for each partnership.

- Develop and implement guidelines and templates for goal setting, mentoring activities and recommended outcomes of mentoring that are able to be individualised by each mentoring program participant.
  - Revise existing mentoring resources and/or develop new resources that are inspiring and motivating, to assist in providing all mentoring program participants with awareness of mentoring benefits.
5. Provide training for mentors and mentees that includes:
- The benefits of mentoring and being mentored throughout the career path.
  - Developing open and trusting communication between mentors and mentees so that both parties feel comfortable and confident in communication, particularly providing constructive criticism.
  - Mentoring by distance and across health disciplines - how to build rapport through sharing and 'meeting' face to face (using technology).
6. For mentees who are looking for mentors using the ADEA website, provide adequate information so an informed choice can be made regarding suitability of mentee and mentor.
7. Continue to evaluate the ADEA mentoring program. Revise the evaluation questionnaire to ensure relevance to the ADEA and mentoring participants. Evaluation should involve mixed methods action research to monitor outcomes and be able to attribute outcomes to the mentoring program. Using an online system for data collection (as per 'Recommendation 1.')