“Improving Skills for Workplace Practice through Mentoring Student Reminiscence Workers in Care Homes”

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Paper presented at the British Educational Research Association Annual Conference, University of Warwick, 1-4 September 2010

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Work in progress
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Abstract

In the current national climate of potential funding cuts within the adult learning sector, it has become more important than ever to demonstrate the effectiveness of vocational learning programmes. Based within a local authority adult community learning organisation serving the county of Norfolk, UK, this action research project was aimed at increasing the impact of reminiscence training for care workers. At the end of a classroom based course, students were provided with a mentor to assist them in turning their theoretical knowledge into practical skills which could be used to increase the well-being of older people living in residential homes.

Six experienced reminiscence workers were trained as mentors before working alongside one or two assigned mentees for four sessions of up to ninety minutes each. After the intervention, semi-structured interviews were used to explore the content and impact of the mentoring intervention. Interviews were recorded and transcribed, and the transcripts analysed through thematic coding. The findings of the research included an increase in confidence and competence in care workers’ ability to turn theory into practice by organising reminiscence activities which were enjoyed by the older people in their care. Furthermore, the findings suggested that there is no one model of mentoring which could be said to be effective in this situation, but that flexibility and responsiveness to the needs of the individual student are the most useful skills in this kind of mentoring. The elements of mentoring which made it effective were identified and incorporated into a reminiscence training package which will hopefully increase the ability of care workers to run reminiscence sessions, ultimately promoting the well-being of older people in their care.

The report concludes with a number of outcomes of the research project, including the intention to continue the reminiscence mentoring scheme, supplemented by an online reminiscence resource which will enable students to continue developing their skills by keeping in touch and sharing ideas with, other reminiscence workers. This online resource is based on the idea of a ‘community of practice’ and ‘joint practice development’ (Fielding et al, 2005).
**Introduction**

Norfolk Adult Education’s Older People’s Team trains care workers to carry out reminiscence activities with older people living in residential homes with the aim of improving the quality of life of frail older people. This research was led by the principal reminiscence trainer within the organisation and was aimed at exploring ways of increasing the impact of the department’s training.

Reminiscence is a social and creative activity often used with older people of all abilities. It involves using multi-sensory triggers (usually items of memorabilia from the 1930s to 1950s) to facilitate discussion and activities which relate to past events in the lives of older people. In a review of more than one hundred published articles on reminiscence, Haight (1991) concluded that the majority recognised reminiscing as providing a variety of therapeutic benefits to older people. These included increases in self-esteem, self-perceived quality of life and happiness, and reductions in symptoms of depression. Woods *et al* (2005) in a meta-analysis of reminiscence studies involving 144 participants with dementia found statistically and clinically significant improvements in cognition, mood and general behaviour functions. Improvements were also found in measures of caregiver strain and staff knowledge and understanding of those for whom they cared.

Reminiscence students to date have attended a part-time six week course with the local adult education service, following which, according to their feedback, they have felt motivated and enthused about the benefits of reminiscence for their clients. However, they have had difficulty putting their skills into practice after the course. As a result, staff within the Older People’s Team felt that it would be useful to carry out a research project to explore the use of workplace mentoring and its role in increasing the extent to which students apply their new skills. The team believed that lack of confidence and practical barriers in the workplace were the main reasons for this problem, and although we had not researched these difficulties in detail, our understanding of mentoring meant that we were hopeful that giving learners support in the workplace would increase their confidence and the extent to which they were able to use their new reminiscence skills. This research project was therefore carried out to explore the effects of mentoring partnerships on the impact of training.

The research aim was to explore an approach to reminiscence training which would improve the impact of the six week classroom based learning within the workplace. Having some knowledge of mentoring within teacher training and social work education I developed the idea that mentoring partnerships might assist our students in putting the theoretical ideas from the course into practice. I therefore decided to train the team’s experienced reminiscence workers to work alongside newly qualified students to facilitate greater implementation of reminiscence skills in the workplace. This is an approach advocated by Topping *et al* (1998, p.48) who define mentoring as ‘a supportive one-to-one relationship focused on educational, professional or
vocational issues with someone who has greater age or experience or achievement in the same field’.

The research objectives were to identify successful factors and processes in reminiscence mentoring in order to design a reminiscence training programme which incorporates these successful factors in post-training mentoring.

At the outset, we were hopeful that outcomes of this research would include a more effective reminiscence training programme, opportunities to contribute to service wide policies on mentoring, and continued funding for our reminiscence training programme. Similarly, we were hopeful for soft outcomes such as opening up the senior management of our organisation to new ideas for practice, opening up spaces for dialogue between tutors and managers, and bringing about changes in self-image and increased confidence for care workers who were in the process of becoming reminiscence workers.

**Literature Review**

The literature explored as part of this project included an attempt to identify mentoring research carried out in allied disciplines (that is, health and social care related fields) as well as seeking to understand the key debates within mentoring research as a whole. There appeared to be a significant amount of discussion about the effectiveness and impact of mentoring, as well as about new ways of approaching the mentoring relationship in view of advances in technology.

A review of recent literature indicated that a number of studies had taken place which explored the effectiveness of mentoring in a variety of settings. Ehrich *et al* (2003) described how they had undertaken a literature review on the effectiveness of mentoring in medical, educational and business contexts, while Gray and Smith (2000) and Andrews and Chilton (2000) each explored the effectiveness of mentoring partnerships in nursing settings. Dunham-Taylor *et al* (2008) found that mentoring protects against burn-out and early resignations amongst newly qualified nurses, whilst Webb and Shakespeare (2008) noted a wide range of beneficial effects of mentoring in a similar setting. However, a search for past research on the effectiveness of mentoring of care workers in residential homes revealed only one Australian-based study, which focused on the effect of mentoring-type relationships located outside of the workplace on the stress experienced by care staff working with older people (Sanchez and Ferrari, 2005). These authors found that the presence of a mentor-type figure in the lives of care staff decreased care-giver stress and increased the enjoyment they gained from their work. A search of a number of electronic databases revealed no previous studies on the use of mentoring in training care staff in reminiscence skills. This increased my sense of the necessity of the current study.
Of other studies reviewed, some focused on the perspective of protégés (for example Eby et al, 2000) while others were more concerned about the effect of being a mentor on those undertaking this role. For example, Parise and Forret (2008) explored how mentors perceived the costs and benefits of mentoring, while Lopez-Real and Kwan (2005) found that the majority of mentors benefitted professionally from their role, through both self-reflection and mutual collaboration with their protégés. The relationship between mentor and mentee was often seen as being of primary importance to the success of mentoring relationships. For instance, Wang et al (2009) considered the role of attachment styles in mentoring experiences. Together, these studies pointed towards the importance of gaining the perspective of both mentors and mentees in the current study.

A range of recent literature explores the use of on-line mentoring. Murphy et al (2005) analysed the characteristics of online discussion messages between mentors and their protégés, while Shrestha et al (2009) found commonalities between face-to-face and e-mentoring, including some benefits of e-mentoring over face-to-face contact. Likewise, Wei and Chen (2006) found that as well as overcoming the limits of time and distance, online text-based discussion forums were an effective means of collaborative sharing. Before undertaking this literature review, online mentoring was not an approach I had considered for improving the implementation of reminiscence skills. However, the evidence for its effectiveness, paired with the fact that it overcomes difficulties such as finding times and venues for mentoring meetings, suggested that it might present a useful follow-up to the face-to-face form of mentoring.

**Research Method**

The first stage of this research began in October 2009 and involved getting in touch with past students to find out more about the difficulties they had had in putting reminiscence into practice in the workplace. These interviews took place by telephone, and were recorded and transcribed for analysis. Having established what in effect was a baseline for the research, that is, a record of the pre-research intervention situation, I was able to move on to the second phase. Six experienced reminiscence workers, who were already employed by Norfolk Adult Education Service as reminiscence tutors, were given a three hour training session on skills needed for mentoring new reminiscence workers. The emphasis of this training was on the mentor’s role in establishing rapport with the mentee, encouraging goal setting, facilitating problem solving and building the mentee’s confidence.

Each mentor was allocated one or two mentees from nine volunteers who had just finished their six week reminiscence training. All 24 students who were at that time doing the reminiscence training had been provided with information on the mentoring research, and been invited to take part (see Appendix 1 for Information Sheet and Consent Form). Nine had volunteered and had returned consent forms. Pairing of mentors and mentees was done largely on the basis of the area of Norfolk in which
mentors and mentees lived, in an effort to reduce the cost of travel. Mentors were asked to make contact with mentees and to arrange a time for the first meeting.

All mentors and mentees were asked to keep a reflective diary of each of their meetings, the purpose of which was to enable the researcher to gain an early impression of how the mentoring partnerships were working, and also to ensure that a degree of supervision of mentors was taking place.

After four meetings had taken place between the mentoring pairs, I carried out recorded telephone interviews with all mentors and mentees, asking standardised questions of each (see Appendix 2 for the questions asked of mentors and mentees). These interviews were then transcribed and the data analysed by thematic coding through repeated readings of the transcripts.

Semi-structured interviews were chosen as the principal means of gathering data, as it was felt that this would be an effective way of exploring how mentors and mentees felt about their experiences of mentoring. Although it could be argued that telephone interviews might be more problematic than face-to-face interviews in terms of gathering in-depth data which truly reflects the feelings of participants, it could equally be argued that some people may find it easier to speak ‘from the heart’ when placed at a distance from the interviewer. Nonetheless, the main reason for choosing telephone interviews actually related to its practical ease, as there were difficulties finding times and venues where face-to-face meetings could take place, as well as the fact that participants were spread over a large geographical area.

After initial coding and analysis of the transcribed interview data, a meeting took place between the researcher and the mentors, together with the Older People’s Team manager, to explore their responses to the findings. This was aimed at achieving a degree of respondent validation and also in the hope that themes could be further refined in the light of their feedback.

The entire research project took place over a six month period, as shown in Box 1.

**Box 1 - Research Timeline**

October 2009 – past students contacted and six recorded telephone interviews carried out to establish a baseline. Initial review of the literature on mentoring.

November 2009 – present students informed about the research. Mentors recruited and trained.

November to December 2009 – each mentor met their mentee/s four times for up to 90 minutes each time.
Box 1 cont.

January 2010 – recorded telephone interviews with 6 mentors and 9 mentees to find out their experiences of mentoring

January – March 2010 – data analysis and writing up of research

March 2010 – meeting to share initial findings with mentors. Further review of the literature on mentoring in order to compare the results with the findings of others.

March 2010 onwards – dissemination of results

Results

The results are shown in three parts. Firstly, the findings from the six interviews with past students are presented, establishing the pre-intervention baseline. This consists of findings about factors which made it possible to implement reminiscence in the workplace following training, as well as factors which made it difficult to put skills into practice. Secondly, the findings from the diaries of, and interviews with, mentees are presented, illustrating the main points which were made. Lastly, the main categories of thematic analysis from both mentors’ and mentees’ interviews are presented, demonstrating how the main conclusions were reached from the data.

Findings from Interviews with past students:

As thirty letters were sent out, and only six students contacted the researcher, it is possible that the circumstances of those who responded differed in some way from those who didn’t. For example, they may have had more interest in using their reminiscence skills, or they may have had more free time in which to make the call. This data was therefore limited, but pointed towards some of the factors we needed to incorporate into the mentoring process to help students put their skills into practice.

Responses from past students indicated that reminiscence was easiest to implement where the student felt confident about their reminiscence skills and their ability to put them into practice; where they were able to communicate with their managers and colleagues about the benefits of reminiscence to their clients; and where they had good relationships with managers, colleagues and residents’ relatives, as well as with the residents themselves. Furthermore, it was apparent that where there were other trained reminiscence workers in the workplace from whom they could seek advice, past students felt more confident and able to apply their skills.
Some past students found that reminiscence was difficult to implement where there was persistent negative criticism or lack of understanding from colleagues. This included the idea that they were not doing ‘proper work’ when carrying out reminiscence activities. This was due partly to the heavy workload of care workers in terms of providing physical care for their residents and the need in a care setting for all staff to work together in ensuring that residents are kept clean, fed and toileted: “They thought it was an excuse for not doing my fair share. I had no support at all” (P3). In other cases, colleagues suggested that talking about the past was not a useful or meaningful activity for older people, and couldn’t see how it would benefit residents: “Some of the staff had the opinion that that’s all in the past and should be left in the past” (P6). This lack of support extended to managers in some cases, with some managers being indifferent to whether reminiscence activities took place or not: “The managers and care co-ordinators are so busy there is no time for these things” (P2).

Other students felt that they lacked the confidence to run reminiscence activities without support and this may have exacerbated situations where their peers and managers were unsupportive: “I think to begin with it would have helped to have had support - I was so nervous” (P4). In addition, some students did not know how to access appropriate resources or were unsure of what to do in certain situations, such as when a resident showed distress: “It would be nice to have a back up… To say ‘Help! What do I do now?’” (P4).

This data was used to inform the planned mentoring intervention. In particular, it was thought important to assist students in developing confidence, practical reminiscence skills and communication with colleagues.

**Analysis of data from mentees’ diaries**

Data gathered from mentees’ diaries consisted largely of factual descriptions of what took place in mentoring sessions, rather than reflective accounts of thoughts and feelings. This may have reflected a lack of confidence about expressing themselves through the written word. Examples from diaries include the following:

- [my mentor] asked how I was getting on with the reminiscence. I said that I had some success with a lady who can’t speak by singing hymns to her. [The resident] turned and looked at me and kept eye contact throughout the song. (S1)

- I have now had two visits from [my mentor]. In the first visit we talked about one-to-one reminiscence work which is something I really want to do with the residents. (S2)

- Met with [my mentor] at my place of work. She watched and joined in with a session with three residents. (S3)
Such diary entries were useful in indicating what kind of interactions were taking place between mentors and mentees. This meant that I could take a supervisory role over mentors and be sure that their interventions were relevant and useful, whilst not actually interfering with the mentoring relationship. It also enabled me to confirm that mentors were following their training in that they were responding flexibly to the individual needs of mentees.

Where thoughts and feelings were mentioned, the mentees expressed concern about their competence and confidence. For example:

- *My problem is thinking of things to do which are fresh and good ideas.* (S3)

- *I explained to [my mentor] that my biggest worry is what happens if nobody says anything.* (S1)

Only three mentees provided diaries, the others stating that they didn’t like writing or that they didn’t have the time. This meant that data from mentees’ diaries was limited in scope. The difficulty in finding time to carry out project activities reflects the pressure under which care staff work, and is also indicative of one of the factors which may prevent students from putting their skills into practice – shortages of time and resources within the workplace. It also reflects the lack of confidence care workers may feel in terms of being assertive enough to make time. A dislike of writing may similarly indicate low self-confidence.

However, all mentees agreed to be interviewed at the end of the four sessions. During these interviews, eight out of the nine mentees commented that the mentoring experience had helped to increase their confidence:

“*[Being mentored] made it seem more logical and just also to know that I was doing the right thing, which gave me a lot of self-confidence and a boost to keep going forward.*” (S3)

“*Although I felt nervous that I was doing things wrong ... she made me feel like more confident to do another session.*” (S7)

This increase in confidence was an important finding as it indicated that some of our initial expectations of the mentoring intervention were fulfilled. Increasing confidence could be attributed in part to the role mentors played in improving mentees’ abilities to run reminiscence sessions competently and to communicate with their clients. This included practical help given with identifying relevant multisensory triggers:

“*I found that I could go more into depth with [the residents] ... I was amazed what I got out of them.*” (S6)
“She gave us some points to like improve on the reminiscence. She gave us information and brought things in for us.” (S8)

“She took our ideas on board and then expanded them” (S4)

Despite these indicators of the usefulness of the mentoring intervention, one of the nine mentees could not see any benefits to being mentored:

“It was just a nice experience but no particular benefit” (S9)

It is difficult to identify why mentoring was not particularly useful to this one participant, but it is worth noting that mentoring relationships do depend to some extent on relationships formed between relative strangers, and that individual personality and circumstances will always play a part in this.

Main categories arising from thematic analysis:

Box 2 below shows five themes that arose from the data following thematic analysis and coding of key words and phrases. The left hand column shows the theme ultimately arrived at, while the right hand column shows the words and phrases which were actually used by mentees in their description of their experiences during recorded telephone interviews.

<table>
<thead>
<tr>
<th>Key themes:</th>
<th>Statements by mentees leading to theme:</th>
</tr>
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<tbody>
<tr>
<td><strong>Confidence building</strong></td>
<td>Confidence, encouragement, support, assurance, reassurance, raised self-esteem and receiving back-up. Often this was in the context of feeling nervous before beginning their work with the mentor.</td>
</tr>
<tr>
<td><strong>Motivation to use skills acquired on the course</strong></td>
<td>Feeling that their relationships with mentors prompted them to action, helped them to put skills into practice, enabled them to realise that they needed to use skills learned on the course and motivated them to get to work through planning and goal setting.</td>
</tr>
<tr>
<td><strong>Enabling skill development</strong></td>
<td>Developing their existing skills through working with mentors, receiving practical help/advice/suggestions (especially in relation to using and obtaining triggers and the size of the group to work with). They also</td>
</tr>
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</table>
received help with developing their ideas and taking their reminiscence skills further so that they were able to go deeper in their reminiscence discussions with residents. Advice was also received relating to group management skills. It was also important to mentees that they were having positive experiences of running reminiscence groups.

**The relationship as key to the success of the mentoring partnership**

Aspects of the mentors’ personalities as being important e.g. they were friendly, they felt comfortable with them, they appreciated their mentor and valued their experience. Trust was essential in the relationship and it was important that there was no negative criticism.

**Benefits to residents**

Residents being more involved in group activities and talking more, being happy. Mentees felt that their relationships with residents were improving as a result.

Although I was not able to establish key themes from the interviews with the six mentors, three significant areas of knowledge were developed through the research project:

**What did the mentors do?**

- Gave guidance, support, encouragement, empowerment, enlightenment, illumination and praise;
- Gave practical advice on group size, use of triggers and dealing with distractions; encouraged flexibility; contributed knowledge; providing tips on successful reminiscence groups;
- Facilitated goal setting and planning whilst providing choice and options;
- Providing targeted support – in whatever way was needed
- Encouraged the sharing & development of ideas and asking of questions about areas of concern; adapting of ideas; provided pointers for improving practice;
- Getting mentee to see their own skills and potential;
- Avoided being overpowering or taking over.

**What were the effects of this?**

- Mentees had someone to talk to who had knowledge and understanding; mentees asked questions about specific concerns;
• Mentees adopted the role of the reminiscence worker;
• Mentees enjoyed running sessions and took a step closer to running sessions independently; they learnt to put skills into practice; with small starting points and taking the process step by step, mentees gained confidence;
• Mentees got responses from residents during reminiscence activities – benefits in the carers’ relationships with older people; mentees could see the relevance of reminiscence to their own situation; residents got to know each other better;
• A bridge was provided between training and practice;
• Mentees gained insight into their own practice, became more reflective, and learned to look at problems from different viewpoints.

Other Observations:

• Making progress is a process;
• It is essential that mentees are committed to the mentoring relationship and to putting reminiscence into practice because of the time constraints and diversions of other tasks within the workplace; practical difficulties of setting up mentoring meetings;
• Mentees need to be enabled to be assertive in the workplace;
• Mentoring relationships are more involved than might at first appear to be the case. There can be unexpected complexities in the relationship dynamics; mentees and mentors need to be comfortable with each other;
• Mentees and mentors learned from each other: it was a two-way process;
• Mentees and mentors need to ‘work’ at making mentoring work.

These findings suggest that the mentors were having a significant impact on the work being carried out by students.

Discussion

A study on mentoring of new teachers by Ganser (1996) found that mentoring offered opportunities for skill development to both the experienced mentors and new teachers. This was similar to our finding that mentoring is a two-way process, with mentors and mentees learning from each other, and is supported by Hargreaves and Fullan who state:

While new teachers can benefit from a mentor, mentors also learn from their protégés – developing new insights into their own and others’ teaching, new relationships and a renewal of enthusiasm and commitment to their craft and career

(2000, p.52)
Benefits of mentoring to mentees identified by Ganser (1996) included support, encouragement, improved practical skills and help in the transition from training to teaching. This reflects our theme of ‘confidence’ and the idea that mentoring provides a ‘bridge’ between the course and the workplace, making it easier for the mentee to identify with the role of reminiscence worker. The same author also identified similar difficulties as those found in this research in terms of mentoring partners finding time to meet and the need to prioritise mentoring over other responsibilities which could become a distraction.

From our results it appeared that mentors had many roles and acted in a variety of ways to increase the confidence of mentees and thus enable them to put their new skills into practice. This finding is supported by Topping et al who found that:

Mentors give information. They act as a role model. They counsel, guide and act as a consultant. They help the recipient (the protégé or mentee) to become socialised into the professional culture. They show interest, reassure, support, encourage and sustain confidence and morale. They act as sounding boards and reality checkers. They facilitate goal setting, problem solving and goal attainment. They may suggest opportunities and promote initiative taking in mentees. (1998, p.48)

In their training, mentors had been advised to be flexible and respond to the expressed needs of the mentees, rather than to go in with a prescribed idea of how they were going to help. This meant depending on deeply ingrained skills as reminiscence workers as they could not prepare in advance. However, this ultimately appears to have been a key to the success of the intervention, as each mentee was responded to as an individual in a unique situation. This casts light on the importance of mentoring in this context: while the classroom based course addresses the needs of a group of up to sixteen students, and therefore generalises the issues which may arise in practice, mentoring relationships give more time to each student and are able to pay attention to the unique factors determining the success of turning theory into practice, such as those occurring in the workplace and within the individual.

Gehrke explains what the mentor offers the mentee with the image of a gift:

The greatest gift the mentor offers is a new and whole way of seeing things. This gift of wisdom is not a gift the mentor could create overnight – it is not embodied in a single lecture. It is, in fact, the labour of a lifetime ... This wisdom comes from having lived and thought deeply and it permeates all the mentor does with the protégé. (Gehrke, 2001, p.192)
This suggests that there is no one model of mentoring, or way of teaching experienced practitioners to mentor, which can easily be identified as a model of good practice. Rather, it is a case of the mentoring partners exploring ways of working together which draw on the existing skills of the mentor and suit the needs of a mentee’s situation.

A key element in building the confidence of mentees was the mentors’ training on establishing rapport with their mentees before progressing to setting goals or problem solving. Based on research carried out as part of developing a training programme for the mentors (Zacbary, 2000 and Shea, 2002), I considered that the relationship was unlikely to be productive unless mentees felt safe with their mentors. This view was confirmed by my reading of Hawkey (2006) who as well as stating that ‘Emotion is a key element in mentoring’, (p.145) also emphasised that unaddressed emotional content in mentoring relationships can inhibit the mentees’ ability to take on board new information:

... in the context of pre-service teacher education, the emotional stresses of starting teaching would serve to inhibit the cognitive learning that trainees are able to achieve along with their receptiveness to learning through the mentoring process.

(Hawkey, 2006, p.139)

Similarly, Eysenck and Calco (1992, cited in Hawkey, 2006, p.140) have suggested that ‘high anxiety can impair working memory and task processing because of intrusive thoughts and worries’. Our results showed that in some cases mentees expressed feeling nervous about the mentoring process, and that the time mentors put into getting to know their mentees was an essential element in being able to build their confidence and support them in their work: “I was a bit worried at the start but I got sort of into it” (S5). Both mentors and mentees found that spending time working on their relationship was an important starting point:

We were generally ... talking about ourselves and about what we’d done and she was getting to know me ... I think she put me at ease because she had the same kind of work background. (S7)

Jipson and Paley found that spending time getting to know each other was important to the success of their mentoring partnership:

Among the first things we learned about each other was that we had very similar values, ideals and dreams.

(Jipson and Paley, 2000, p.39)

Hargreaves and Fullan (2000) reinforce the idea of the importance of emotional support for mentees, stating that this should be ‘strong and continuous’ (p.53). This
relates to the ideas of Fielding et al (2005) who see trust within collaborative relationships as an essential element in the transfer of good practice. These authors suggest that to achieve such trust it is important to demonstrate sensitivity to the needs of the other party, by avoiding non-constructive or sustained criticism, and aiming to work together in a non-threatening manner.

One of our difficulties in this research was finding ways of providing ongoing support. We therefore decided to set up an online resource for reminiscence workers who had been through their initial training. This includes online forums where ideas for good practice can be shared, and experienced and novice reminiscence workers can contact each other for advice should they face any difficult situations in their work. This online resource acknowledges that mentors and mentees have ideas and techniques to share with each other:

The old model of mentoring where experts who are certain about their craft can pass on its principles to eager novices no longer applies.

(Hargreaves and Fullan, 2000, p.52)

Sennett explores how ‘a community of craftsmen’ (2008, p.25) who share their skills in problem-solving with each other, can achieve more in less time, than one person, or even a group of experts, working alone. We are therefore moving towards a ‘joint practice development’ model of mentoring and reminiscence training (Fielding et al, 2005) whereby all parties are seen as having something to offer. This is:

... a learner-centred approach [which] ... underscores the necessity of mutual engagement ... [in] opening up and sharing practices with others.

(ibid, p.72)

This online resource will be monitored over the coming months, in order to explore the extent to which it represents a useful resource to newly qualified and experienced reminiscence workers. To date, this resource has not been fully implemented, although the idea has been greeted enthusiastically by existing students.

Findings and conclusions

In many ways, the research results can be said to be what I had hoped to find at the outset. Specifically, the mentoring intervention used has been shown to be effective in building confidence amongst students, providing them with skills and knowledge which are applicable to their individual work situations and personalities. It appears that this was one of the things lacking in the original reminiscence training programme, preventing some past students from implementing their skills in the workplace as successfully as was possible.
Gathering these insights into ways of increasing the impact of reminiscence training was difficult at times because of the nature of the organisation within which the Older People’s Team works. Being a local authority covering the whole of a mostly rural county, the mentees with whom we worked were spread over a large geographical area. This meant matching mentors with mentees based partly on the mentors’ ability to travel or on proximity. In an ideal situation more time might have been spent matching partners by personality, experience of specific types of residential setting or age.

Nonetheless, the research project as a whole has been useful to us as a team. As well as providing students with an opportunity to improve their reminiscence skills, experienced reminiscence workers have had the opportunity to take part in a new venture and to develop mentoring skills, thus enabling them to see the value not only of mentoring, but also of practice based research. This has led to all of the mentors deciding to continue with this approach to reminiscence training, and two of them taking on a greater role in classroom based reminiscence teaching.

The research has provided evidence of the effectiveness of mentoring partnerships in facilitating the use of newly attained reminiscence skills in the workplace. Following this, we have been able to draw up a new model of reminiscence training which includes four ninety minute mentoring sessions after their initial Level 2 training. These sessions will take place once every two weeks after the training, with a final follow-up visit after three months, at which point the newly qualified reminiscence workers will be encouraged to undertake the Level 3 training which leads to a full qualification in reminiscence work. This model has been created as a direct result of feedback given by mentors and mentees during this project.

This research has also played a part in our department securing a further year’s funding for our training of care-workers, following our reports to funders of the effectiveness of this approach, alongside the new model of training which we have drawn up.

In terms of soft outcomes, the impact of this research has been to increase the confidence of newly qualified reminiscence workers, and has led to greater implementation of reminiscence skills in the workplaces of the mentees. In addition, the mentors have reported feeling enthused and excited by the prospect of ensuring that reminiscence training in the future will have a greater impact.

As a result of this research, I would recommend that further research is undertaken to explore the effect of mentoring of care workers undertaking other qualifications and perhaps, other newly qualified professionals working in health and social care settings. In this instance, mentoring appeared to increase the impact of training, although it would be useful to monitor the effects of this over the next year to see if
the impact is sustained following the replacement of face-to-face support with online resources.

References


Appendix 1 - Information Sheet and Consent Form

Re: An invitation to take part in reminiscence mentoring research

Dear Student

I have received a research grant to look into the effectiveness of offering four sessions of reminiscence mentoring in the workplace to students who complete the Level 2 OCN course ‘Introduction to Using Reminiscence’ which you are currently attending. I am therefore writing to offer you the opportunity of receiving free advice and support from a mentor for up to four sessions after you finish the course. Your meetings with your mentor would most likely take place in your work place, and will involve discussions about how best to put your newly acquired reminiscence skills into practice. Due to the time limit on the research grant, we would ask that all mentoring sessions are completed by the end of December.

In return for this free mentoring, you will be asked to write a weekly ‘journal’ about how you are progressing in your reminiscence work, and how useful (or not) you are finding your sessions with your mentor. At the end of the research you will be asked to give your journal to me, and also to take part in a recorded interview about your experience of mentoring.

The aim of the research is to find out whether mentoring helps students put reminiscence skills into practice, and all information you give me, either through your journal or through the interview, will be kept completely anonymous. Your workplace will not be named at any time, and you are asked to maintain the confidentiality of your colleagues and clients by using pseudonyms whenever you refer to them in your journal or in the interview (i.e. give them a false name e.g. Fred Flintstone, or refer to them by code e.g. Mrs X). You yourself, and your mentor, will be given codes so that I do not know whose information I am looking at when I go through all the information at the end.

If you are interested in participating in this mentoring project, please return the form overleaf to me at the above address by 4th November 2009. Please do not hesitate to contact me if you have any questions about this project, or about your course.

With best wishes

Sarah Housden
Appendix 1 Continued

Reminiscence Mentoring Research Project

Consent Form

By signing this form I am confirming that I understand the aim of the reminiscence mentoring research and that I am happy to work with a mentor for up to four sessions between finishing my reminiscence course and the end of December 2009. The purpose of this is to build my confidence and skills in carrying out reminiscence activities in my workplace.

I agree to keep a journal in which I will write each week about my experiences of using my reminiscence skills, and of meeting with my mentor. I also agree to meet with Sarah Housden, the primary researcher, at the end of December 2009 or beginning of January 2010, in order to discuss my experience of reminiscence mentoring.

I understand that all information I give will be anonymised in such a way that I, my colleagues, my clients and my workplace cannot be identified in the final research report.

Name (please print)......................................................................................................................

Signature.............................................................Date..........................................................

Contact phone number..........................................................................................................

e-mail address..........................................................................................................................

Statement by Manager

I am the manager of (student’s name)............................................................ and am happy for a mentor to visit him/her in the workplace for the purposes of building his/her confidence and skills in running reminiscence sessions. I understand that these mentoring sessions are free, and that any information provided about the mentoring experience will be anonymised so that none of my clients or staff can be identified in the final research report.

Name (please print)..................................................................................................................

Signature.............................................................Date.........................................................

Contact phone number..........................................................................................................

e-mail address..........................................................................................................................

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*Please note that confidentiality does not extend to situations we become aware of which suggest that a child or vulnerable adult may be at risk. However, such an occurrence would not be included in the research report*

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Appendix 2 – Questions asked during telephone interviews

Mentoring Research Interviews

Questions for Mentors

1. What was your experience of the mentoring process?
2. What do you think the benefits of mentoring were to your mentees?
3. What were the benefits of mentoring to you?
4. Were there any problems with the mentoring process as you experienced it?
5. What changes would you make to the structure of this mentoring process if we were to carry it out again in future?
6. Did you feel the training you received adequately prepared you for mentoring?

Questions for Students

1. What was your overall experience of the mentoring process?
2. What were the benefits to you of being mentored?
3. What was your experience of your relationship with the mentor?
4. How could this mentoring process be improved?
5. What did you value most about the mentoring process?