



Mentorship Premium Questionnaire

ONA GEL File #: _____ Grievor Name: _____

Bargaining Unit
Grievance #: _____ Employer: _____

Introduction

The purpose of this questionnaire is to get the facts up front so that ONA can make an informed decision on the merits of a mentorship premium case where it is contained in a collective agreement before proceeding to grievance and arbitration.

This questionnaire is meant to be completed by a grievor(s) alleging they should have been paid mentorship premium. Noted below are a number of questions that deal with this grievance. The reason for asking for this information is to assess the best way in which ONA can assist in resolving the issues.

Should a grievance proceed to arbitration, it is necessary for the Arbitrator to hear about events at the time that the grievance was filed. The Arbitrator will look at all the evidence put forward by ONA and the employer and determine whether mentorship premium applies.

It is up to ONA to convince the arbitrator that mentorship premium ought to have been paid. The more information ONA gathers, the more likely the grievance will be successful. We, therefore, need considerable help in gathering the evidence.

Questions

In order to claim the mentorship premium, the employee needs to be able to provide information that enables a determination that a formal mentorship role was assigned by the employer or the assignment meets the key elements of a formal supportive relationship (mentorship).

1. Were you assigned a formal mentorship role by your supervisor?

☐ No ☐ Yes

(a) How and when did the assignment take place? Identify specifics.

- (b) Was the employee that you were assigned to mentor new to the unit and being orientated to the unit?

☐ No ☐ Yes

Or, was the employee you were assigned to already an existing employee on your unit?

☐ No ☐ Yes

- (c) For what time period?

- (d) Was there more than one mentor assigned to the employee?

- (e) Was the employee you were assigned to under the New Grad Guarantee (NGG) initiative?

2. A mentorship relationship (identified through various literature reviews) includes the following responsibilities of the employee doing the mentoring:

- (a) Plan the mentorship experience based on the learning needs of the employee being mentored, including the identification and co-ordination of learning opportunities with other health care providers;

Was a learning plan developed for the mentee?

By whom?

Was the Learning Plan reviewed with the mentor and mentee? (Attach the Learning Plan and any other schedule or information available to this questionnaire.)

What were the learning needs of the employee being mentored?

What planning was involved and what learning opportunities were identified?

What learning opportunities did you co-ordinate as mentor?

- (b) Assess the ongoing competence/development of competencies of the employee being mentored, including assessments of competence gaps, risk management in relation to patient/client/resident care, and co-ordination of learning experiences.

How did you assess the competency of the employee being mentored?

What competency skills was the employee lacking in order to work on your unit?

What competency skills did you enhance to the employee and how did you do this?

- (c) Assist the employee being mentored to effectively meet patient/client/resident care needs; be responsible for the management of learning for the employee being mentored;

How did you manage that learning needs of the employee?

How did you assist the employee in meeting patient/client/resident care needs?

- (d) Participate in direct skill transfer where there is responsibility for the management of learning for the employee being mentored;

What skills did you transfer to the employee?

How did you transfer these skills?

- (e) Evaluate the learning experience of the employee being mentored throughout the duration of the mentorship relationship, including the provision of written and/or verbal reports to management regarding progress towards goal achievement.

How did you evaluate the learning experience of the employee?

It is recognized that the mentor and the employee being mentored may not be together at all times during the mentorship period. How often were you liaising with the employee being mentored? (E.g. hourly, each shift, at the beginning or end of each shift, etc.)

Did you provide any documentation or reports to your manager regarding the transfer of skills?

Did the employee review with you her competency skills check list?

3. What are the dates and hours for which you are claiming mentorship premium?

Was it full tours?

☐ No ☐ Yes

If no, please explain.

4. Did you request that the hospital review your workload with you and the student to facilitate successful completion of the assignment?

☐ No ☐ Yes

If you were denied your request, what reason was given?

5. Please keep records of the time, dates and hours for which you are claiming the mentorship premium.

Please provide copies of the following:

- ☐ Any learning plans.
- ☐ Documents around mentorship, i.e. hospital policies, CNO guidelines, schedules set up for the mentee, notes of meetings with the employer and mentee.