KTO KARATAY UNIVERSITY
FACULTY OF HEALTH SCIENCES
MENTORSHIP GUIDELINE

SECTION ONE

PURPOSE, SCOPE, LEGAL BASIS, AND DEFINITIONS

Purpose

Article 1. The purpose of this Guideline is to determine the procedures and principles of the Mentorship Program of the Faculty of Health Sciences at KTO Karatay University.

Scope

Article 2. This Guideline covers the procedures and principles governing the implementation of the Mentorship Program of the Faculty of Health Sciences at KTO Karatay University.

Legal Basis

Article 3. This Guideline has been prepared based on Article 14 of the Higher Education Law No. 2547 dated 4/11/1981.

Definitions

Article 4. For the purposes of this Guideline:

a) Rector: Refers to the Rector of KTO Karatay University,

b) Senate: Refers to the Senate of KTO Karatay University,

c) Mentorship: Refers to a developmental process in which one person (mentor) supports the development of another (mentee) by sharing knowledge and experience,

d) Mentor: Refers to a person who provides guidance and advice to students regarding study strategies and career development through their knowledge and experience, or a student enrolled in a Thesis-Based Master's or Doctoral Program at the KTO Karatay University Graduate Education Institute,

e) Clinical Mentorship: Refers to the system through which students are supported in developing work strategies via the transfer of knowledge and experience during clinical practice,

f) Chair of the Mentorship Commission: Refers to the Head of Department,

g) Mentorship Implementation Commission: Refers to the commission consisting of the Head of Department and two faculty members/lecturers assigned to conduct mentorship activities within the department/program in accordance with the provisions of this Guideline.

SECTION TWO
Working Principles of the Mentorship Implementation Commission

Article 5. The working principles of the Mentorship Implementation Commission are as follows;

a) The Mentorship Implementation Commission convenes upon the call of the Chair of the Mentorship Implementation Commission or upon the request of an absolute majority of its members. The meeting date is determined by the Chair of the Commission and announced to the members by the secretaries.

b) The Mentorship Implementation Commission organizes training activities related to clinical mentorship, collects relevant research outputs, and submits them to the Dean's Office/Directorate.

c) Decisions of the Mentorship Implementation Commission are documented in a report by the commission secretaries. The meeting report is signed by all members present at the meeting and, when necessary, submitted to the Dean's Office/Directorate.

d)The Mentorship Implementation Commission holds meetings at the beginning of each academic year regarding educational planning and at the end of each academic year regarding the evaluation of activity reports.

Principles of Clinical Mentorship Implementation

Article 6. Clinical Mentorship is a system in which mentorship is provided by professionals who hold at least a bachelor's degree in the relevant field and have a minimum of three years of professional experience, or who are currently enrolled in a master's program. The objectives of this system are:

a) To ensure that students' clinical practices are carried out more effectively, with higher quality and success, through the sharing of knowledge and experience by experienced professionals during clinical practice,

b) To contribute to the personal development of professionals in practice areas, particularly in leadership and communication skills, by assigning them responsibilities,

c) To support the development of communication, mutual respect, and professional solidarity between students and colleagues.

Article 7. Individuals with at least three years of clinical experience in their field or those pursuing master's or doctoral education may be appointed as mentors for first-, second-, third-, and fourth-year students during clinical practice. At the end of each semester, the Mentor Evaluation Form (completed by the student) and the Mentee (Student) Evaluation Form (completed by the mentor) are prepared and submitted to the responsible faculty member. The activity report prepared by the responsible faculty member is presented to the Mentorship Implementation Commission. The Mentorship Implementation Commission evaluates the activity reports at the end of each academic year.

The qualifications required for individuals appointed as mentors are as follows:

(1) To be a volunteer,
(2) Not to have been convicted of a disgraceful offense,
(3) Not to be an executive member of any political party or ideological group
(4) To be professionally competent and successful; to hold at least a bachelor's degree with a minimum of three years of experience or to be enrolled in a master's program,
(5) To be able to allocate sufficient time to students.

Article 8. Expectations from individuals appointed as mentors are as follows:

a) To support laboratory and hospital practices of applied courses starting from the week in which courses begin each semester (fall and spring),
b) To observe the care and treatment behaviors expected from students within the scope of the course,
c) To eliminate students' deficiencies through professional knowledge and experience,
d) To review care plans within the scope of the course and provide feedback within one week at the latest,
e) To acknowledge well-performed practices in care plans and clinical settings and to ensure incomplete practices are corrected,
f) To comply with clinical practice rules,
g) To wear a uniform during hospital practice and a white coat during laboratory practice,
h) To comply with dress code regulations (hair tied back, appropriate uniform and footwear, headscarf compliance, no makeup, short nails),
i) To comply with laboratory or hospital clinical practice hours,
j) Not to use the university identification card for non-duty areas or purposes,
k) Not to introduce oneself as a university faculty member,
l) To refrain from any actions that may negatively affect the reputation of the University or the Department.

SECTION THREE
Duties

Article 9 – The Chair of the Mentorship Commission is responsible for:

a) Ensuring that the clinical mentorship program is implemented and evaluated as planned,

b) Conducting scientific studies related to clinical mentorship and monitoring the timelines of all related research activities,

c) Determining the number of clinical mentors at the beginning of the academic period, planning mentor training when necessary, and coordinating the process,

d) Coordinating the mentor and mentee evaluation process at the end of the academic period,

e) Coordinating the evaluation of activity reports at the end of the academic period and implementing necessary improvements.

Article 10 – The duties and responsibilities of the Clinical Mentor are as follows:

a) Participating in meetings organized within the scope of the course,

b) Complying with laboratory or hospital clinical practice hours for the assigned course throughout the semester,

c) Observing students in terms of knowledge, skills, communication, and compliance with rules,

d) Reviewing care plans by following the specified timelines and providing feedback to the student within one week,

e) Evaluating students with respect to departmental clinical practice regulations, professional knowledge and skills, and hospital rules,

f) Assisting students in eliminating deficiencies through knowledge and professional experience,

g) Acknowledging well-performed practices in care plans and clinical settings and ensuring incomplete practices are corrected,

h) Complying with clinical practice rules,

i) Complying with dress code regulations (hair tied back, appropriate uniform and footwear, headscarf compliance, no makeup, short nails),

j) Submitting student evaluation forms to the responsible faculty member/instructor during the final week of each academic semester,

k) Participating in planning meetings at the beginning of each academic semester,

l) Not using the university identification card for non-duty areas or purposes,

m) Not introducing oneself as a university faculty member,

n) Refraining from any actions that may negatively affect the reputation of the University or the Department.

Article 11 – The Mentee is responsible for:

a) Identifying areas of development by consulting with the mentor,
b) Being open to receiving feedback,
c) Completing the survey/evaluation form at the end of the process,
ç) Sharing suggestions and feedback regarding the process with the Head of Department,
d) Declaring, accepting, and undertaking not to misuse the mentee–mentor relationship.

SECTION FOUR
Cases Not Covered, Entry into Force, and Execution

Cases Not Covered

Article 12 – In matters not addressed in this Guideline, actions shall be taken in accordance with the provisions of the "KTO Karatay University Graduate Education and Examination Regulations" and the general provisions of the clinical practice guidelines.

Entry into Force

Article 13 – This Guideline enters into force upon the approval of the Rectorate of KTO Karatay University, following the favorable opinion of the Dean's Office of the Faculty of Health Sciences and its adoption by the Senate of KTO Karatay University.

Execution

Article 14 – (1) The provisions of this Guideline are executed by the Rector.

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