

RETENTION OF NURSING FACULTY: ASSOCIATE DEGREE ADMINISTRATORS'

PERSPECTIVES

BY

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Abstract

Retention of faculty is a complex and dynamic challenge for nursing education. Nursing is facing the growing dilemma of a shrinking population of current nursing faculty (AACN, 2012; Banks, 2012; Evans, 2013, & Proto & Dzurec, 2009). The lack of educators has implications for nursing research and the clinical nursing shortage. Research to better understand current challenges to retaining faculty and current successful faculty retention strategies is imperative for the academic environment in an effort to address the current nursing faculty shortage. There is limited study of Associate Degree faculty populations, yet they are responsible for a large percentage of graduates in Kansas and beyond. In the United States, 45.4 percent of registered nurses' initial education is at the associate degree level (HRSA, 2010). Nursing schools are concerned about retention of current faculty and may have various strategies in place to promote retention. The purpose of this qualitative descriptive study was to examine experiences and perceptions of academic leaders regarding the challenges and successes of current nursing faculty retention strategies at the associate level. A qualitative design was employed to discover the challenges and successes of current retention strategies being used by faculty leaders at the associate degree level. To better understand the academic leaders' perspectives, an open-ended survey was developed based on literature findings that address the challenges of faculty retention. Using purposive sampling, members present at a meeting of the Kansas Council of Associate Degree Nurse Educators (KCADNE) were surveyed. After survey completion, two focus groups were completed with consenting participants. The focus groups followed a semi-structured format and were audio-taped with verbatim transcription performed after completion. On the basis of findings from the surveys and focus groups, codes, categories, and themes were created. The four themes identified from the focus group data analysis were:

- 1) Addressing salary as a “huge” factor in retaining faculty; 2) Improving the work environment;
- 3) Characterizing vacant faculty positions and 4) Identifying strategies to support new faculty.

The written survey responses were found to be reflective of the four identified focus group themes. Confirmation of themes was attained from sample participants. Prior research supports these themes as well. Identified themes provide valuable learning related to current nursing faculty retention strategies. Sample implications include: researching nursing faculty salaries and workload; identifying strategies to support positive work environments; considering the value of flexible schedules; and optimizing new faculty mentoring. In an area with limited research, qualitative design provides an appropriate starting point. This study may ultimately provide approaches to help improve faculty retention thereby helping to decrease the nursing faculty shortage. Further research is also needed with faculty and academic leaders at the baccalaureate and graduate levels.

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Chapter One: Background

The shortage of nursing faculty continues to plague the nursing profession and the nation's healthcare system. Many colleges have implemented various faculty retention strategies in an attempt to combat the current nursing faculty shortage. Without retention of qualified nursing faculty to meet academic needs, there will be continued limitation to the growth of the nursing workforce. The gap between the nursing workforce supply and demand has dramatically increased over the past 15 years (National Advisory Council on Nurse Education and Practice, 2008). This faculty shortage is a significant contributing factor to the lack of clinical nurses in the current healthcare system (American Association of Colleges of Nursing [AACN], 2008). The Health Resources and Services Administration (HRSA) Bureau of Health Professions are projecting a national increase in the number of nurses needed from 2 million full-time equivalents in 2000 to 2.8 million full-time equivalents by the year 2020 (HRSA, 2002). According to the Bureau of Labor Statistics (2012), registered nursing is the top growing occupation with a projected need of 1.2 million in 2020 due to growth and replacements.

In October 2012, AACN (2012) released statistics reporting a total of 1,181 faculty vacancies in a survey of 662 nursing schools (78.9% response rate) with baccalaureate and/or graduate programs from across the United States. Along with the vacancies, schools reported a need to create 103 additional faculty positions in an effort to accommodate the student demand. According to the AACN *2011-2012 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing*, nursing schools in the United States declined 75,587 qualified applicants for baccalaureate and graduate nursing programs in 2011. During the 2004-2005 academic year the National League for Nursing (2006a) reported that 99,673 qualified applicants

were denied admittance into an associate degree program based on a lack of qualified nursing faculty to educate students. A significant barrier in the effort to expand nursing education's capacity and help to resolve the clinical nurse shortage can be found in the shortage of qualified nurse faculty (Joynt & Kimball, 2008).

Associate degree programs provide the greatest number of nursing graduates in the United States. Over the 2007-2008 academic year associate and baccalaureate nursing programs across the United States graduated 63,982 students and 38,724 students respectively (National League for Nursing [NLN], 2009). Due to the current and projected clinical nurse shortage, the need to educate and graduate all potential nursing students is essential. According to the Health Resources and Services Administration (2010), the Associate Degree of Nursing (ADN) program is the most common initial nursing education path chosen by registered nurses across the United States. The 2008 National Sample Survey of Registered Nurses (NSSRN) randomly selected a sample of 55,151 registered nurse (RN) records with 33,549 surveys completed (HRSA, 2010). Of the surveys completed, 45% reported ADN degrees and 34% reported a Bachelor's or higher degree as their initial nursing education.

The nursing faculty shortage is a complex and continuing problem in the academic arena that warrants attention by stakeholders wanting to hire qualified nursing graduates. In some states, lawmakers were calling for the lowering of faculty standards as a solution to increase nursing student graduation rates (National Council of State Boards of Nursing [NCSBN], 2008). With the current challenges of quality and safety facing the health care system, neither the state boards of nursing nor nurse educators supported this proposal (NCSBN, 2008). The Institute of Medicine (2003) encouraged change within the infrastructure of educational institutions that

would include a more intense and coordinated effort to shape curricula, teaching methods, and the standards and guidelines governing education.

Many factors contribute to the shortage such as advancing age and faculty retirement, clinical salaries, faculty development, and senior faculty mentoring. In the survey findings of 4,118 nurse faculty, Roughton (2013) found multiple, complex, and interconnected contributing factors to the nurse faculty shortage that ultimately impact the nurse faculty member's intent to leave. In an effort to address the nurse faculty shortage and encourage health system reform goals, the NLN supports changes to advance initiatives for clinical partnerships, expand funding for faculty development, and promote teaching scholarship in the science of nursing education (NLN, 2011). The lack of nursing faculty has implications for the health care of the entire population. Individuals and communities are experiencing the intensified effects of poor health care outcomes, inflated costs, and health inequities due to the nursing workforce shortage (NLN, 2011). The United States has a projected population growth of 18% between 2000 and 2020, resulting in an increased need for healthcare for an additional 50 million people (NACNEP, 2010). This report reflects a demand for nurses that is surpassing the supply, thus limiting access to healthcare services. Research is growing supporting a direct effect of inadequate nurse staffing with poor patient outcomes, including increased mortality rates (NACNEP, 2010).

A national dialogue has begun on the need for solutions to address the nurse faculty shortage in an effort to change the current nursing workforce and healthcare delivery. The literature primarily focuses on recruitment issues and has a sparse amount of literature referencing retention of nursing faculty (Roughton, 2013). A gap exists in the literature addressing the specific faculty retention strategies of associate nursing programs. In the current

workforce, there are more associate degree nurses than baccalaureate degree nurses (NACNEP, 2008) therefore this study will address faculty retention strategies at the associate degree level. Resolving faculty shortage issues requires more than recruitment efforts, it requires strategies to retain the current nurse faculty workforce. Understanding the perceptions of associate degree academic leaders regarding faculty retention strategies could provide significant insight that would impact the current number of nursing faculty and the clinical nurse workforce. This study will help to fill this gap in the existing literature on faculty retention strategies and provide important information directly from nurse academic leaders.

The study will take place in Kansas. The state of Kansas is designated 12th in the nation related to the nursing shortage counts with 107 medically underserved areas/populations in the state and 393,048 Kansas residents living in a health professional shortage area (AACN, 2013). Schools of nursing work diligently each year to meet the growing enrollment demands, but the nursing faculty shortage and budget limitations are not allowing sustainability of the nursing education infrastructure and the pipeline of our future nurses (AACN, 2013). As the population in Kansas continues to age, the growing shortage of nurses will ultimately contribute to diminished patient care (Roberts, 2007). The Kansas Department of Health and Environment (2010) recommends the expansion of nursing faculty in an attempt to address the growing nurse shortage and the future of healthcare in Kansas.

Model Framework

The Six Domains Model is representative of factors that contribute to the professional nursing shortage (Roughton, 2013; Appendix A). The six domains consist of healthcare system, regulatory environment, financing system, education system, technology, and work environment

and are an interdependent and interconnected system. The domains are described in the following:

Domain 1 is the healthcare system and is reflective of a marketing plan in an attempt to create awareness for academic nursing careers.

Domain 2 is the regulatory environment that is an exploration of new and inventive tenure alternatives.

Domain 3 is the financing system that attempts to improve salary/benefits and tuition that is commensurate with faculty workload.

Domain 4 is the education system that examines faculty roles and establishes best practices of teachings.

Domain 5 is technology that is reflective of opportunities for innovative technology use in teaching.

Domain 6 is a work environment that attempts to offer comprehensive professional development programs.

According to Roughton (2012), the Six Domains Model is reflective of factors that contribute to the professional nursing shortage and is reflective of the American Organization of Nurse Executives model. For this research study, the Six Domains Model was adapted and provided the conceptual framework for the development of the open-end survey questions that are representative of the characteristics and perceptions of the nurse academic leaders (Appendix B).

Problem Statement

Multiple complex factors have lead to the current nurse faculty shortage.

The need exists to determine how nursing education can best respond to the current associate nursing faculty shortage thus potentially addressing the clinical nurse shortage. Associate degree nursing programs encompass 59% of all the basic registered nurse (RN) programs and they managed to produce an outsized 63% of all RN graduates (NLN, 2006b). Without faculty to educate future nurses, the shortage will never be resolved.

Purpose of the Study/Research Questions

The purpose of this qualitative descriptive study is to examine the perceptions of academic leaders regarding the challenges and successes of current nursing faculty retention strategies at the associate level. A qualitative descriptive design within a naturalistic paradigm is most appropriate for this research study due to the emphasis on understanding the lived human experience of the academic leaders in a real-world setting. A naturalistic inquiry allows the study of real-world situations without manipulation (Patton, 2002). The literature review describes the causes and results of the nursing faculty shortage, but lacks current studies investigating the various retention strategies used as solutions.

The specific aim of this study is to examine the experiences and perceptions of associate academic leaders regarding the challenges and successes of their respective faculty retention strategies. The research questions to be addressed are:

1. What are the challenges to retaining faculty at the associate degree level?
2. What recent strategies have faculty leaders implemented to address retention?
3. Which retention strategies do associate degree faculty leaders believe to be most effective?

Significance of the Study

The importance of nursing faculty retention is well documented. However, despite the acknowledgement of that importance, there continues to be a nurse faculty shortage. This study is important because it can provide insight from associate degree faculty leaders regarding the challenges and successes of retention strategies at the associate degree level. By identifying successful faculty retention strategies, associate faculty leaders can improve nursing faculty retention.

Assumptions

In this study, the researcher assumed participants would be honest and forthcoming with their perceptions of the successes and challenges of current retention strategies within their respective nursing departments. All faculty leaders attending the KCADNE council meeting are assumed to have pertinent knowledge regarding the study focus of faculty retention strategies. In addition, the use of a survey and focus group interview requires an initial level of comfort with the process and a willingness to share the time necessary to participate and complete the survey and focus group in a helpful manner.

Definition of Terms

For the purpose of this study, the following definitions will be used:

Nursing faculty shortage: critical shortage of nursing faculty that is limiting the number of students admitted to nursing programs (AACN, 2010; Benner, Sutphen, Leonard, & Day, 2010).

Strategies: methods, ideas, and programs to improve the nursing faculty shortage, nursing shortage, and education of nursing students (Yordy, 2006; AACN, 2005).

Retention of nursing faculty: process used by nursing schools to continue to employ existing nursing faculty for the purpose of educating nursing students (Allan & Aldebron, 2008).

Associate degree nursing program: a combination of undergraduate first level practical nursing and second level associate degree curriculum at a community college (Kansas State Board of Nursing, 2012b).

Faculty leaders: persons attending the Kansas Council of Associate Degree Nurse Educators.

Healthcare system (Domain 1): comprehensive marketing plan to create awareness for academic nursing careers (Roughton, 2013).

Regulatory environment (Domain 2): exploration of innovative tenure alternatives (Roughton, 2013).

Financing system (Domain 3): improving salary/benefits, tuition commensurate to workload (Roughton, 2013).

Education system (Domain 4): examination of faculty roles and establishment of best practices for teaching (Roughton, 2013).

Technology (Domain 5): opportunities for innovative technology use in teaching (Roughton, 2013).

Work environment (Domain 6): offer of comprehensive professional development programs (Roughton, 2013).

Limitations

Qualitative data collection by means of a survey and focus group interview requires honesty, insight and self-disclosure by study participants. These types of methods of self-reporting might be considered as limitations to the study. Participants may be uncomfortable or

reluctant to share information and details about their associate degree programs. Due to the lack of research regarding faculty retention strategies at the associate degree level, self-reporting offered a valid method of data collection for this qualitative descriptive study. The study was confined to associate degree faculty leaders at the KCADNE council meeting therefore the generalizability of the findings will be limited. Since the researcher is a current faculty member in baccalaureate and masters programs, bias may have been unintentionally introduced into the study based on preconceived ideas of faculty retention strategies as a result of current professional experiences. Researchers may have difficulty separating what is already known about a subject from the research findings (Munhall, 2012).

Summary

Chapter one of this proposal has offered an introduction to the problem leading to this inquiry, the purpose of the study, specific research questions to guide the study, and the significance of the study. Applicable terminology, limitations, and assumptions of the study are provided.

Chapter Two: Review of the Literature

Retention of faculty is a complex and dynamic challenge for nursing education. Nursing is facing a growing dilemma of a shrinking population of existing nursing faculty (American Association of Colleges of Nursing [AACN], 2012; Banks, 2012; Evans, 2013, National League of Nursing [NLN], 2010; Proto & Dzurec, 2009). Retention of nursing faculty is an ongoing process by which the academic institution continually employs the present faculty for the purpose of educating nursing students (Allan & Aldebron, 2008). Nurse faculty influence the future of nursing and impact the healthcare of our nation by educating future nurses to address the growing demands of an aging population.

According to the AACN (2013), nursing research performed over the past decade has found evidence that supports education's ability to make a difference in clinical practice. The nursing faculty shortage corresponds with the clinical nursing shortage due to the deficient number of qualified nursing faculty in educational programs that will replace aging and retiring faculty (Yordy, 2006). The lack of nurses and nursing faculty limits the ability of nursing to provide leadership and necessary research in addressing health care issues (Banks, 2012). In addition, the lack of nurse educators places limitations on the ability of nursing research to effect health policy at the local, national, and international levels (Banks, 2012). In order to influence the healthcare of the nation, academia must begin to identify successful strategies to provide a meaningful work environment that encourages nurse faculty retention.

Impact of the Nursing Faculty Shortage

Review of research, policies, and procedures of current or potential faculty retention strategies are imperative for the academic environment in an effort to address the current nursing faculty shortage. The predicted shortage of nurses and nurse educators threatens Americans

access to healthcare across all settings (Reinhard & Hassmiller, 2011). Joynt and Kimball (2008) reported a potential nursing shortage of 500,000 registered nurses by the year 2025. The worsening faculty shortage has many nursing schools turning away qualified applicants (Aiken, 2011).

As summarized in the American Association of Colleges of Nursing's (AACN) report on the *2011-2012 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing*, nursing schools in the United States declined 75,587 qualified applicants for baccalaureate and graduate nursing programs in 2011. Lack of nursing faculty was a contributing factor to students not being accepted into the nursing school programs. In an effort to address the faculty shortage, a few state lawmakers attempted to lower the faculty standards in an effort to attract more faculty and graduate greater numbers of nursing students (National Council of State Boards of Nursing [NCSBN], 2008). As the reports of a nursing faculty shortage grow, the pressure continues to build on the nation's nursing programs to efficiently educate a greater number of students (Joynt & Kimball, 2008). As advancing technology and medical practice increase patient longevity, the demand for knowledgeable healthcare providers has increased.

Influencing issues noted in the literature as contributing to the nurse faculty shortage included aging faculty, limited faculty with a doctorate degree, dissatisfaction of workload, tenure track demands, and the perception of a lack of campus collegiality (Berent, 2011; McDermid, Peters, Jackson, & Daly, 2012; National Advisory Council on Nurse Education and Practice [NACNEP], 2010a). Gerolamo and Roemer (2011) cited concerns related to maintaining outside clinical practice, workload equity, and lack of mentoring from senior faculty as potential reasons for leaving an academic position. In an effort to increase faculty capacity and diversity,

efforts are being made to accelerate higher degree programs and target clinical nurses for faculty training (Joynt & Kimball, 2008). In the past, graduate programs promoted curriculums with a clinical advancement and/or an administration focus as opposed to encouraging future teaching roles. This aspect along with the lack of financial resources available for nursing faculty has built an environment that is unable to maintain a properly prepared nurse faculty workforce (Proto & Dzurec, 2009).

The Institute of Medicine (IOM) encourages an increased financial investment in education to achieve a team of highly qualified educators to train professionals for clinical and leadership roles (IOM, 2011). According to the study by Gerolamo and Roemer (2011), only 60% of the nurses with doctoral degrees have chosen to stay in teaching, the rest moved into clinical practice. Finkleman and Kenner (2009) stated faculty salaries were not competitive with practice salaries thus potentially contributing to the move from academia into the clinical setting. The AACN reported the average annual salary of a master's prepared faculty as \$72,028 with the American Academy of Nurse Practitioners (AANP) reporting an average annual nurse practitioner salary as \$91,310 (AACN, 2013). Strategies are needed to address the disparity of salaries to help retain nursing faculty (Hornberger, Hess, & Thompson, 2005). Evans (2013) found that work release from academic workload for clinical practice was gaining attention as an option to address the salary disparity between practice and academia.

Academic Nursing Faculty Vacancies

The current nursing shortage cannot be addressed without first taking notice of the inadequate number of existing nursing faculty. According to a report from the AACN (2012), current data shows a national nurse faculty vacancy rate of 7.6% with the majority of vacancies

(88.3%) requiring or preferring faculty with a doctoral degree. This AACN survey was sent to 662 baccalaureate and/or graduate nursing schools in the United States with 1,181 designated faculty vacancies reported. In addition, Aiken (2011) identified that half of the current nursing faculty will reach retirement in 10 years.

The National League of Nursing's (NLN) Nurse Educator Fact Sheet (2010) reports that one in every four nurse educators are considering leaving their current teaching position stating the major motivating factor as workload. Other contributing factors reported by NLN included difficulties with lack of qualified applicants and inability to offer competitive wages. State institutions annual salary increases depend on the state's economic environment and are generally minimal or absent (Brady, 2004).

The AACN (2012) reported the average age of nurse educators was 55.2 years with a projection of approximately 400 to 500 masters or doctoral prepared educators retiring within the next 10 years. According to Banks (2012), "attracting and retaining a diverse pool of competent and passionate nursing faculty are the cornerstones of ensuring the health of individuals and populations," (p. 358). In the AACN 2012-2013 *Salaries of Instructional and Administrative Nursing Faculty in Baccalaureate and Graduate Programs in Nursing* report (Fang & Bednash, 2013), the mean age of doctoral nursing educators with a rank of professor and associate professor were 61.3 and 57.7 years, respectively; assistant professors had a mean age of 51.5 years. Master's prepared faculty had an average age for professors, associate professors, and assistant professors of 57.2, 56.8, and 51.2 years, respectively (Fang & Bednash, 2013, p. 1). Joynt and Kimball (2008) reported that many nursing faculty enter into a master's program during a later stage of life after completion of several years in a clinical position. According to

the AACN (2013), the median time for nurses to begin a doctoral program, after a masters degree is 15.9 years; then nurses will generally work an average of 20 years past receiving their doctoral degree.

The Robert Woods Johnson Foundation (RWJF) and the American Association of Retired Persons (AARP) have joined together on a campaign to address the clinical nursing and nursing faculty shortages with the question “Who will care for us now and in the future?” (Reinhard & Hassmiller, 2011, p. 200). In their effort to increase awareness of the current shortage in nursing, leaders of these organizations have worked together to create the Center to Champion Nursing in America. This Center works to provide sustainable solutions for the nursing faculty shortage thereby ensuring a highly skilled nursing workforce. In an effort to accomplish this goal, potential solutions are created through joint programs that include the RWJF, the United States Department of Labor and the Division of Nursing at the Health Resources and Services Administration (HRSA) of the United States Department of Health and Human Services. These organizations collaborate to develop resources regarding best practices and networking opportunities to address the nursing faculty shortage (Reinhard & Hassmiller, 2011).

This is also a challenge in Kansas. There were 1,008 qualified applicants declined from Kansas nursing programs due primarily to a shortage of nursing faculty (AACN, 2013). Hornberger, Hess, and Thompson (2005) indicated that in the state of Kansas there would be a 47 percent turnover in nursing program leadership with significant retirements of nursing faculty over ten years. The average age for Kansas nurse faculty for 2012 was 53 (AACN, 2013). As faculty age towards retirement, there is potential for exacerbation of the nursing shortage.

Nationally, “associate degree program faculty vacancies have increased 10% since 2002, with current vacancy rates at 5.6%; baccalaureate and higher degree program vacancies are reported to be at 7.9%, representing a 32% increase since 2002,” (Proto & Dzurec, 2009, p88). In Kansas, Hornberger, Hess, and Thompson (2005) recommended a need to develop retention strategies that would grow and develop nurse educators. These authors reported a strikingly low number of doctorally-prepared nurse educators in the state of Kansas (65 of 472 nurse educators who are teaching in undergraduate programs), along with 34.7% (164 of 472) of nurse educators teaching part-time. The Kansas State Board of Nursing (2012a) reported a decrease in statewide nursing faculty from 1218 total faculty in 2011 to 1123 total faculty in 2012. Another significant finding was that faculty salary may be less than clinical staff nurse salary and potentially \$40,000 less than nurse practitioners statewide (Hornberger, Hess, & Thompson, 2005). The Kansas Board of Regents (2009) reported institutions experienced new faculty hires leaving after a short period due to competition from other institutions and the disparity between nurse faculty and nurse practitioner salaries in the state of Kansas. There are a majority of associate degree programs in rural Kansas. During times such as the recent recession, the evidence demonstrates an increase in associate degree applications versus a bachelor’s degree education and many of the new graduates entering the workforce are from 2-year associate degree programs (NACNEP, 2010b).

Strategies to Improve Retention and Recruitment

Strategies are the ideas, methods, and programs used to improve the existing nursing faculty shortage (Yordy, 2006). The AACN has designed initiatives to improve funding for master’s and doctoral education and ultimately encouraging a role as nursing faculty. The AACN initiatives include but are not limited to the New Careers in Nursing Scholarship Program,

Johnson and Johnson Campaign for Nursing's Future – AACN Minority Nurse Faculty Scholars Program, and the AACN's Scholarship and Financial Aid Resources for Nursing Students. National and state strategies have included loan repayment programs for nurses who earn a master's or doctorate degree and are willing to teach for four years at an accredited school of nursing, assistance in transition to faculty for active duty or retired nurse corps officers, and a Johnson and Johnson Minority Nurse Scholars program is offered to aid in increasing the number of faculty members who have racial/ethnic minority backgrounds (Banks, 2012).

In the effort to increase nursing faculty, the Nurse Faculty Loan by HRSA and federal programs under Title VIII are designed to directly target individuals who are training for nursing faculty positions (Yordy, 2006). Without financial investments from stakeholders, the prospect of a nurse returning back to school may not be feasible (Aiken, 2011). Individual states may have their own programs in place in an effort to address the shortage in their areas. These initiatives are important in addressing the nurse shortage in the clinical and academic arenas, but they tend to address recruitment more than retention.

Creative strategies noted in the literature in an effort to retain nurse faculty included flexibility of work hours, positive work environment, scholarships or workload release for continuing education, and faculty mentoring programs (Evans, 2013). In their study, Ambrose, Huston, and Norman (2005) found importance in having faculty retention strategies that are based on the individual institution's culture. The retention strategies need to be institution-specific and built upon the constructive feedback of the nursing faculty within that institution. The two-year Ambrose, Huston, and Norman (2005) study, (n=123) had current and former faculty reporting that discontent within a department can affect faculty satisfaction or

dissatisfaction possibly contributing to faculty retention. The institution specific issues noted in their study included the surrounding city and culture of the area and the interdisciplinary nature of the institution. A creative strategy suggested by Curl, Smith, Chisholm, Hamilton, and McGee (2007) encouraged the use of high-fidelity simulation within a nursing program to potentially attract younger nurses to become educators. They also encouraged the use of simulation as a means for older faculty to share their experiences and continue to teach past retirement age in a less physically demanding approach.

Faculty who felt empowered with respect and support from others on campus were most likely to stay in the faculty role (Berent, 2011). The perception of the long hours and poor salary of the academic lifestyle is not as attractive when compared with the opportunities offered by the private sector (August & Waltman, 2004). In a literature review by McDermid, et al. (2012), the need for advanced degrees, financial constraints, and the variety of roles and responsibilities contribute to the complexity of identifying effective retention strategies. Ambrose, Huston, and Norman (2005) found that the disengagement of senior faculty should be examined due to their potential impact on the entire department and institution. According to Stanley, Capers, and Berlin (2007), in an effort to empower faculty, especially minority faculty, to be long-term highly productive academic members, an institution must provide opportunities to network with colleagues.

Nursing faculty at all academic levels can struggle with maintaining a proper balance between the teaching, scholarship, and service expectations of the faculty role along with personal and family commitments (Banks, 2012). The demands of meeting these expectations may be overwhelming for new and existing faculty and may contribute to personal burnout and

attrition (Gazza & Shellenbarger, 2005). Banks (2012) encouraged improved alignment and balance between professional and personal priorities as a means to recruiting and retaining skilled, passionate, and professional nursing faculty. Bittner and O'Connor (2012) reported that faculty who could balance work demands without having to take work home had a higher job satisfaction and were more likely to stay in their current teaching position. An institution can strengthen a department by keeping faculty vested in important projects and seeking faculty ongoing feedback regarding departmental activities (Disch, Edwardson, & Adwan, 2004).

Faculty Mentorship to Improve Retention

New faculty may benefit from a mentor to assist with the job transition as they begin to learn to balance professional goals with personal priorities. According to Berk, Berg, Mortimer, Walton-Moss, and Yeo (2005), a mentoring relationship is developed with an experienced faculty who offers advice, provides guidance and support, and promotes exposure to professional development opportunities over a continuum of an informal/short-term or formal/long-term timeframe. Excellence in mentoring for new faculty includes orienting to the faculty role, socialization within the academic community, aiding in development of teaching, scholarship and service skill, and assisting with the facilitation of the future growth of leaders in nursing and nursing education (Nick et al., 2012). A mentor is held accountable by the mentee for any agreed upon contractual obligations and for being the role model for potential tenure and promotion behaviors. Mentored faculty were found to have a stronger commitment to the organization (Bittner & O'Connor, 2012). In some institutions, mentors are paid a stipend for their work with a mentee (Baker, 2010; Hessler & Ritchie, 2006). According to Nick et al. (2012), mentoring

programs are not very common among the nursing academic community, so new faculty may have difficulty finding a mentor in the educator role.

In an effort to promote the nurse educator role, academia can strive to improve upon the current working environment and to find a balance in the talents of faculty. An effort can be made to utilize retiring faculty who have chosen to participate in phased retirement instead of completely leaving the academic setting. Aging nursing faculty can bring leadership experience, skill proficiency, teaching wisdom, and knowledge of the history of the department and the institution. Academic leaders must identify roles that are appropriate for retiring faculty who are working in a part-time position and could share their knowledge and expertise (Brady, 2004). Retiring faculty can be a vital resource to help bridge the gap between the novice and expert faculty within a department. McBride (2010) listed mentoring as a means to career and interdisciplinary development. Mentoring relationships between senior faculty and newer faculty members helped foster a feeling of greater commitment to the nursing professoriate (Gwyn, 2011; McBride, 2011). Nick et al. (2012) reported that “mentored faculty publish more, obtain more grants, and are promoted more quickly,” (p. 7).

Fostering socialization, according to Hessler and Ritchie (2006), can assist new faculty to succeed in the areas of teaching, scholarship, and service. Mentors can help new faculty to decrease the strain of beginning a new role in a new institution through socialization. New faculty may feel isolated and alienated as they begin their journey in academia (Gazza & Shellenbarger, 2005). Socialization within the academic community can provide support and guidance from others who share a common bond and who understand the academic work environment (Hessler & Ritchie, 2006). Faculty with different skill sets and experiences can be

brought together to learn from and gain respect for fellow colleagues (Falk, 2007). With the assistance of seasoned faculty as mentors, the development of a 3 to 5 year scholarly plan may be helpful for new faculty to set realistic academic goals (Banks, 2012). Socialization by a mentor within the departmental setting can help to orient new faculty to the philosophies, goals, policies, and procedures of the nursing department and the institution (Baker, 2010). Colleagues and a mentor will help to support faculty when they have reached their limitations and require guidance (McBride, 2011).

Bittner and O'Connor (2012) found some institutions developed partnerships and joint appointments with other practice and/or academic institutions to provide multiple opportunities for faculty in the areas of scholarship and research. Collaboration between research institutions and traditional teaching institutions can help faculty with long term success of research and scholarly goals. Salary collaborations include leveraging practicing nurses as clinical staff members in an effort to improve and increase the incentives to work in an educator role ((Joynt & Kimball, 2008; NACNEP, 2010). These collaborations can provide a model to help develop a research infrastructure on a smaller scale within a nursing department of a traditional teaching institution. According to McBride (2011), interprofessional collaboration improves relationships, is important to professional development, and may improve retention. An interdisciplinary collaborative approach can enhance the understanding of complex phenomena such as preventing infections, adapting behavioral interventions through the creative use of information technology, and living with chronic health problems (McBride, 2011).

In an effort to improve faculty retention, Gilbert and Womack (2012) developed a one-year faculty orientation based on the NLN Core Competencies of the Nurse Educator to assist

new faculty in transitioning from clinical practice to the educator role. In their outcomes, they found that if a mentoring relationship had not developed within the first year, the chances increased for new faculty to leave the educator role. The competencies of the relationships with students and colleagues may benefit new faculty by promoting senior faculty mentors that will encourage development of collaborative and collegial relationships (Billings & Halstead, 2009). In the NLN Core Competency 6, the nurse educator recognizes their role as being multidimensional with an ongoing commitment to quality improvement (NLN, 2005). This multidimensional role includes mentoring and supporting fellow colleagues, engaging in socialization to the educator role, and balancing the teaching, scholarship, and service demands of the academic institution (NLN, 2005).

Teaching in nursing is complex and incorporates the art and science of nursing along with clinical practice into the teaching-learning methods. Knowledge, skills and values have been identified as teaching competencies that are crucial to the fulfillment of the teaching component of the faculty role (Billings & Halstead, 2009). Despite the obvious nursing faculty shortage, nurse educators have been challenged, by the competencies for the twenty-first century, to prepare students who can deliver competent and considerate care along with the capability of adapting to future nursing roles and navigating current trends in the healthcare system (Billings & Halstead, 2009).

Faculty Development as a Strategy to Improve Retention

Allan and Aldebron (2008) described funding strategies that may be used to retain faculty in the area of professional development. Professional development activities would include providing scholarships to faculty who are continuing their formal education and monetary

assistance with continuing education related to license renewal, skill proficiency, and teaching strategies. These authors encourage strategies that will have sustainable lasting solutions as opposed to quick fixes that are only attractive in the short term. McDermid, et al. (2012) discussed recruiting clinical nurses into the teaching role and through professional development activities, such as the scholarship for continuing education, retain the new faculty for the long term commitment. Banks (2012) thought that encouraging an improved alignment of scholarly endeavors with personal goals might help to retain qualified and confident nursing faculty.

In response to their survey of full-time nursing faculty in Minnesota, Disch, Edwardson, and Adwan (2004) found that professional growth and development opportunities may be helpful tools in creating an environment where nursing faculty wish to stay. The developmental opportunities listed in the article included faculty workshops over topics such as teaching strategies, conflict management, publishing, and interpersonal relationships. Creating a community environment through the sharing of expertise across disciplines may potentially improve faculty retention (Disch, Edwardson, and Adwan, 2004).

In the academic setting, tenure and promotion may depend on faculty development that includes the completion of a doctoral degree requirement. The promotion and tenure evaluative process contributes specific expectations of teaching competence and excellence that is individualized to each school of nursing (Billings & Halstead, 2009). In an effort to retain current faculty and encourage continuing education that will match faculty's personal and professional goals, there is the option of the Doctorate of Nursing Practice (DNP). The DNP is a clinical doctorate that allows a master's prepared faculty to obtain a doctorate degree with fewer hours than the Doctorate of Philosophy (PhD). According to Banks (2010), a recent AACN

survey indicated a greater number of nurses are enrolled in DNP programs versus traditional doctoral programs. The growth of DNP programs could potentially contribute to the faculty shortage as increased numbers of qualified doctoral nursing faculty are needed to teach in the programs (Siela, Twibell, & Keller, 2009).

Faculty shortages contributed to the denials of 1,156 qualified doctoral applicants in 2011 thus making the Institute of Medicines' (IOM) goal of doubling the number of doctoral nurses over 10 years a difficult effort (AACN, 2013). In an effort to address the nursing faculty shortage, the strategy of partnering between the colleges of nursing and education in the establishment of a collaborative doctoral degree has developed (Graves et al., 2013).

Another emerging faculty development strategy is interprofessional education. Interprofessional education is part of the IOM recommendations for nursing education (IOM, 2011). Finkleman and Kenner (2009) encourage the development of faculty into teaching and learning experts in accordance with the IOM vision of faculty development programs at the regional and national level to encourage interprofessional education. Benner et al., (2010) discussed interprofessional education as a collaborative strategy to assist faculty with the burden of coordinating student learning and teaching/pedagogical components.

Academic Flexibility as a Method to Improve Retention

Hessler and Ritchie (2006) discussed flexibility as being a proponent to attracting younger nursing faculty members and keeping existing faculty members. They reported flexibility and versatility were important job characteristics craved by younger generations. A potential faculty member may find a workload consisting of a 9-month or 12-month contract that excludes holidays and weekends to be very enticing. The flexibility discussed in the literature

includes the ability to have a faculty clinical practice outside of the academic setting (Gerolamo & Roemer, 2011). Institutions that are sensitive and flexible to the professional and personal schedules of their faculty will gain credibility and loyalty from the faculty member (Falk, 2007).

Flexibility in workload is essential for faculty to coordinate the required activities of the faculty role (Evans, 2013). Coordination of workload assignments can help to decrease the stress level of faculty who may not be completely comfortable in their designated assignments (Hessler & Ritchie, 2006). As the novice educator may be asked to teach outside their area of expertise, coordinating a teaching assignment with an experienced faculty can help to alleviate the stress level and be a benefit to the new faculty and to the students (Hessler & Ritchie, 2006). Evans (2013) found that multiple roles and role strain related to the workload is a contributing factor in the retention of nursing faculty. Nursing faculty workload was described as not equitable to that of faculty in other departments and unrealistic for the contractual time period by survey respondents (DeBasio, et al., 2003). In the literature review by Gerolamo and Roemer (2011), they reported limited literature on nurse faculty workload and a lack of literature comparing nurse faculty workload with that of faculty in other disciplines. According to Gilbert and Womack (2012), nurse educators are so heavily engaged in their workloads that they may neglect general role expectations of the profession, such as mentoring the next generation. Nick et al. (2012) discussed mentoring as an important aspect for qualified nursing faculty retention and to further career and leadership development.

In an effort to retain faculty, an institution may need to be more flexible with the faculty tenure and promotion guidelines and timelines. In nursing education, there are fewer educators achieving tenure than other disciplines outside of allied health (O'Connor & Yanni, 2013).

According to Banks (2012), many doctoral prepared faculty members may opt for non-tenure track positions due to concerns related to their ability to meet the minimum requirements for a tenured position within the set timeframe. This expectation may cause conflict between the faculty's personal and professional goals, thus placing irreparable strains on the support systems of the faculty (Banks, 2012). Roughton (2013) reported that nurse faculty who were not tenured and not on their institution's tenure track had a 64% higher risk of leaving within one year, as compared to the 42% at higher risk who were not tenured but on a tenure track. Banks (2012) described the current tenure and promotion models as fostering competition instead of encouraging collegiality and collaboration between departmental colleagues.

Nurse practitioner faculty may get placed in the position of choosing between the tenure and promotion process and clinical competencies (O'Connor & Yanni, 2013). Faculty practice is a requirement by most accrediting bodies for advanced practice nursing programs, but educators who maintain a faculty practice may not be getting credit in the tenure and promotion process (Pohl, Duderstadt, Tolve-Schoeneberger, Uphold, & Hartig, 2012). The faculty practice aspect can be particularly true for nurse practitioner faculty who must maintain board certification based on clinical hours. In the study by Pohl et al. (2012), faculty practice was found to be a contributing factor to job satisfaction. Upon this finding, they recommended clarity of faculty practice as a component within the tenure and promotion process.

Gerolamo and Roemer (2011) reported that nursing faculty typically devoted 54 hours per week to their teaching responsibilities. This heavy of a teaching workload contributes to nurse faculty being less likely to conduct research and publish therefore they may not be meeting the requirements of promotion and tenure (Gerolamo & Roemer, 2011). Herbers (2006)

suggested a solution of a part-time workload for tenure track for a maximum of five years to help relieve the stress of the faculty workload hours. Providing new faculty with opportunities to visit with newly tenured or promoted faculty may provide helpful insights into this evaluation process.

Retention Challenges within other Schools of Health Professions

As academic pharmacy enrollment has been steadily increasing, so has the demand for pharmacy faculty, and as a result, faculty recruitment and retention has become a key challenge for colleges (Spivey, Chishom-Burns, Murphy, Rice, and Morelli, 2009). From the 299 survey responses received from survey of 1000 pharmacy faculty members, Spivey, et al. (2009) reported finding that job satisfaction and faculty retention could be improved with competitive salary adjustments and the development of a supportive job environment. Similar to the nursing faculty shortage, Peirce, et al. (2012) reported in their study that faculty retirement is a key issue contributing to the current and continuing shortage of qualified pharmacy faculty. They also found the number one reported reason for pharmacy faculty to leave an institution was excessive workload.

Lowenstein, Fernandez, and Crane (2007) found that of the 532 responses received from a total of 1,408 medical school faculty participants surveyed, 42% had serious intent to leave within 5 years. Their study highlighted efforts to refocus retention efforts to include programs for professional development, scheduled performance feedback, mentoring of family and career balance, tangible achievement recognitions and meaningful faculty inclusion in institutional governance.

Retaining Current Nursing Faculty

Colleges go to great expense and effort to hire new faculty but what strategies do they have to retain new and current faculty? To maximize retention and utilization of current and retiring faculty, an institution must invest time, energy, and financial resources to develop and implement a strategic plan (Falk, 2007). This strategic plan would focus on a desirable work environment, faculty input on needs, research opportunities, and outside input for creative problem solving (Falk, 2007). In an effort to raise the level of awareness of the clinical nursing and nursing faculty shortage, the Robert Wood Johnson Foundation and the American Association of Retired Persons are collaborating through the Champion Nursing Coalition to give a voice to consumers, purchasers, and healthcare providers to find a solution to this growing dilemma (Reinhard & Hassmiller, 2011). This type of collaborative endeavor helps to give national attention to the importance and the outreaching effects of the nursing shortage issue.

Characteristic Domains of the Nursing Faculty Shortage

The Six Domains Model concentrates on these domains to cover the future work environment of healthcare from a systems perspective. Roughton (2013) described the domains as representative of “an organizational framework to illustrate the problem as a whole system and translate study findings into multidimensional, data-driven strategy recommendations to solve” the nurse faculty shortage crisis (p. 224). The six domains are healthcare system, regulatory environment, financing system, education system, technology, and work environment. As previously noted Domain 1 is the healthcare system and is reflective of a marketing strategy in an attempt to generate recognition for academic nursing careers. Domain 2 is the regulatory environment that is an exploration of innovative tenure alternatives. Domain 3 is the financing

system that strives to improve salary/benefits, tuition that is commensurate with faculty workload. Domain 4 is the education system that examines faculty roles and establishes best practices of teachings. Domain 5 is technology that is reflective of opportunities for new and pioneering technology use in teaching. Domain 6 is a work environment that wants to provide comprehensive professional development programs. In an attempt to make changes that will affect the nursing shortage, this system needs to be examined as a whole and not as individual contributing parts. The model can be used to illustrate the problem of faculty retention as a whole system and aid to translate the study findings into complex data-driven strategy recommendations to solve the nursing faculty shortage (Roughton, 2013).

Summary

The literature review revealed minimal research regarding nursing faculty retention. Much of the literature relates to evaluative data about the faculty shortage. Sample strategies have been reported, primarily in theory or anecdotal format (Appendix C). Resolving the faculty shortage will require recruitment efforts along with a focus on retention strategies to retain the current nursing faculty workforce (Roughton, 2013). This study will address the gap specifically by examining the perceptions of associate faculty leaders regarding faculty retention. It will be imperative to understand the perception of individual faculty members and administrators in order to develop effective retention strategies in the future to address the demands for academic nursing faculty. By researching faculty leaders' perceptions of current retention strategies through a qualitative design, this study may ultimately improve faculty retention thereby helping to decrease the nursing faculty shortage.

Chapter Three: Methods

This study was guided by a qualitative descriptive design in an effort to document and describe associate academic leaders' experiences and perceptions regarding current faculty retention strategies (Marshall & Rossman, 2011). This approach was chosen in an effort to gain insight into faculty retention strategies at the associate degree level from the viewpoint of academic leaders as well as to add to the current body of literature.

Purpose and Research Questions

The purpose of this qualitative descriptive study was to examine the experiences and perceptions of faculty leaders regarding the challenges and successes of current nursing faculty retention strategies at the associate degree level. The research questions addressed were:

1. What are the challenges to retaining faculty at the associate level?
2. What recent strategies have faculty leaders implemented to address retention?
3. Which retention strategies do associate faculty leaders believe to be most effective?

Research Design

This study used a qualitative descriptive design that allowed the researcher the opportunity to learn from the experiences of others and provide a comprehensive description of the qualitative inquiry within a naturalistic paradigm (Patton, 2002). A quantitative approach may have limited the participant's responses to numerical values instead of allowing the qualitative approach of description and interpretation of in-depth aspects of the phenomenon. Qualitative research methods were used to facilitate an in-depth study to describe and give meaning to the study. The researcher asks questions about the problem, how it affects the participant, and what their opinion is about the problem. Through participants' responses, a

researcher can gain insight into a participant's experiences and develop a better understanding of their perspective of the world (Patton, 2002).

In an effort to obtain detailed and direct information about participants' experiences and perspectives, the proposed study used a written survey followed by an optional focus group interview format. Using a combination of approaches provides opportunity to gain initial written perspectives and then to expand on ideas via the verbal interaction that focus groups provide. The written survey will provide rich, textual and focused data regarding the study topic. The open-ended questions allow for the qualitative researcher to understand the participant's point of view (Patton, 2002). Focus groups can be useful in obtaining a broad range of information about a phenomenon that includes a researcher observation experience (Sandelowski, 2000). Data quality can be enhanced by the interactions between participants and allows for a natural checks and balance system against extreme views (Patton, 2002).

The focus of a qualitative descriptive study is to provide a thorough summation of a specific phenomenon in everyday terminology (Sandelowski, 2000). Sandelowski (2000) provided further detail in that:

Qualitative descriptive studies have as their goal a comprehensive summary of events in the everyday terms of those events. Researchers conducting qualitative descriptive studies stay close to their data and to the surface of words and events. Qualitative descriptive designs typically are an eclectic but reasonable combination of sampling, and data collection, analysis, and re-presentation techniques. Qualitative descriptive study is the method of choice when straight descriptions of phenomena are desired. (p. 334).

Qualitative descriptive studies are adaptable to obtaining straight answers to questions that are of special relevance to practitioners (Sandelowski, 2000), such as faculty leaders at the associated degree level who participated in this study. The open-ended research questions allowed participants to provide their own experiences and perspectives on research questions to be explored in this study. Participants are given a voice and allowed to tell their personal narratives through qualitative research (Munhall, 2012). In this study, the researcher gained insight from the qualitative findings that may help faculty leaders to improve faculty retention strategies.

Sample and Setting

The purposive sample was English speaking associate degree faculty leaders who were attending a 2014 meeting of the Kansas Council of Associate Degree Nurse Educators (KCADNE). The Kansas Council of Associate Degree Nurse Educators along with the Kansas Association of Colleges of Nursing (KACN) and the Kansas Council of Practical Nursing Educators (KCPNE) join together to form the Tri-Councils for Nursing Education. The Tri-Councils for Nursing Education meet on a quarterly basis to ensure collaboration and quality education throughout the state of Kansas. In an effort to support the transformation of health care in the state of Kansas, KCADNE belongs to the Kansas Action Coalition and the Kansas Center for Nursing. The KCADNE involvement with the Kansas Center for Nursing helps to encourage innovation, support investigation of nursing education and practice questions, and promote wide spread best practices. In the state of Kansas, KCADNE helps to advance the art and science of nursing and encourages the development of nursing partnerships across the state. The KCADNE

president was contacted via email in September 2013 and permission was granted to attend a council meeting (Appendix D).

The purposive sampling strategy allows selecting participants from which one can gain a greater understanding and insight into the phenomenon (Patton, 2002). For this study, purposive sampling was used in an effort to build a sample of participants with the expertise to provide knowledge and background specific for the study topic of faculty retention. There are approximately 25 members in KCADNE. The sample size was 22 KCADNE members present at the council meeting. All of the KCADNE participants completed the survey with 4 participants remaining for the first focus group. Due to the timing of meetings and interest by participants, a second focus group with 7 participants was offered later in the day. As with any qualitative research, purposeful sampling has an overall goal of obtaining a sample deemed to be information-rich for the purpose of the study (Sandelowski, 2000). A narrow scope of study allows in-depth inquiry with a smaller sample (Patton, 2002).

Data Collection Procedure

Data collection occurred after the proper institutional review process (IRB) at the University of Kansas Medical Center (KUMC) had been completed and final approval given. The KCADNE president had been contacted via email in September 2013 and permission was granted to attend a council meeting after IRB approval of the study. Using purposive sampling, members present at the KCADNE meeting were surveyed.

A Letter of Invitation (Appendix E) explaining the study's purpose, the researcher's contact information, and informing of the survey to be followed by a focus group was provided to all participants by the KCADNE president approximately one week prior to the council

meeting. At the beginning of the council meeting, a letter of invitation and the individual surveys inclusive of the demographic information, (Appendix F) was given to each participant. A survey consent form (Appendix G) was provided to each participant prior to the survey. Implied consent was assumed with completion and return of the survey. Participant demographic information was also obtained with the survey. Completed surveys were collected in a large envelope prior to start of the council meeting. As noted, all participants invited to complete the survey were invited to participate in a focus group following the KCADNE council meeting. A written consent form (Appendix H) was completed by participants prior to the start of each focus group.

Data Collection Tools

The individual survey was generated from the literature and the adapted Six Domains Model (Appendix B). The survey included open ended and probing questions in an effort to obtain a diversity of information from the associate degree faculty leaders present at the KCADNE council meeting. The survey questions collected perceptions of the associate academic leaders' experiences with faculty retention. Qualitative inquiry aims to decrease the influence of predetermined responses therefore truly open ended questions are used so participants can respond in their own words (Patton, 2002). The survey questions need to be clear and concise with proper language to decrease any chance of confusion or frustration from the participant. The researcher is responsible to pose clear questions that help to establish rapport with the participants (Patton, 2002).

Two focus group interviews (Appendix I) followed the KCADNE council meeting and lasted for an hour each. Participants were able to leave after completion of each of the focus

group interviews. Focus groups are used with a purpose to listen, gather information, assist in understanding how people feel or think about a phenomenon, and to gather opinions (Krueger & Casey, 2009). Focus groups can help promote participant self-disclosure to a researcher who is attempting to identify issues that may influence behaviors or to investigate individual feelings regarding a specific phenomenon (Krueger & Casey, 2009). The researcher was the moderator for the focus groups. The focus group interview guide was developed based on the literature and the adapted Six Domains Model (Appendix I). As indicated groups were composed of members who shared specific characteristics relevant to the study topic as directed by the literature (Marshall & Rossman, 2011; Krueger & Casey, 2009). For this group, characteristics included being a member of the KCADNE and a faculty leader at the associate degree level. Focus group interviews should be carefully planned and conducted by a skilled researcher that will allow group participants to share ideas and opinions in a permissive and nonthreatening environment (Krueger & Casey, 2009; Marshall & Rossman, 2011). As indicated, focus group interview questions are generally moderately-structured open ended questions (Sandelowski, 2000). The focus group interview was audio-recorded with two recording devices and followed by a verbatim transcription per the individual researcher. A scribe was present to take notes during both focus groups and assisted with clarification of content. Audio-recorded transcriptions were checked for accuracy by comparing the written transcription data against the audio recording. Pseudonyms only were used in the written transcription of the focus group.

Member checking (summarization of responses to questions) was performed with the participants at the end of the focus group to obtain clarification, corrections, or further insights (Marshall & Rossman, 2011). The researcher kept field notes and a reflective journal inclusive of

observations such as non-verbal language of the participants. These observations are essential to qualitative research in an effort to accurately record events, behaviors, and artifacts from the social setting (Marshall & Rossman, 2011). Field notes should be detailed, concrete, and nonjudgmental descriptions of the researcher's observations (Marshall & Rossman, 2011). Document review from different sources can be used to elaborate or corroborate information and allow for multiple perspectives related to the research study (Marshall & Rossman, 2011). Reviewed documents consisted of retention strategies utilized in the academic setting obtained during literature review.

Researcher Background

According to Marshall and Rossman (2011), a researcher should possess communication skills that will effectively question without threatening. The researcher is considered a primary instrument in qualitative research (Patton, 2002; Marshall & Rossman, 2011). The researcher has completed two courses in qualitative research within a doctoral program at the University of Kansas, School of Nursing (KUSoN). The researcher completed outside reading on conducting focus groups and serves as an instructor who leads numerous student discussions. Mentorship was provided from senior faculty and dissertation chairs.

Data Analysis

This study used qualitative inductive content analysis to analyze the participant data. In qualitative descriptive studies, qualitative content analysis is the strategy of choice (Sandelowski, 2000). In analyzing qualitative data, the researcher strives to understand the phenomenon as a whole (Patton, 2002). Data analysis began after completion of the survey and focus groups and was on-going until all data had been systematically analyzed.

Survey data analysis begins by applying codes to data and interpreting the information (Sandelowski, 2000). The researcher thoroughly read the surveys to examine the associate nursing faculty leaders' perceptions regarding faculty retention strategies and to reach immersion in the data. The survey information was typed into a database by the researcher to begin analyzing for patterns. Meaning units, specific words in the text, were highlighted to denote significant thoughts or ideas. Codes were systematically assigned based on the meaning units, or highlighted phrases, to assist in organizing the data. The individual codes were then systematized into categories and sub-categories based on similarities. Themes were identified after analyzing and interpreting the categories was completed as described by Patton (2002).

Focus group analysis should be systematic, sequential, verifiable, and continuous throughout (Krueger & Casey, 2009). The focus group audio-recording was transcribed word for word by the researcher. After transcription was completed, accuracy was verified by the researcher through listening and comparing the recordings to the transcription. Performing transcription allows the researcher the opportunity to be immersed in the data and help to stimulate insights (Patton, 2002). The researcher re-read the transcription in entirety then began the process of coding. According to Hsieh and Shannon (2005), understanding and providing knowledge about the phenomenon being studied is the goal of content analysis.

The researcher read the transcription to examine the associate degree faculty leaders' perceptions of faculty retention strategies and attempted to reach immersion in the data. Specific words or phrases within the transcription were highlighted to denote significant thoughts or ideas. From these highlighted words or phrases, codes were systematically developed to assist in organizing the data. The codes assisted the researcher to then form categories and sub-categories

of similar commonality. Categories help to group patterns with the final development of overarching themes that are inclusive of the methods of data collection (Graneheim & Lundman, 2004). Categories should help the researcher describe the phenomenon, increase understanding, and generate knowledge (Patton, 2002). Themes were generated from across the categories. According to Graneheim and Lundman (2004), themes occur across categories and link together category meanings. Data can have many meanings, so a theme is not mutually exclusive to one category and codes and categories can fit into more than one theme. Data was hand coded and discussed among the researcher and specific faculty members experienced in qualitative research.

Trustworthiness and Methodological Rigor

Criteria to support and strengthen trustworthiness are credibility, transferability, dependability, confirmability, and authenticity (Lincoln & Guba, 1985; Tobin & Begley, 2004). Rigor is concerned with ethics and is the way researchers can display integrity and competence (Tobin & Begley, 2004). Credibility was attained in several ways. First, the researcher had prolonged engagement with the literature over a period of one year and then became submersed in the data. Observation was done by the researcher as supportive evidence to credibility. Observation and prolonged engagement demonstrate credibility of the research (Tobin & Begley, 2004). Data triangulation increases credibility and was approached through observation, interviews, and document review. The use of triangulation helps to strengthen the confirmability (Munhall, 2012). Authenticity can be demonstrated by authentic citations of differing realities that are supported by the concerns, issues, and underlying values of the participants' personal

viewpoints (Tobin & Begley, 2004). Elo and Kyngas (2007) reported an incomplete analysis process if the citations were less than the authorial text.

Member checking was used to strengthen the credibility, confirmability, and dependability of the study (Lincoln & Guba, 1985). Member checking as identified above occurred with participants at the end of the focus group. Member checking may also be accomplished through the validation of the findings with participants at a later time, thus allowing participant feedback on the accuracy of the researcher's interpretations. Participants will receive an email from the KCADNE president for validation and clarification of the researcher's interpretations of interview data. According to Lincoln and Guba (1985) member checks are a crucial component for establishing credibility. Peer debriefing was used throughout the research process to strengthen the credibility, help with the identification and development of themes within the data. With peer debriefing, the researcher can utilize knowledgeable colleagues to get feedback on the coding during the data analysis (Marshall & Rossman, 2011).

An audit trail was kept by the researcher to help promote dependability and for use in the decision making process. The audit trail can track the decisions made about potential themes and patterns used in the interpretation of the participant's responses. The audit trail consisted of recorded focus groups, transcriptions, narratives, survey responses, and field notes. Reflective journaling after the data collection was part of the field notes. For transferability, the researcher used open ended questions to collect data that included the participants' experiences and perspectives of retention strategies. This data allowed the researcher to provide a thick vivid description that permits other researchers to identify if the findings will be useful for others in comparable situations (Lincoln & Guba, 1985; Marshall & Rossman, 2011).

Limitations

Researcher bias is a potential risk with qualitative research in that the researcher may impose their own value with data interpretation (Munhall, 2012). Reflective journaling allows the researcher to report personal experiences, thoughts or feelings and how those observations may potentially affect the experience (Patton, 2002). The time after the focus group interview was an important period of reflection and awareness for the researcher. This time of self-reflective journaling helped to decrease researcher bias and assisted in guaranteeing the reliability of the information. With the use of a purposive sample, there is the risk of participant's having similar characteristics and perceptions that may bias the research. Additionally, qualitative research has a risk of participant bias. There is potential that participant's may alter responses to reflect what they think the researcher is attempting to discover.

Ethical Considerations

University of Kansas Medical Center, Human Subjects Committee approval was sought prior to any data collection. Prior to the start of data collection, the researcher completed the University of Kansas Medical Center Human Subjects Protection and the University of Kansas Medical Center Health Information Portability and Protection Act tutorials. These programs informed the researcher of the responsibilities of ethical research conduct regarding the welfare and confidentiality of research participants and the protection of participant's health care information.

Participants were informed that participation was completely voluntary and that they could withdraw from the study at any time without fear of reprisal. There were no risks or direct benefits to the study participants. Participants were assured of the confidentiality of the responses

they provided within the study. A research consent form containing information regarding the study was reviewed and provided to the participants. Prior to survey data collection, participants were asked to review a waiver of documentation of consent. Written consent was obtained from the participants prior to participation in the focus group interviews.

All data was collected and maintained in a secure method. The researcher used pseudonyms to protect the confidentiality of the participants with each participant given a pseudonym. The surveys and transcriptions were identified with a pseudonym only. Transcriptions were shared with the dissertation chair via KUMC secure file transfer system. Audio files were kept in a secure and locked location to be destroyed after the appropriate time frame set by the University of Kansas Medical Center, Human Subjects Committee.

Summary

Chapter three discussed the study's methodology, including design, sample, and setting. Specific data collection methods and data collection tools were discussed, such as the survey and focus group interview. Data analysis was described for the study. Measures to ensure trustworthiness, methodological rigor and ethical considerations were explained.

Chapter Four: Findings

The purpose of this qualitative descriptive study was to examine the experiences and perceptions of faculty leaders regarding the challenges and successes of current nursing faculty retention strategies at the associate degree level. Chapter four presents the findings for the data collected during this study, along with a description of the sample. A thick description of the phenomenon is provided along with a discussion of the four identified themes.

Sample and Setting

The sample consisted of 22 faculty leaders from the state of Kansas who attended a Kansas Council of Associate Degree Nurse Educators (KCADNE) meeting in 2014. Associate degree faculty leaders were able to participate by completing the survey and/or participating in a focus group.

Twenty-two participants completed and returned the written survey and demographics. As shown in Table 1, there was 1 male participant, 21 female participants and all 22 participants were Caucasian. Of the 22 participants who completed the survey, 4 were from Associate Degree of Nursing (ADN) programs, 10 were from practical nursing to ADN programs and 8 surveys did not specify program type. The highest degree of nursing education among participants was one Doctorate of Philosophy (PhD), one Doctorate of Nursing Practice (DNP) and 20 Master's of Science in Nursing (MSN) degrees. The years of experience teaching nursing school consisted of 2-40 years. Of the 22 written survey participants, 11 completed the written survey and participated in a focus group experience following the KCADNE meeting and 11 completed the survey only.

Table 1

Demographic Characteristics of the Survey

	Totals
Type of Program	8 unanswered 4 ADN program only 10 PN to ADN
Race/Ethnicity	22 Caucasian
Gender	1 male 21 female
Highest Degree of Nursing Education	20 Masters of Science in Nursing 1 Doctorate of Nursing Practice 1 Doctorate of Philosophy
Years as Licensed Registered Nurse	5-45 years 30.00 Mean 10.48 Standard Deviation
Primary area of Nursing Experience	10 Medical/Surgical 3 Education 2 Mental Health 2 Critical Care 2 Obstetric 1 Pediatric 1 Women's Health 1 Neonatal Intensive Care
Years of Teaching at School of Nursing	2-40 years 17.34 Mean 11.68 Standard Deviation
Employment Status	21 Full-time 1 Part-time

Note. ADN = Associate Degree in Nursing; PN = Practical Nursing.

On the written survey, the participants reported their years to retirement and the reasons for leaving their faculty leader role. This is displayed in Table 2.

Table 2

Motivation and Years to Retirement

	Total
Years to Retirement	0 days to 13+ years
Reasons for Leaving Faculty Leader Role	17 retirement 2 return to faculty 2 no plans to leave 1 stress 1 finish FNP, move into practice

Note. FNP = Family Nurse Practitioner.

Focus Group Themes and Written Survey Responses

Data from the focus groups were analyzed and coded first revealing four themes. The written surveys consisting of faculty leaders' perspectives were analyzed following the transcribed focus group data analysis. The written survey responses were found to be reflective of the four identified focus group themes. Technology was mentioned on the surveys as supportive to teaching but was not part of the focus group discussions as directly related to nursing faculty retention. The four themes identified from the focus group data analysis were: 1) Addressing salary as a "huge" factor in retaining faculty; 2) Improving the work environment; 3) Characterizing vacant faculty positions; 4) Identifying strategies to support new faculty. The themes are reflective of the issues nursing faculty leaders' encounter with faculty retention at the associate degree level.

Theme 1: Addressing salary as a "huge" factor in retaining faculty

This theme focuses on salary as the most common and recurring struggle for retaining nursing faculty as described by the participating faculty leaders of associate programs. All of the faculty leader participants reported salary as a "huge" challenge to retaining current nursing

faculty and hiring new nursing faculty. They discussed the perception that a teaching contract is much less than a clinical contract in regards to salary. One participant shared, “they think it is a huge cut, but it is only a 170 day contract, so dollar for dollar, day for day, probably very much the same.” In an effort to demonstrate the competitiveness of the academic setting, some of the faculty leaders make obvious the salary differentials to the potential hire. “We try very hard to take nine months of what they’re making now and put that into nine months for us,” discussed a participant. Another participant described their process as “I sit down with them and do the math, you know, and let’s say this is what we are offering you but let’s do the math,” in an attempt to assist a new hire in understanding the nuances of an academic contract versus a clinical contract. “But sometimes it still doesn’t make a difference when they look at that and you say the number,” added a separate participant. In an effort to offset the salary, one participant reported having an “awesome benefit package” and “it closes that gap quite a bit when they don’t have to pay for daycare in the summer or they can work another job in the summer, if they want to.”

Overload was mentioned as an alternative way to supplement salary. A nursing faculty workload that is above the contractual agreement is considered overload. “That has been one of our biggest areas for maintaining faculty, is that the faculty have been wanting to do some overload, so instead of hiring a clinical instructor, they just do extra clinical to try to supplement their income,” a participant shared. Other participants discussed attempting to accommodate their faculty with overload to supplement the income and aid in retention. One faculty leader participant shared, “I know some people absolutely have to have overload or they physically cannot stay.” For those faculty members who require added income and cannot get overload, they may begin to consider other options of a new position with higher salary.

Overload was not always mentioned in a positive way. On the written surveys, faculty leaders reported faculty members are “expected to cover and work short, often work at home and do not get compensated for it.” They expressed concern related to faculty members having overload or an increased workload that do not have any experience or background with the teaching topic. One participant was concerned about how the faculty would be able to add overload to their contractual workload, stating “I don’t know where any of mine would fit it in.” In addition to administrative duties, faculty leaders are sometimes expected to “teach full loads due to a shortage of faculty and other faculty already having extra duties.” Faculty leaders described that the “additional duties do not leave as much time to prep for classes or work with students.”

Theme 2: Improving the work environment

This theme focuses on flexibility, recognition and encouragement to improve the academic working environment. Overall, encouragement was seen as necessary to retaining faculty. One faculty leader participant shared, “what I think I find more than anything that retains people is that in nursing nobody does a really great job of encouraging each other.” She continued that “I spend as much time being an encouraging cheerleader to retain people as I do anything.” This participant shared that she will give little gestures of appreciation and recognition to her faculty such as packages of soup, stating, “I don’t know if it is education or nursing, people don’t get that recognition so they kind of burn out.” She also provides an educational resource book to all new faculty members to help with the transition into the academic setting. The faculty leader expressed concern related to the lack of encouragement

provided to faculty members, but was not sure if this phenomenon was throughout the academic environment or just within nursing.

All the faculty leader participants agreed that formal or informal recognition would help to improve retention. The problem with recognition is the lack of resources at the college and departmental level. One participant shared, “we are just so limited in resources that you are digging into your own pocket as the director to provide stuff for them.” Another participant shared that their college has a formal monetary recognition award based on “above and beyond” performance, but the award is only for full-time faculty and not just nursing. Other participants expressed no type of recognition was given at the college or departmental level. One participant shared that giving recognition and encouragement “is a skill, I have learned to develop it, otherwise I wouldn’t have it.”

Faculty leader participants agreed the flexibility of a teaching position helped to retain and/or recruit faculty. A participant shared, “they like the flexible schedule, my full-time are all on nine month schedules, so they love having their summers.” She stated that retention was not an issue for them; they have only had one faculty member leave to go to clinical practice in the past few years. Another participant shared that “flexibility” was the expectation of an academic career by new faculty. Many participants view flexibility as very positive and helpful in promoting a better work environment. One participant stated, “I personally like that in a job and so it seems to be one of the positive things.” Another participant discussed the option of negotiating flexibility of working from home for instructors who drive a distance to work. She stated “the amount of work they have to do, they’re not not going to work that day. They drive so

flexibility is huge for us.” This faculty leader believed that having flexibility in the teaching position helped to retain faculty and faculty remained productive.

Another issue shared by many participants that may affect nursing faculty retention was the faculty dynamics present in a department. A faculty leader participant shared, “we have difficulty with faculty dynamics among themselves.” She went on to add that “communication between one another, someone always tries to overrun someone else, the dynamics are very, very difficult and just add to the stress.” Another participant added “I think a part of that is just nursing in general, they are assertive.” Two of the faculty leader participants agreed that faculty dynamics was their number one problem in the work environment. One of the participants used the KCADNE group as a comparison stating “my job would be a lot, a lot easier if my faculty had the collegiality of this group.”

Theme 3: Characterizing vacant faculty positions

This theme focuses on the characteristics of current open faculty positions. Overall, participants agreed that primarily open faculty positions are for part-time faculty. One faculty leader participant shared, “we don’t have any full-time positions currently...part-time is very hard for us to fill.” Another participant stated “there are always open positions.” A few participants discussed having small nursing faculty numbers and most will stay till they retire. A participant stated “filling the positions when people retire is virtually impossible.” Retiring nursing faculty are considered a resource who are phased out slowly while being utilized for mentoring new faculty. Participants shared that vacant positions are common in the specialty areas of obstetrics, pediatrics and psychiatric/mental health. These particular open positions include both didactic and clinical. One participant described their strategy for attempting to fill

difficult positions, “hard to fill positions, you can go off the salary scale and actually hire and pay them more money.” She went on to share that this strategy can cause “a lot of riff” with other faculty on campus who do not get the same salary offered.

An important challenge of having open faculty positions is that some colleges admit nursing students based on the number of faculty. A participant shared, “if I have this many faculty already signed on contract, then I know I can accept that many students for the fall.” She described this tactic as “working backwards”. Five faculty leader participants reported on the written surveys having to purposely limit student enrollment due to open faculty positions. Filling vacant positions was described as “feast or famine.” One faculty leader participant stated “sometimes you have a position and can’t get it filled then you might have three come in just because the circumstances are just right.” A few participants shared using adjunct faculty to fill their vacant positions. When using an adjunct, technology can help to keep them connected to the academic setting as reported by a faculty leader on a written survey. One participant described filling their positions with adjunct faculty, “an adjunct that has been with you for a while and wants to move forward or they live in the area.” She continued stating “the more rural you are...the more difficult it is” filling positions because the potential for masters in nursing prepared faculty is “just not there.” The rural setting makes for greater difficulty in filling the position therefore an increase in workload or over time is created for current faculty. In this situation the adjunct is being encouraged to continue their education and obtain a master of science in nursing to fulfill the full-time faculty position requirements.

Faculty leader participants agreed that a roadblock to retaining faculty is the educational requirement of a master’s degree in nursing. Faculty with a master’s degree in business

administration or organizational leadership can be hired for one year only. “Our difficulty is we have people who want to teach, they don’t have the, um, masters in nursing,” expressed a faculty leader participant. Another participant shared, “we can’t hire them as full-time faculty because they have a master’s degree in something besides nursing.” Participants shared their struggles with having “perfect” faculty that could not stay because they did not meet nursing’s criteria for teaching. The regulations from the State Board of Nursing require a master’s degree in nursing to teach at the associate degree level. One participant reported asking the Board of Nursing to consider a potential nursing faculty based on a non-nursing master’s degree with a teaching certificate but was told no. She shared “credentials do not a teacher make” suggesting that this faculty member was a great teacher but just didn’t have the right credentials for the state board. Another participant reported telling part-time nursing faculty who were planning graduate school, “that we will look more favorably on them as a full-time hire should one come, if they are getting their masters in nursing education.” A few of the faculty leader participants agreed that the best applicant was not always the masters prepared one, but a bachelors prepared applicant. “But I had to hire the masters prepared person because I had to have that level of a degree right now,” reported a participant.

Many of the faculty leader participants believe the nurse practitioner track has more incentive for students than the education route. A participant shared, “and part of the reason is because they have reimbursement, loan reimbursement, and they don’t through education.” She went on to share that a potential hire explained that she would have to repay her loan if she didn’t practice, “you know that I would stay because I really like this but it’s going to cost me \$20,000 dollars a year if I do.” Many of the faculty leaders agreed on this point. Some of the

participants expressed frustration having supported students through their masters' programs, with students then leaving to work in a clinical position with higher salary or loan forgiveness. "We have had faculty who have gone back for their masters, they do go on the APRN track and the minute they have it they are gone," explained another participant. In an effort to keep nurse practitioner faculty, one faculty leader participant shared that, "we don't have tuition reimbursement, but have a salary scale and we give them time off to go to school." She went ahead to state, "we have always tried to be very flexible to allow them to finish their education." Many participants think that masters' students are being encouraged down the nurse practitioner route due to the possibility of a bigger salary. One participant reported "the whole focus for students is practice because that is where the money is." Another participant shared that "what I'm seeing, they go the advanced practice registered nurse route and the number one reason is they can make so much better money."

A few of the faculty leader participants shared frustration with hiring nurse practitioners for a faculty position. One faculty leader participant shared, "I don't want to hire anymore nurse practitioners, because they won't stay. The last one that we hired only stayed for three years." A different aspect of nurse practitioner faculty revealed by the participants was that "the problem is instead of trying to teach them fundamentals they are trying to teach them to be a nurse practitioner instead." There seemed to be an agreement that nurse practitioner faculty had difficulty teaching undergraduate fundamentals. Another faculty leader participant shared the frustration of hiring someone then, "we go through cycles where they'll come on and we work with them to finish their masters' degree or nurse practitioner degree and they will walk out the door."

Another issue shared by the faculty leader participants that is sometimes encountered with potential new faculty is the preconceived idea that teaching is a “pud job.” One participant shared, “yeah, it is more work than they realize even though you tell them.” A discussion was shared of a community nurse who thought she could retire, “kick back” and teach. “If they don’t really like to teach it’s not going to work out, they are not going to stay, because it is too hard,” contributed another participant.

Theme 4: Identifying strategies to support new faculty

This theme focuses on strategies discussed by the participants to help support new faculty and thereby increase retention. Mentoring was discussed as an important part of the effort to retain new nursing faculty members. Many of the mentoring programs discussed consisted of a senior faculty member being assigned to the new faculty as a resource person. One faculty leader shared, “we assign, just assign a new faculty to seasoned faculty member or senior faculty to work with them as long as they need.” A few of the participants shared that the department and the college had separate mentoring programs and/or orientation checklists for new faculty. “It is a very intense check-list, they are assigned to another full-time what you would call tenured or more experienced faculty,” shared a participant in describing their mentoring program. Another participant shared that they have a faculty member of 36 years who closely mentors new faculty. She thought having that particular faculty member be a mentor “has been something that has helped I think keep faculty.” Many of the faculty leaders agreed that retired or retiring faculty members are a potential resource for mentoring. One participant shared that they have past faculty members “sitting in on a couple of their courses and trying to give them some feedback.”

A few participants revealed that “mentoring is great theoretically but if you don’t have the opportunity then what do you do?”

Many of the faculty leader participants expressed the need for mentoring during the first semester for a new nursing faculty member. One participant shared, “in my experience with the new people that I have hired, the first semester is the hump.” They all agreed that helping new faculty during that first semester would help with retention. The participant went on to add that “once they get that first semester done they think if I can do this, I can make it.” One faculty leader participant shared that during the first semester sometimes the administrator “has to intervene” with students when new instructors are upset at the students. New instructors can get frustrated with students in the classroom and need a show of support from the faculty leader or seasoned faculty to intervene with students. The faculty leader or seasoned faculty may intervene by going to the classroom and assisting the new faculty member with classroom management. Another participant added “during that first semester, you know when we are mentoring, precepting and you being in the classroom can help and guide them” with classroom management and demonstrate new faculty support in front of students. A discussion ensued that expressed the frustration on faculty behalf with student behavior and attitude that can ultimately affect faculty retention. When a program continues to have faculty turnover, “students are like oh I got another new instructor” shared a participant. Students do not always react well to new faculty and “the faculty see it as here I’ve spent 40 hours this week trying to get ready for you for lecture and then feel unappreciated and ignored” added another faculty leader participant.

Encouraging students currently working on an associate degree in nursing was offered as a resource for obtaining new and promising nursing faculty members. This concept was

described by participants as “growing your own.” “We start recruiting when we see a student with promise,” stated a faculty leader participant. Another participant offered “oh yeah, I know we do the same thing.” Many of the faculty leader participants shared similar comments of encouraging students who they perceive as potential nursing faculty members. One participant described encouraging faculty with a non-nursing masters to return for a master’s in nursing, “you grab on to those people, give them an adjunct position for a period of time and encourage them.” Another participant shared her story of talking with a couple of students stating “hey you know that you have great people skills and are extremely bright; get a few years’ experience, go through a bridge program and you would have a job with me.” One of the faculty leader participants described a leadership class they started as an elective with the intent of recognizing strong students with faculty leadership qualities and thereby grooming potential new faculty members.

Survey Responses

The written survey responses of 22 faculty leader participants are displayed in Table 3. This data was analyzed in the written response form as shared by the faculty leaders. The written responses are the perspectives of the associate degree faculty leaders. The data analysis of the written surveys revealed responses reflective of the four themes developed from the focus group transcription analysis. In contrast to the focus group themes which included limited technology discussion, technology was noted on each of the written surveys. Technology was not part of the focus group themes, but is a part of the study’s conceptual framework so will be addressed. The faculty leaders described the technology used to support teaching in their respective nursing departments such as a specific Learning Management System, multimedia use, simulation labs,

and computerized testing. The written surveys of the faculty leader perspectives did not relate technology directly back to faculty retention issues. Two faculty leaders mention the presence of a technology committee that offers technology support. Several others stated having e-books, iPads and online courses for their teaching technology. Another faculty leader reported having electronic health records to support student learning.

Table 3

Compiled Survey Responses

Thematic Concepts	Number of responses reflecting thematic concepts
Salary	22
Overload	16
Tuition reimbursement	15
Open faculty positions	2
Mentoring program	19
Rural location	1
Technology	21
Faculty dynamics	2
Encouragement	3
Flexibility	3
Credentials requirement	3
Recognition	1
“Grow your own”	1

Note. N=22.

Summary

The analysis of the data from the focus groups produced four final themes with supporting data of the faculty leaders’ written perspectives of all 22 surveys. The four final themes were: 1) Addressing salary is a “huge” factor to overcome in the effort to retain faculty; 2) Improving the work environment; 3) Characterizing vacant faculty positions; 4) Identifying strategies to support new faculty. The themes are indicative of the challenges of faculty retention

as faced by associate program faculty leaders from across the state of Kansas. This chapter included a description of the sample and setting, and a descriptive summary of the findings. A thick description of the themes was provided that included excerpts from the focus groups.

Chapter Five: Conclusions and Recommendations

The purpose of this study was to examine the experiences and perceptions of faculty leaders regarding the challenges and successes of current nursing faculty retention strategies at the associate degree level. This chapter provides a discussion, implications, strengths, weaknesses, and recommendations for future research. Data collection was guided by three research questions:

1. What are the challenges to retaining faculty at the associate level?
2. What recent strategies have faculty leaders implemented to address retention?
3. Which retention strategies do associate faculty leaders believe to be most effective?

Through data analysis, insight was gained into the associate faculty leaders' perceptions and experiences related to faculty retention strategies.

Discussion

Retention of faculty is a very complex challenge for nursing education. Nursing faculty leaders are constantly concerned with discovering the most effective strategies for retaining faculty. The three research questions are all addressed by the four identified themes and supporting written surveys. The four themes were developed through a qualitative analysis process of coding, formulating categories and building themes from focus group transcriptions. Then, written survey responses were analyzed and support for the thematic concepts was found. Through the data analysis, an understanding of the faculty leaders' experiences and perspectives was obtained. From within the experiences and perspectives, the themes reflect a mixture of strategies and challenges that speak to each of the three research questions. The following discussion will be directed by the four themes.

Theme 1: Addressing salary as a “huge” factor in retaining faculty

Theme 1 highlighted the issue of nursing faculty salaries. The theme focused on the perception of the academic salary versus the clinical salary and included thoughts on overload of a faculty members' contracted workload. The faculty leader participants shared strategies of changing new faculty perceptions of the academic contract with a breakdown of the salary as compared to the salary of a clinical position. The faculty leaders described taking the time to sit down with new faculty and provide a comparison of the academic salary to the clinical salary. They stressed the importance of spending time with a potential new faculty member to answer questions and explain the contract, putting a value on flexible schedules was also discussed. This effort was used to help change the perception of the salary disparity. According to the faculty leaders, academic salaries are competitive and comparable to most clinical salaries when one compares the money and the time commitment. In contrast, the literature states low salary is a negative impacting factor for recruitment and retention of nursing faculty (Allen, 2008; Benner, et al., 2010; Joynt & Kimball, 2008; Yordy, 2006). According to Wood (2011), the discrepancy between salaries will continue to rise as clinical salaries have increased in recent years and teaching salaries have not. This presents ongoing challenge.

Faculty requested overload was discussed as an alternative way to supplement the teaching salary and help to fill open positions for the nursing department. Overload is considered workload that is above the contractual agreement. Overload pay can be an incentive and a financial support for faculty members who are returning to graduate school to obtain their master of science in nursing. Overload pay can help to ease the financial burden of graduate school, but this strategy can be concerning if the requested overload becomes burdensome or is an

expectation from administration. Faculty leaders reported that overload is not always compensated. The faculty leader needs to be aware of select challenges related to overload, for example, multiple faculty members requesting overload to supplement salary, administrative expectations of overload, and faculty dynamics related to who receives overload. The faculty leaders did believe the option of overload to supplement salary made an impact on faculty deciding to stay or leave to pursue a higher salary position. When school is in session, nursing faculty report devoting an average of 54-56 hours per week to their teaching responsibilities (Gerolamo & Roemer, 2011; Kaufman, 2007). If a faculty member is already devoting 54-56 hours per week, the faculty leader needs to be aware that adding overload may affect the faculty members' abilities to be successful on a professional and personal level. Faculty leaders may need to consider monitoring and supporting faculty members who are in overload situations to be sure the workload overload is sustainable.

Theme 2: Improving the work environment

Theme 2 focused on the challenges the associate program faculty leaders faced in attempting to improve the academic work environment, thereby potentially increasing nursing faculty retention. The faculty leaders discussed the necessity of encouragement and recognition that should be provided to faculty as an integral part of the overall plan to increase faculty retention. They discussed the time put in to being a cheerleader for their faculty. The faculty leaders believed that providing recognition and encouragement can help to prevent burnout and retain nursing faculty members. Derby-Davis (2014) encouraged faculty administrators to provide a supportive environment that celebrates faculty members' successes and achievements in order to promote job satisfaction. The faculty leaders were concerned the education

environment lacks these characteristics and attempt to implement little ways within their own departments to provide some recognition and encouragement to both new and current faculty members.

This task has proven to be difficult for faculty leaders due to the lack of resources within their department and at the college level. Many admitted to using personal funds in an effort to provide small gestures of recognition and encouragement to their faculty members. The literature often suggests incorporating faculty recognition into improving the work environment of nursing schools (AACN, 2005; Allen, 2008). Faculty recognition and an improvement in the work environment seem to complement each other. Faculty recognition can be given from students or from other faculty either from within the department or across campus. Brady (2010), encourages establishing both an internal and external means of recognition, such as offering faculty member of the year and supporting faculty nominations for recognition from local, state or national agencies. Faculty leaders may consider establishing a formal or informal method of faculty recognition to potentially improve the work environment, thus positively impacting faculty retention.

Faculty leaders have learned that flexibility within the teaching position tends to be an expectation from the faculty members, promotes a better work environment and has a positive effect on faculty retention. Flexibility as described by faculty leaders in this study included negotiating the ability to work from home and consideration for professional and personal schedules. Flexibility is a characteristic that faculty leaders expressed wanting to have in their own positions. According to Hessler and Ritchie (2006), flexibility attracts younger nursing faculty member and helps to retain existing faculty members. When considering a 9-month or

10-month academic contract, excluding holidays and weekends, this type of flexibility can be very persuasive and offset salary differentials. Falk (2007) reported nursing departments that were aware of and flexible to both the professional and personal schedules of their faculty gained credibility and loyalty. Additionally flexibility between co-workers is needed in order to coordinate activities that are required of the faculty role. Co-workers who are flexible and work together to accommodate each others' professional and personal schedules can help to improve the work environment. Technology such as online courses resources and learning management systems can be used to enhance the flexibility of a faculty position by providing a teaching method to rural faculty members. High fidelity simulation is another option to ease the teaching workload of aging faculty (RWJF, 2006; RWJF, 2007). Technology such as high fidelity simulation within the nursing department can provide an environment of lower stress and decreased physical demands over the clinical setting. With the current nursing faculty shortage, aging faculty with their skills and experience may find technology an incentive to stay longer.

Also, aging nurses are a retainable resource for both the academic and clinical arenas, but organizations will need to adapt conditions to help extend their work life, for example supportive workplaces, flexible work schedules, and expanded roles (Robert Wood Johnson Foundation, 2006). The suggested changes would not only help make continuing in the profession attractive to older nurses, but would assist with retention of younger nurses (Robert Wood Johnson Foundation, 2006).

Faculty dynamics was described as a major difficulty for faculty leaders within their respective nursing departments. In referencing faculty dynamics, faculty leaders described strong personality differences attempting to co-exist within the department. Faculty leaders described

working hard to keep harmony within a department filled with assertive nursing faculty members. Another faculty leader participant described faculty members as all leaders and no followers. They stated their leadership positions would be easier if faculty members communicated better with each other, instead of trying to overrun each other. Faculty leaders referred to communication as a part of faculty dynamics. Communication issues were not found as specific predictors for faculty retention in the literature, but may be important for future study.

In some cases, faculty dynamics with so many personalities was viewed by the faculty leaders as potentially disruptive to the academic environment, including causing job dissatisfaction and affecting faculty retention. The literature supports a faculty members' need for job satisfaction to increase retention of current faculty (Derby-Darvis, 2014; Chung & Kowalski, 2012). In the literature, faculty dynamics is also considered a component in faculty to faculty incivility. Faculty to faculty incivility may consist of rude remarks or put-downs, resisting change, failing to perform one's own workload, and distracting or disruptive behavior during meetings (Clark, Olender, Kenski & Cardoni, 2013). While faculty dynamics was addressed, this type of faculty to faculty incivility behavior was not part of the faculty leader discussions.

Theme 3: Characterizing vacant faculty positions

Theme 3 highlighted the characteristics of vacant faculty positions as described by the associate degree faculty leaders. Faculty leaders shared a frustration with the State Board of Nursing requirement that full-time teaching faculty members are obligated to have a masters' of science in nursing. The appropriate credentials for the nursing faculty members are extremely important because they can effect program accreditation. For this reason, the faculty leaders

talked about a feeling of obligation to hire the masters prepared applicant even though a bachelors' prepared applicant may have been the best fit to the department dynamics. The faculty leaders shared the missed opportunities of having non-nursing masters prepared faculty who were very effective teachers, but due to their credentials they could not be hired into full-time faculty positions. This challenge highlights issues that need further attention by the nursing profession.

The literature supports nurses' continuing education in an effort to improve the quality of patient care and preparation for the expanding nursing role. The Institute of Medicine (2010) encourages an education structure that would promote a seamless transition of academic progression. This strategy may provide a potential solution to encourage achievement of appropriate faculty credentials as required by governing bodies. Due to the complexity of nursing practice and education, the National Council of State Boards of Nursing (2008) is supportive of requiring a masters' degree in nursing for both registered nurse and practical nurse educational programs. They are cognizant of the struggle for nurse educators, but are concerned that if changes were made state boards of nursing might lower their standards in attempting to graduate more nurses to help ease the nursing shortage.

Faculty leaders reported the majority of vacant openings were full-time faculty positions. Most of the faculty leaders thought part-time faculty positions were much harder to fill. The filling of the position of a retiring faculty member was described as an "almost impossible feat." The Institute of Medicine (2011) reported that the existing nurse educator pipeline will not be able to compensate for the loss of retiring faculty or meet current and future demands for nursing educators. Specialty areas such as obstetrics, pediatrics and psychiatric/mental health were the

harder teaching positions to find qualified faculty to fill. Joynt and Kimball (2008) reported similar findings of difficulty hiring into specialty positions due to the lack of qualified faculty.

One strategy shared by faculty leaders was being able to go off the standard salary scale that would boost the salary offer to potential faculty in particularly difficult to fill positions. This strategy had the approval and support of upper administration prior to the offering. Just as noted in Theme 1, salary is a factor for retaining nursing faculty. By offering a higher salary initially, the faculty leader is hoping to recruit and retain a faculty member. Filling faculty positions was described as a feast or famine phenomenon in that, faculty leaders never knew when they would have applicants and when there would be no applicants for a position. Due to the pressures of finding qualified, full-time faculty and the associated high cost, nursing programs have begun to hire an increased number of part-time or adjunct faculty (National Advisory Council on Nurse Education and Practice, 2008).

Faculty leaders discussed the incentives of loan reimbursement and higher salary for faculty members working to obtain their master's degree as a nurse practitioner instead of as an educator. They reported having faculty members who have received support and encouragement from faculty leaders and colleagues and then left the department for a clinical practice position at a higher salary and with loan forgiveness. Joynt and Kimball (2008) discussed the growth of nurse practitioner programs and how they have replaced nurse educator programs related to the higher level of state and federal funding that is provided to nurse practitioner programs. A few faculty leaders discussed the support and effort they had put into nurse practitioner prepared faculty just to have them leave for a clinical position. This was a common enough occurrence that faculty leaders expressed a disinterest in hiring nurse practitioners to be faculty members.

The literature confirms the cost for continuing education as being potentially prohibitive to individuals who want to advance their degree in pursuit of a nursing faculty position (Joynt & Kimball, 2008; Yordy, 2006). There are educational financial options discussed in the literature such as national and state loan repayment programs, the Nurse Faculty Loan by the Health Resources and Services Administration, Johnson and Johnson Minority Nurse Scholars program and a few existing federal programs under Title VIII that are specifically aimed at individuals training for nursing faculty positions (Banks, 2012; Yordy, 2006). If the potential faculty member has financial concerns, these options may help encourage them to pursue a degree in nursing education. Making these options known is an important factor for nurse leaders.

Theme 4: Identifying strategies to support new faculty

Theme 4 focuses on strategies that faculty leaders believe would help to support new faculty and improve their nursing faculty retention. The strategy most discussed was mentoring. Most of the faculty leaders reported having either departmental and/or college mentoring programs in place for new faculty. The literature supports the need for mentorship and institutional support (NLN, 2006a; Kapustin & Murphy, 2008). According to Kapustin and Murphy (2008), an effective mentoring program can enhance retention, aid in the socialization of new faculty, improve the morale and job satisfaction and improve the overall education offered to the student population. The mentoring programs described by the faculty leaders ranged from basic orientation checklists to programs with mentors assigned for three years to new faculty members. One faculty leader described using retiring or retired faculty as a mentor. Mentoring relationships can be effective methods for transitioning clinical nurses or new educators into successful teaching roles through better adjustment and professional academic advancement

(Smith & Zsohar, 2007). In their study, Chung and Kowalsi (2012) reported an increase in job satisfaction among nursing faculty who had been mentored.

Faculty leaders discussed the difficulties new nursing faculty seem to experience in the first semester. All faculty leaders agreed that the first semester is the toughest for new faculty and a crucial time to have a mentor. During that time, faculty leaders have found new faculty members are in need of support, encouragement, and mentoring to help guide them. Hessler and Ritchie (2006) reported a vital component to mentoring is socialization and is significant to retaining new faculty members. Faculty leaders described the first semester as integral juncture where the faculty make decisions about whether or not to stay. They reported trying to keep themselves available as a resource for classroom management and to help handle student issues. A mentor can help the new faculty member transition into teaching and assist them through the trials of the first semester thereby increasing retention. Faculty leaders generally assigned a seasoned faculty to directly mentor the new faculty member. The National League for Nursing (2006) supports mentoring at anytime throughout a nursing faculty members career in an effort to improve retention (National League of Nursing, 2006c). According to Bittner and O'Connor (2012), a mentored faculty member develops a stronger commitment to the organization.

The literature reported some institutions pay the mentors a stipend for their work with mentees (Baker, 2010; Hessler & Ritchie, 2006). Retired or retiring faculty can prove to be a resource of seasoned and capable mentors. Aging or retiring faculty can provide leadership experience, teaching wisdom, skill proficiency, and departmental history. Retiring faculty could help novice faculty develop into expert faculty. Retiring faculty who are mentoring new faculty members can help cultivate and instill a greater commitment to the nursing profession (Gwyn,

2011; McBride, 2011). The mentoring relationship can help teach new faculty how to balance professional goals with personal priorities.

Another characteristic discussed by the faculty leaders was the perception of teaching as an easy job that nurses do when they want to slow down or retire from clinical practice. This perception was noted as disappointing to faculty leaders. They try to address this faulty perception with potential faculty before a contract is offered. A few faculty leaders shared experiences of hiring new faculty, putting the time and resources of orientation and mentoring, only to have the person have a realization of the responsibilities involved with teaching and resign. This was consistent with Brady's (2010) reported finding that many faculty consider themselves to be overworked and have difficulty finding an appropriate balance between professional and personal life. For the faculty leaders the resignation was good and bad. They were disappointed with the lost resources, but were relieved not to have the potential disruptive influence of an unhappy faculty member in the department. Leaders reported a description of the teaching position is provided to the potential faculty, so they know what is expected of them and the amount of work involved. They have lengthy discussions with the new faculty about the expectations and responsibilities of a teaching position in an effort to provide a more realistic interpretation of the job. Faculty leaders have learned that if the new faculty member does not really like teaching and is looking for an easy position, they will not be staying because the job is too hard. There is little in the literature related to counseling potential hires on these issues.

Other Considerations

Many faculty leaders reported grooming and supporting their own students or adjunct faculty to continue in nursing education with the possibility of a full-time faculty member

position. Faculty leaders discussed this strategy and referred to it as “grow our own.” Joynt and Kimball (2008) described this as a targeting plan to increase future educators. This type of strategy can help to recruit and retain new faculty members. In an effort to retain new faculty with this strategy, faculty leaders described encouraging adjunct faculty to complete their master’s degree and move into a full-time position. They reported supporting and encouraging students from within their own programs as a successful strategy for gaining potential nursing faculty members. These are students who the faculty members and the faculty leader would already be aware of their attributes and how they would fit into department dynamics. This strategy demonstrates support to potential faculty members from their professional beginning and allows guidance for continuing their nursing study with an education emphasis.

One faculty leader reportedly implemented a leadership course for students’ that is by invitation of the faculty only. The goal of this course is to provide support and encouragement to students who have demonstrated leadership qualities and have the potential to become effective college nursing educators. In an effort to fill faculty positions and nurture students towards an education career, the American Association of Colleges of Nursing (2005) encourages removing impediments to continuing nursing education and facilitating a timely program completion. This strategy may help to persuade students towards a career in nursing educations.

Job satisfaction and its effects on faculty retention were not specifically discussed between the associate level faculty leaders. The literature supports a direct correlation between job satisfaction and increased faculty retention (Derby-Darvis, 2014; Chung & Kowalski, 2012). In the study by Derby-Davis (2014), organizational strategies that were found to promote job satisfaction are workload flexibility, monetary incentives, collaborative relationships with

community entities, discussion stimulated within the political arena to increase awareness, and financial assistance through scholarships and loan repayment programs.

These strategies have some similarities to the strategies discussed within the themes of this study. Faculty leaders believe workload flexibility, such as working from home and faculty working together to help with personal and professional obligations, is very important and can impact faculty retention. Flexibility is a quality that faculty leaders want in their own academic roles. The monetary strategy discussed was requested overload pay to supplement faculty salary. Faculty leaders believe financial assistance such as scholarship and loan repayment programs specific for nursing education would help encourage more faculty careers.

Domains of the Nursing Faculty Shortage

The purpose of this study was to examine the perceptions of faculty leaders regarding the challenges and successes of current nursing faculty retention strategies at the associate degree level. The Six Domains Model is representative of factors that contribute to the professional nursing shortage and is reflective of the American Organization of Nurse Executives model (Roughton, 2013). For this study, the Six Domains Model was adapted and provided the conceptual framework (Appendix B). The six domains consist of healthcare system, regulatory environment, financing system, education system, technology, and work environment and are an interdependent and interconnected system. From this study, the interconnected Domains addressing the nursing faculty shortage, through faculty retention strategies at the associate level most strongly were Domain 3, Domain 4, and Domain 6.

- Financing Strategy, Domain 3: Faculty leaders were concerned with comparable salary/benefits, workload requirements and potential tuition reimbursement for

commensurate workload. Faculty positions for retiring faculty, adjunct faculty and full-time/part-time positions could be examined.

- Education System, Domain 4: Faculty leaders expressed a need for resources to be allocated to examine faculty roles, offer classroom management training and provide measures of recognition and encouragement.
- Work Environment, Domain 6: Faculty leaders conveyed the importance of providing flexibility, mentoring, encouragement, and an examination of faculty departmental dynamics.

An interesting issue not discussed was the challenges of an ever changing healthcare system and the effects that may have on faculty retention. Related to the Technology domain, technology supporting associate faculty members was described on the surveys but only had a mention in the focus group discussions. Some of the technology mentioned as supportive included the learning management systems, online courses, computerized testing, iPads for instructors, and simulation labs. One faculty leader noted that technology helps to keep adjuncts connected with the department. The Regulatory domain and faculty credentialing was also addressed. The study findings are multiple, complex, and interconnected factors contributing to the nurse faculty shortage. By placing the findings into Domains, this author organized the data to visualize the problem of faculty retention as a whole system.

Implications for Nursing Education

Nursing faculty play a vital role in decreasing the overall nursing shortage by educating and graduating future nurses. In an effort to increase the number of current nursing faculty members and recruit new faculty, the recommendation with the greatest potential impact is that

of raising nursing faculty salary. Potential strategies to address the need to increase educator salaries may include negotiated clinical practice time and reimbursement for continued schooling to encourage advancing degree within nursing education. These types of strategies can benefit the faculty member and the department. The faculty member would potentially get a boost in salary, while the department would benefit from the credentials achieved by the faculty member. The faculty member who has clinical practice is keeping currency with their skills, maintaining faculty relationships, and supplementing their salary.

Negotiated flexibility for faculty in the contractual agreement may help to retain faculty. Flexibility is an expectation from the faculty member that can promote retention and a better work environment. Negotiated flexibility of the academic position could be a positive that helps to balance the faculty members' perceived negative aspects of their teaching contract. This may be a feasible retention strategy for colleges with limited monetary resources.

In an effort to help retain nursing faculty, administration could provide encouragement and recognition for the contributions by faculty to the academic or clinical setting. Encouragement and recognition could come in the forms of specific awards, formal acknowledgement of accomplishments, and encouraging written notes from other faculty or students. Faculty leader participants from this study suggested increased faculty recognition and encouragement would play a very important role for improving faculty retention within nursing programs. Their suggestions included providing a recognition dinner or simple acknowledgements such as unexpected food treats. Formal and informal types of recognition could positively impact the morale of the nursing department and therefore positively impact faculty retention.

An established mentorship program could help new faculty work through their first semester and positively impact faculty retention. A mentorship program could help faculty be aware of academic deadlines for full-time positions, assist with classroom management and provide guidance from seasoned faculty. Retired or retiring faculty would be a potential resource to fill these positions.

Incentives could be offered for those needing to obtain a master's in nursing with an emphasis in education. The incentives could be loan reimbursement or forgiveness, work release time, supplemented salary and/or work schedule flexibility. This strategy would help to encourage and support continuing education along with keeping the person connected to an academic position.

This may also be a suitable time to consider new strategies in nursing education. It may be appropriate to encourage discussions beyond clinical specialties, for example maternal child, to concept based curriculum models that many baccalaureate programs are considering or using.

Strengths and Limitations of Study

Using a qualitative descriptive approach was a valuable method for exploring faculty leaders' experiences and perceptions related to faculty retention. This approach allowed the expression of thoughts, feelings and experiences of faculty leaders to be shared in their own words, thus providing a richer description of the phenomenon that would not have occurred otherwise. This study contributes to a greater understanding of faculty leaders' perceptions regarding faculty retention at the associate degree level. There was limited research found in this area of study. The description of faculty retention provided in this study allows others to determine which of the findings are applicable to their specific programs.

An additional strength of the study is that data was collected from faculty leaders who had direct experience with faculty retention at the associate degree level. This aspect allowed for the participants to be fully engaged with the questions during the focus group. The written surveys of the faculty leaders' perspectives provided valuable support to the themes developed from the focus group transcription. Varying geographic regions were represented from across the state of Kansas to provide strength to the study. This sample provided some shared experiences and varied insights in regards to faculty retention at the associate degree level in their specific regions. The varying years of experience (2-40 years) provided for a range of ideas that may be effective for faculty retention.

A limitation to the study was that all the participants were associate degree faculty leaders from the state of Kansas only. This aspect may limit the study findings to associate degree programs from similar settings. Other states may have different strategies and issues related to faculty retention that did not get expressed in this study. Also, since participants self-selected to participate in this study, these participants may have different ideas and experiences concerning faculty retention than those participants who chose to not participate.

Recommendations of Future Research

Continuing research in this area is vital in the ongoing struggle to find effective methods of faculty retention. Comparing faculty leaders' perceptions between differing academic nursing program levels would further inform administrative leaders as to how to best retain faculty. Much of the previous research has been focused on recruitment, not retention. Recruitment, although very important, should not be the only focus. A combination of recruitment and

retention strategies is needed to effectively maintain faculty and to continue to graduate high quality nurses.

Another area of study is to research salaries of nursing faculty. The researcher may want to consider workload and salary for nursing faculty in the comparison. A regional comparison salary assessment may help administrators negotiate improved faculty salaries. In the study, many faculty leaders discussed using overload in the workload as a strategy to supplement income and thereby increase faculty retention. A comparison could be made between responsibilities and salaries of differing nursing employment opportunities to find how the salaries of nursing faculty compare.

The final recommendation for future research is to contact nursing faculty who have left schools of nursing and interview them in regards to their reasons for leaving the academic setting. Within this study, reasons for leaving included higher salaries in clinical practice and retirement. Continued research may provide explanations that were not revealed during this study and help build more effective retention strategies.

Conclusion

With a growing population and a clinical nurse shortage, there is a need to address the shrinking number of nursing faculty. Between the years of 2012 and 2022, there is a projected need of greater than half a million job openings for registered nurses as reported by the U.S. Bureau of Labor and Statistics (Robert Wood Johnson Foundation, 2014). Specifically in rural states like Kansas, the shortage of younger nurses to fill the positions of retiring nurses has critical implications for access to nursing care for the changing population (Kansas Department of Health and Environment, 2010). Nursing faculty are needed to educate future nurses and help

to resolve the nursing shortage. With associate degree nursing programs graduating the largest percentage of registered nurse graduates, research of retention strategies at the associate level can have the largest potential impact. This study has allowed a qualitative look at the successes and challenges of associate level faculty leaders who have first-hand experience with the complexities of faculty retention. These faculty leaders shared their perceptions and experiences to help identify potential effective retention strategies such as providing faculty recognition and encouragement, flexibility, mentoring and educational incentives for completing a master's degree in nursing with emphasis in education. This qualitative, descriptive approach provided richer descriptions of this phenomenon, which is very important with the current limited research.

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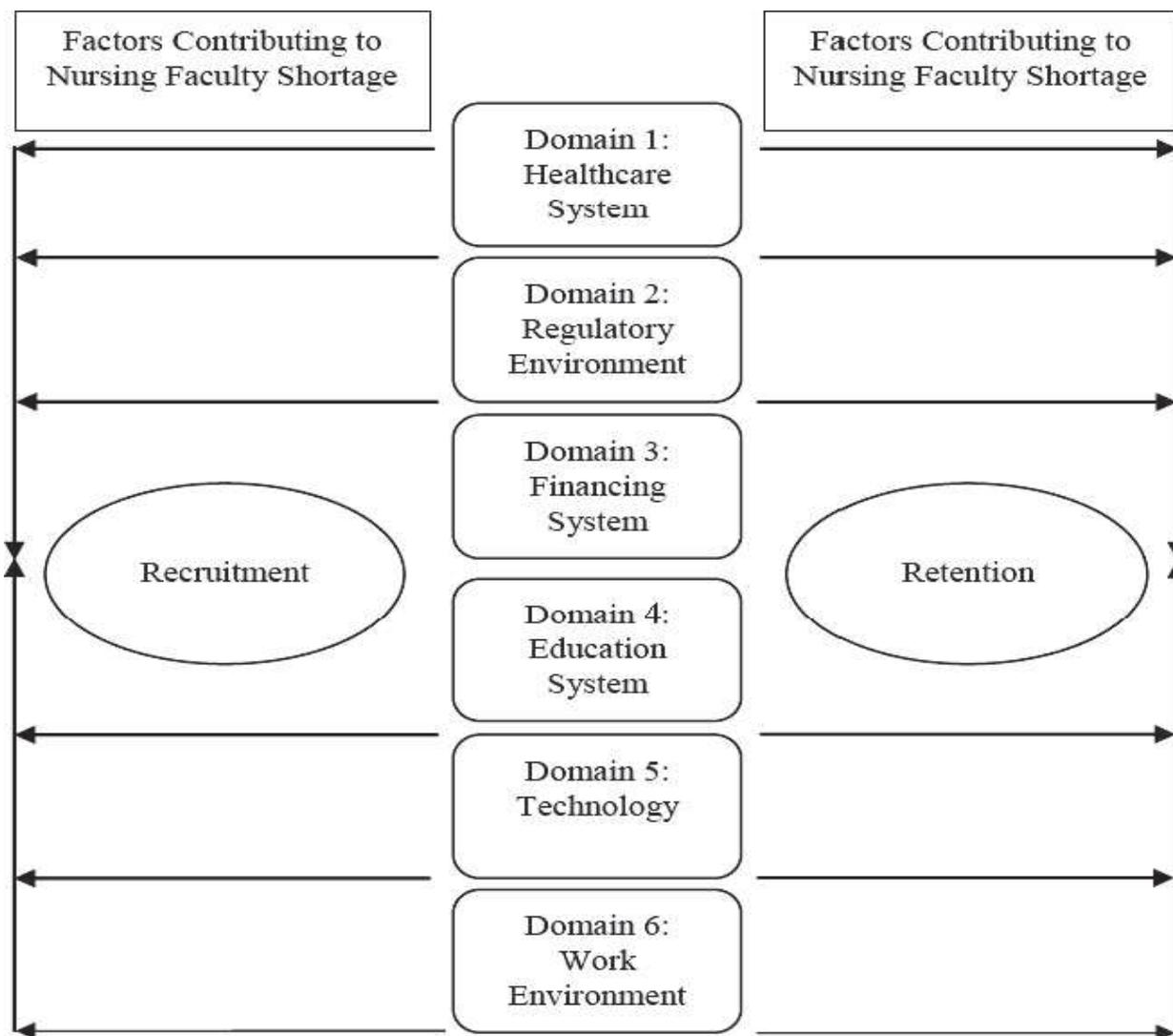
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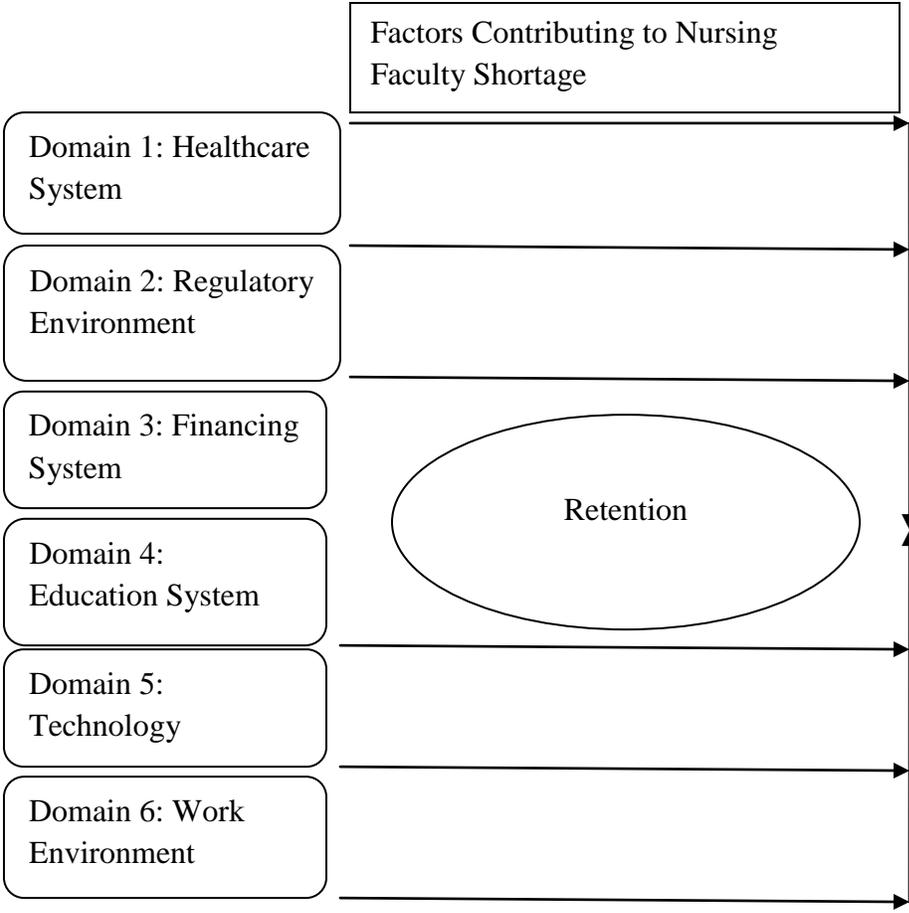
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Appendix A
Six Domains Model



Appendix B
Adapted Six Domains Model



Appendix C Examples from the Literature of Retention Strategies

Faculty Mentorship to Improve Retention

- Experienced faculty mentor to assist with transition into educator role strengthens commitment to organization.
- Mentor can provide guidance, support, exposure to professional opportunities and socialization within academic community.
- Aid in development of teaching, scholarship and service skills.
- Mentor has accountability to be role model for potential tenure and promotion behaviors.
- Mentors encouraged with paid stipend.
- Mentoring provides role for faculty in phased retirement an opportunity to share leadership experience, skill proficiency, teaching wisdom, and knowledge of departmental and institutional history.
- NLN Core Competencies of the Nurse Educator can guide the development of new faculty orientations to assist with transition process.

Faculty Development as a Strategy to Improve Retention

- Professional development activities such as continuing education can be encouraged through funding opportunities.
- Improved retention through alignment of scholarly endeavors with personal goals will assist faculty in the promotion and tenure process.

- Professional growth and development opportunities, such as workshops over teaching strategies, conflict management, publishing and interpersonal relationships, may help to improve retention of faculty.
- Interprofessional collaborative educational opportunities as recommended by the IOM may assist faculty with coordination of learning and pedagogical components.

Academic Flexibility as a Method to Improve Retention

- Academic flexibility may attract younger faculty and keep existing faculty.
- Flexibility may include the option for clinical practice outside of the academic setting.
- Flexibility can gain credibility and loyalty from faculty members.
- Workload flexibility is essential for coordination of faculty role activities.
- Coordinating experienced faculty with novice faculty can help alleviate stress.
- Flexibility may decrease conflict between faculty member's personal and professional goals.
- Flexible workloads to encourage research and ability to publish to meet requirements of promotion and tenure.

Appendix D
Permission To Attend KCADNE Meeting

From: Bill Rhoads [billr@fortscott.edu]
Sent: Thursday, December 12, 2013 12:57 PM
To: Jennifer Harris
Subject: RE: formal KCADNE permission

Our spring meeting is in March the Monday prior to KSBN meetings. Should be March 24. KCADNE will begin meeting at 3:00 p.m. at Washburn Tech. on Huntoon Blvd.
Bill

From: Jennifer Harris [mailto:jharris6@kumc.edu]
Sent: Thursday, December 12, 2013 11:58 AM
To: Bill Rhoads
Subject: formal KCADNE permission

Mr. Rhoads,

As a KUMC doctoral student, I am formally requesting permission to attend the spring KCADNE meeting, handout surveys, and offer a focus group to the attending members. I am interested in the experiences and perceptions of academic leaders regarding the challenges and successes of current nursing faculty retention strategies at the associate level.

I know we have previously discussed this research study, but I would be happy to provide any further information.

Sincerely,
Jennifer Harris

Appendix E
Letter of Invitation

Dear Participant:

You are invited to participate in a two-part research study involving a qualitative survey and a focus group interview regarding faculty retention strategies at the associate degree level. Participation includes a survey that will take approximately 20 minutes to complete. After completion of the survey, you may choose to take part in a focus group interview with fellow KCADNE members. The focus group interview will take approximately 1 hour. Participants will be asked questions about their experiences with faculty retention at the associate degree level. Participants may leave after closure of the focus group. Participants may be contacted later to clarify discussion points, review a summary of findings, and provide feedback on whether the researcher has accurately noted the group perceptions and ideas.

Participation in this study is completely voluntary with no specific benefits in participating identified. The purpose of this qualitative descriptive study is to examine the perceptions of faculty leaders regarding the challenges and successes of current nursing faculty retention strategies at the associate level. Pseudonyms will be used on all surveys and transcripts for confidentiality purposes. You may withdraw from the study at any point without fear of reprisal.

This research is being conducted by Wanda Bonnel, PhD, the principal investigator, and Jennifer Harris, MSN, NP-C, co-investigator at the University of Kansas, School of Nursing. Further information will be provided as requested, please contact Jennifer Harris at jharris6@kumc.edu or at (620)724-0480.

If you are willing to participate in the study, please complete the attached survey. There will be implied consent when the survey is returned to the researcher at the meeting.

Thank you for assisting in this research study. Your time and responses are truly appreciated.

Sincerely,

Jennifer Harris, MSN, NP-C

Appendix F
Demographics

Please provide the following demographic information along with completion of the survey questions. Your responses are very important. The information provided will be confidential and known only to the researchers conducting the study. The information will be reported in aggregate and used to describe the research study sample.

What type of associate degree nursing program do you currently work in (for example: PN to ADN; ADN only; not for profit community college; other)

Gender: ___ Male ___ Female

Race/Ethnicity (mark all that apply):

___ African American

___ American Indian

___ Caucasian

___ Hispanic

___ Oriental

___ Other _____

Highest degree of nursing education: ADN ___ BSN ___ MSN ___ PhD ___
Other (please specify) _____

Years as a licensed registered nurse: _____

Primary area (s) of nursing experience: _____

How many years have you taught at a school of nursing? _____

What is your employment status? Full-time ___ Part-time ___

Survey

What are the characteristics of associate degree faculty in your program?

What are current faculty ages?

20-29 ___ 30-39 ___ 40-49 ___ 50-59 ___ 60-69 ___ 70-79 ___

What are characteristics of your total faculty (approximate percentage)?

Fulltime _____

Part-time _____

Adjunct _____

Total = 100%

How many faculty are on tenure track?

Has your school purposely limited student enrollment due to faculty shortage?

_____ yes _____ no

What impact is the faculty shortage having on your program in regard to workload of faculty?

Does your program offer tuition reimbursement to faculty for continuing education?

Are current positions funded for the next academic year?

What reasons have faculty provided for leaving their current position? (ie increased workload, low salary, tenure requirements, adequate staffing?)

Describe the orientation program that is provided for new faculty?

Describe the mentoring program that is provided for new faculty?

In what way does technology support associate degree faculty?

What opportunities do faculty have for scholarship and interprofessional collaboration that encourage careers in academia?

In the future, what strategies do you think will be effective in retaining nursing faculty in education?

How many more years are you planning on remaining in the administrator/faculty leader role? _____ Reason for leaving the role _____

Thank you for your time and effort in completing this faculty survey. Please plan to participate in the focus group interview following the survey.

A follow-up email will be sent by the KCADNE president with a summarization of the key themes from the survey. At that point, each participant will have an opportunity to revise or clarify the theme summary.

Appendix G Research Consent Survey

TITLE: Retention of Nursing Faculty: Associate Degree Faculty Leader Perspectives

You are being asked to participate in a research study conducted by Dr. Wanda Bonnel, principal investigator and KU faculty supervisor and Jennifer Harris, MSN, NP-C, co-investigator. You are being asked to take part in this study because you are an associate degree faculty leader attending the KCADNE council meeting. The primary purpose of this research is to examine the experiences and perceptions of academic leaders regarding the challenges and successes of current nursing faculty retention strategies at the associate level.

This research is voluntary and you may withdraw at any time. There will be no penalty if you decide not to participate or if you withdraw before completion of the study. Not participating will also have no affect on current or future employment with the University of Kansas Medical Center.

This consent form explains what you have to do if you are in the study and the possible risks and benefits. Please read the form carefully and ask as many questions as you need before deciding about this research. Questions can be asked at any time during the study. The researchers will share any new information regarding the study that may affect your decision about participating in this study.

This research will take place during the Spring 2014 KCADNE council meeting in Topeka. Participants will be interviewed at a convenient time during the council meeting.

BACKGROUND

Retention of faculty is a complex and dynamic challenge for nursing education. Nursing is facing the growing dilemma of a shrinking population of current nursing faculty. The lack of educators has implications for nursing research and the clinical nursing shortage. Research to better understand current challenges to retaining faculty and current successful faculty retention strategies are imperative for the academic environment in an effort to address the current nursing faculty shortage. There is limited study of Associate Degree faculty populations, yet they are responsible for a large percentage of graduates in Kansas and beyond. In the United States, 45.4 percent of registered nurses initial education is at the associate degree level. Nursing' schools are concerned about retention of current faculty and may have various strategies in place to promote retention.

PURPOSE

The purpose of this descriptive study is to examine the experiences and perceptions of academic leaders regarding the challenges and successes of current nursing faculty retention strategies at the associate level. The researchers hope by doing this study they will gain a better understanding of faculty leaders' perspectives surrounding issues related to faculty retention strategies.

PROCEDURES

If you agree to participate in this study, your participation will last approximately one hour. Your participation will involve...

- **A written survey regarding your experiences and perceptions related to nurse faculty retention strategies at the associate level, along with demographic information such as gender, age, ethnic background and years of nursing practice.**

RISKS

You may feel uncomfortable discussing your experiences. If at any point during the study you are not comfortable, you may skip a question or completely stop participating. You may give only the information you choose.

NEW FINDING STATEMENT

The researchers will share any new information regarding the study that may affect your decision about participating in this study. You may be asked to sign a new consent form if this occurs.

BENEFITS

You will not directly benefit from participating in this research study. The researchers hope by doing this study they will gain a better understanding of faculty leaders' perspectives surrounding issues related to faculty retention strategies

ALTERNATIVES

Participation in this study is voluntary. Deciding not to participate will have no effect on your relationship with the researcher or the services you receive at the University of Kansas Medical Center and not participating will have no affect on current or future employment with KUMC.

COSTS

There is no cost for participating in this study.

PAYMENT TO PARTICIPANTS

There is no payment for this study.

INSTITUTIONAL DISCLAIMER STATEMENT

If you think you have been harmed as a result of participating in research at the University of Kansas Medical Center (KUMC), you should contact the Director, Human Research Protection Program, Mail Stop #1032, University of Kansas Medical Center, 3901 Rainbow Blvd, Kansas City, KS 66160. Under certain conditions, Kansas state law or the Kansas Tort Claims Act may allow payment to persons who are injured in research at KUMC.

CONFIDENTIALITY

The researchers will protect your information as required by law. Absolute confidentiality cannot

be guaranteed due to persons outside the research team that may need to look at the study records. The researchers may publish the group results of the study only. Your name will not be used in any publication or presentation about the study. Transcriptions will be shared with the dissertation chair via KUMC secure file transfer system.

PARTICIPANT RIGHTS AND WITHDRAWAL FROM THE STUDY

You may stop participating in the study at any time. The investigator conducting the study may discontinue the entire study for any reason without your consent.

QUESTIONS

Before you sign this form, Dr. Bonnel or other members of the study team should answer all your questions. You can talk to the researchers if you have any more questions, suggestions, concerns or complaints after signing this form. If you have any questions about your rights as a research subject, or if you want to talk with someone who is not involved in the study, you may call the Human Subjects Committee at (913) 588-1240. You may also write the Human Subjects Committee at Mail Stop #1032, University of Kansas Medical Center, 3901 Rainbow Blvd., Kansas City, KS 66160

CONSENT

Dr. Wanda Bonnel or a member of the research team has provided you information regarding this research study. They have provided explanation of what will be done and how long it should take. They have explained any inconvenience, discomfort or risks that may be encountered for the period of this study. In an effort to maintain anonymity, you are not required to sign this consent form; implied consent is assumed with return of the survey and continued participation in the focus group.

You will be given a copy of the consent form to keep for your records.

Appendix H Research Consent Focus Group

TITLE: Retention of Nursing Faculty: Associate Degree Faculty Leader Perspectives

You are being asked to participate in a research study conducted by Dr. Wanda Bonnel, principal investigator and KU faculty supervisor and Jennifer Harris, MSN, NP-C, co-investigator. You are being asked to take part in this study because you are an associate degree faculty leader attending the KCADNE council meeting. The primary purpose of this research is to examine the experiences and perceptions of academic leaders regarding the challenges and successes of current nursing faculty retention strategies at the associate level.

This research is voluntary and you may withdraw at any time. There will be no penalty if you decide not to participate or if you withdraw before completion of the study. Not participating will also have no affect on current or future employment with the University of Kansas Medical Center.

This consent form explains what you have to do if you are in the study and the possible risks and benefits. Please read the form carefully and ask as many questions as you need before deciding about this research. Questions can be asked at any time during the study. The researchers will share any new information regarding the study that may affect your decision about participating in this study.

This research will take place during the Spring 2014 KCADNE council meeting in Topeka. Participants will be interviewed at a convenient time during the council meeting.

BACKGROUND

Retention of faculty is a complex and dynamic challenge for nursing education. Nursing is facing the growing dilemma of a shrinking population of current nursing faculty. The lack of educators has implications for nursing research and the clinical nursing shortage. Research to better understand current challenges to retaining faculty and current successful faculty retention strategies are imperative for the academic environment in an effort to address the current nursing faculty shortage. There is limited study of Associate Degree faculty populations, yet they are responsible for a large percentage of graduates in Kansas and beyond. In the United States, 45.4 percent of registered nurses initial education is at the associate degree level. Nursing' schools are concerned about retention of current faculty and may have various strategies in place to promote retention.

PURPOSE

The purpose of this descriptive study is to examine the experiences and perceptions of academic leaders regarding the challenges and successes of current nursing faculty retention strategies at the associate level. The researchers hope by doing this study they will gain a better understanding of faculty leaders' perspectives surrounding issues related to faculty retention strategies.

PROCEDURES

If you agree to participate in this study, your participation will last approximately one hour. Your participation will involve...

- **All KCADNE members will be invited to participate in a focus group interview.**
- **The focus group interview will be recorded and transcribed by the student researcher. Your identity will be kept confidential by using a pseudonym as the identity marker for your transcribed interview comments and will only be known to the researchers.**
- **All recordings will be destroyed after analysis of the data is completed.**
- **The transcriptions of recordings from each interview will be maintained in a secured file at the University of Kansas, School of Nursing as required by the research review board and then destroyed.**

RISKS

You may feel uncomfortable discussing your experiences. If at any point during the study you are not comfortable, you may skip a question or completely stop participating. You may give only the information you choose.

NEW FINDING STATEMENT

The researchers will share any new information regarding the study that may affect your decision about participating in this study. You may be asked to sign a new consent form if this occurs.

BENEFITS

You will not directly benefit from participating in this research study. The researchers hope by doing this study they will gain a better understanding of faculty leaders' perspectives surrounding issues related to faculty retention strategies

ALTERNATIVES

Participation in this study is voluntary. Deciding not to participate will have no effect on your relationship with the researcher or the services you receive at the University of Kansas Medical Center and not participating will have no affect on current or future employment with KUMC.

COSTS

There is no cost for participating in this study.

PAYMENT TO PARTICIPANTS

There is no payment for this study.

INSTITUTIONAL DISCLAIMER STATEMENT

If you think you have been harmed as a result of participating in research at the University of Kansas Medical Center (KUMC), you should contact the Director, Human Research Protection

Program, Mail Stop #1032, University of Kansas Medical Center, 3901 Rainbow Blvd, Kansas City, KS 66160. Under certain conditions, Kansas state law or the Kansas Tort Claims Act may allow payment to persons who are injured in research at KUMC.

CONFIDENTIALITY

The researchers will protect your information as required by law. Absolute confidentiality cannot be guaranteed due to persons outside the research team that may need to look at the study records. The researchers may publish the group results of the study only. Your name will not be used in any publication or presentation about the study. Transcriptions will be shared with the dissertation chair via KUMC secure file transfer system.

PARTICIPANT RIGHTS AND WITHDRAWAL FROM THE STUDY

You may stop participating in the study at any time. The investigator conducting the study may discontinue the entire study for any reason without your consent.

QUESTIONS

Before you sign this form, Dr. Bonnel or other members of the study team should answer all your questions. You can talk to the researchers if you have any more questions, suggestions, concerns or complaints after signing this form. If you have any questions about your rights as a research subject, or if you want to talk with someone who is not involved in the study, you may call the Human Subjects Committee at (913) 588-1240. You may also write the Human Subjects Committee at Mail Stop #1032, University of Kansas Medical Center, 3901 Rainbow Blvd., Kansas City, KS 66160

CONSENT

Dr. Wanda Bonnel or a member of the research team has provided you information regarding this research study. They have provided explanation of what will be done and how long it should take. They have explained any inconvenience, discomfort or risks that may be encountered for the period of this study. In an effort to maintain anonymity, you are not required to sign this consent form; implied consent is assumed with return of the survey and continued participation in the focus group.

You will be given a copy of the consent form to keep for your records.

Print Participant's Name

Signature of Participant

Time

Date

Print Name of Person Obtaining Consent

Signature of Person Obtaining Consent

Date

Appendix I Focus Group Interview Guide

Welcome

Welcome to the focus group session. Appreciate everyone taking time to join us to discuss faculty retention strategies at the associate degree level. My name is Jennifer Harris. I am a PhD student at the University of Kansas, School of Nursing. Dr. Bonnel and Dr. Domian are the chairs for this dissertation research study.

Our Topic is faculty retention:

The findings of the focus group are to be used for dissertation research. You were selected because you are nursing faculty leaders attending the KCADNE council meeting.

Guidelines

No right or wrong answers, only differing points of view are being shared. Please share your point of view even if it differs from others in the group. I am interested in both the positive and negative aspects of faculty retention.

This focus group interview is being recorded for transcription purposes, so one person speaking at a time is appreciated. Names will be omitted in the transcription of the focus group.

My role as the moderator is to help guide the discussion.

Questions

Think about your programs and your experiences with faculty retention.

Are there vacant faculty positions at your college? If so, how many and in what areas?
What are the reasons for the vacancies?

Could you describe the current faculty retention strategies at your college? Have there been challenges to retaining current faculty? If so, what are the challenges? Are there retention strategies you would like to try?

What reasons do you think faculty stay at the college? Why do you stay as administrator?

What ways are teams (interprofessional) engaged in your associate degree program?

What type of orientation or mentoring is provided for new faculty?

What ways are new faculty expected to participate in online teaching? In high fidelity simulation teaching?

What expectations for an academic career do new faculty convey.....

In the future, what strategies do you think will be effective in retaining nursing faculty in education? Probe: flexibility of schedule? Recognition? Increased salary? Faculty practice?

Summary

Give a brief oral summary and then ask if this is an adequate summary of the focus group discussion today.

Moderator will review the purpose of the study and then ask if anyone would like to add anything else. Which aspect do you find most important contributing to faculty retention strategies?

Thank you very much for taking time of your schedule to participate in this research study. I will gladly answer questions or concerns to the best of my ability. If there are no questions, the focus group interview is concluded.

A follow-up email will be sent by the KCADNE president with a summarization of the key themes from the focus group. At that point, each participant will have an opportunity to revise or clarify the theme summary

Thank you again.