

2015

# Role Ambiguity, Role Strain, Job Dissatisfaction, and Difficulty Transitioning Into Academia Among Nursing Faculty

Paula Stallard Whitehead  
*Walden University*

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Paula Whitehead

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Walden University  
2015

Abstract

Role Ambiguity, Role Strain, Job Dissatisfaction, and Difficulty Transitioning Into

Academia Among Nursing Faculty

by

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MSN, Walden University, 2011

Diploma RN, Charity Hospital School of Nursing at New Orleans, 1992

Doctoral Study Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Education

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## Abstract

Registered nurses with experience in the clinical area entering academia go through a transition that may lead to difficulties such as role ambiguity and role strain when beginning a new job. The purpose of this study was to understand the experiences leading to role ambiguity, role strain, difficulty with role transition, and job dissatisfaction among the faculty at colleges of nursing in the mountain region of Western North Carolina. Guided by Kahn's organizational role theory and Schlossberg's transition theory, research questions investigated the nursing faculty experience of role ambiguity, role strain, difficulty transitioning into academia, and job dissatisfaction. A qualitative explanatory case study design using a convenience sample of 12 current full-time and adjunct nursing faculty was implemented for the study. Online anonymous written interviews were conducted for data collection. Data were analyzed and coded using open coding and thematic analysis to identify recurring themes. The results of the study revealed 6 themes: lack of preparation for academic role expectations, lack of awareness of new role requirements or new teaching assignments, difficulty transitioning into academia or a new teaching position, need for orientation and mentoring for nursing faculty, satisfaction related to the desire to stay or leave a position, and nursing faculty love what they do. The study findings informed the project, a professional development program for novice nursing faculty that supports the transition into a new role. Implications for positive social change include retention of nursing faculty, admission of increased numbers of nursing students, and more nurses working in communities with populations in need.

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## Dedication

I dedicate this study to my family: my husband, Craig Whitehead, who has been by my side encouraging me to keep going and loving me unconditionally while I have been on this journey; my parents, Paul and Rosa Stallard, who instilled in me a love for learning and taught me the value of an education and working hard for the things you want; my daughter, Melissa Davidson, who has encouraged me every step of the way; and my sisters, Dr. Amy Ramsak and Heather Anderson, who are both examples of staying calm and focused while never giving up. Thank you all for believing in me and encouraging me to never give up throughout this difficult journey.

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## Section 1: The Problem

### **Introduction**

Researchers have shown that role ambiguity, role strain, and difficulty transitioning into academia from clinical nursing may lead to job dissatisfaction and attrition of qualified nursing faculty (Clark, 2013; Cranford, 2013; Gilbert & Womack, 2012). Some factors leading to attrition, such as retirement, are unavoidable, so it is beneficial to determine other causes of job dissatisfaction to retain faculty in academia (Bittner & O'Conner, 2012). Both novice and experienced nursing faculty strive to meet all of the needs of diverse nursing student populations while trying to balance the requirements and expectations of the faculty role. Novice faculty, in particular, need opportunities to build teaching skills and to learn the role expectations as they transition into academia (Suplee & Gardner, 2009). During the transition into academia, problems may arise when the new faculty are not prepared for the new role or are not clear about the expectations and requirements for the role. This difficult time of transition may lead to role strain and dissatisfaction with the job, ultimately leading to attrition of the faculty member within the first few years of teaching (Cranford, 2013). It is beneficial to adequately prepare and support novice nursing faculty as they transition into academia to decrease attrition, increase job satisfaction, and empower them to become experienced, well-rounded faculty (Barksdale et al. 2011; Roughton, 2013; Singh, Pilkington, & Patrick, 2014). Without adequately prepared nursing faculty, the number of new nurses graduating decreases, and the health of the community is at risk.

### **Definition of the Problem**

The shortage of nurses in the United States continues to be a concern. A shortage of nursing faculty is directly linked to the shortage of nurses (Cranford, 2013). In 2010 over 40,000 qualified students were turned away from schools of nursing nationwide due to the lack of faculty (Bittner & O'Connor, 2012; Cranford, 2013) According to the North Carolina Board of Nursing (NCBON, 2013) the current and future lack of nursing faculty is one of the biggest challenges in nursing in the State of North Carolina. Trends in nursing education in North Carolina from 2009 to 2013 indicated that although there was a slight decrease in the number of budgeted vacant faculty positions in the state from 2012 to 2013, there were still 154 reported vacant budgeted positions for nursing faculty. According to the American Association of Colleges of Nursing (AACN, 2013) as of October 2013, 11,035 pre-licensure students were enrolled in nursing schools in the state; however, 2,397 qualified students were turned away primarily due to a lack of faculty. The AACN also reported that as of October 2013, a total of 1,358 budgeted faculty vacancies were reported across the United States with an additional need to create 98 positions to accommodate student demand. Researchers have indicated that significant factors related to the lack of nursing faculty in all areas of the United States include role ambiguity, role strain, job dissatisfaction, and difficulty transitioning into academia from the clinical area (Bittner & O'Connor, 2012; Cranford, 2013). Throughout my review of literature, I was unable to identify similar studies conducted in North Carolina. To the

best of my knowledge, no researchers focused specifically on the colleges in the mountain region of Western North Carolina.

At the time of this study, 17 full-time and adjunct faculty positions were open and needed to be filled at four colleges and two universities, both public and private, in the mountain region of Western North Carolina, (ABT College, 2015; BR College, 2015; HC College, 2015; MH University, 2015; SC College, 2015; WC University, 2015). This faculty vacancy included advertised positions for the six colleges in the study and may not have included all budgeted positions at all institutions. Three of the colleges included in the study are public community colleges in the region. The programs at these colleges are 2-year associate degree (ADN) programs. One college in the study area is a private for-profit college with a 15-month accelerated ADN program. Two universities were also included in the study. Both universities offer a bachelor's degree in nursing (BSN). One is a state university and the other is a private, religious university.

The focus of the study was role ambiguity, increased role strain, and decreased job satisfaction resulting in poor role transition and attrition among the nursing faculty at colleges in the region. There was a paucity of research focusing on the causes of nursing faculty attrition in the region where the study colleges were located. Although the NCBON (2010) and AACN (2013) have presented papers and research regarding the nursing faculty shortage in the United States, specific reasons for faculty attrition are minimally addressed. The main barriers to increasing the number of faculty is salary increases and promoting higher education such as master's degrees in nursing and

doctoral degrees. It is important to explore why nursing faculty attrition at the local colleges and universities is high and job satisfaction is low. Results of the study will be significant for nursing programs located in the region. Strategies to retain nursing faculty are in the best interest of the educational institutions in the region and around the United States. Well-supported and satisfied faculty may experience a smoother transition into academia, and nursing students may experience a quality nursing education to become safe, qualified nurses in the community.

### **Rationale**

#### **Evidence of the Problem at the Local Level**

Although extensive research has been conducted regarding nursing faculty role ambiguity, role strain, difficulty with transition into academia, and role dissatisfaction, all leading to attrition (Barksdale et al. 2011; Bittner & O'Connor, 2012; Cranford, 2013; Gilbert & Womack, 2012; Nardi & Gyurko, 2013; Schoening, 2013), I was unable to locate research focused on role ambiguity, role strain, and difficulty transitioning into academia among nursing faculty at colleges and universities in the mountain region of Western North Carolina. At the time of the study, the colleges and universities in the region were recruiting nursing faculty to fill 17 advertised positions.

#### **Evidence of the Problem from the Professional Literature**

Researchers have conducted studies to determine why nursing faculty and faculty from other disciplines experience role ambiguity, role strain, difficulty transitioning into a new role, and job dissatisfaction ultimately leading to attrition. The focus of some



studies has been focused on the characteristics of faculty who intended to leave the profession (Baker, 2010; Cranford, 2013; Roughton, 2013). Role ambiguity of faculty in all disciplines has also been studied and described in the literature (Gahlan & Singh, 2014; Phillips, Andrews, & Hickman, 2014; Yurur & Sarikaya, 2012). Results of various studies and surveys have indicated that role strain and role ambiguity lead to dissatisfaction with the role or the job (Law et al. 2012; Nardi & Gyurko, 2013). Much of the research addressed multiple disciplines in education, including nursing.

The nursing shortage in the United States is increasing as the demand for nurses is becoming greater than the supply (Cranford, 2013). A shortage of working nurses has the potential to adversely affect the health care of all populations and all areas of the United States (Nardi & Gyurko, 2013). An even greater problem than the shortage of nurses is the shortage of nursing faculty. Retaining current nursing faculty is necessary, but recruiting and retaining new nursing educators is also needed (Baker, 2010). Thousands of qualified applicants are turned away from schools of nursing each year in the United States, and many schools cite a lack of faculty as a reason. In the 2011-2012 academic year, over 75,000 students were turned away from U.S. schools, and 66% of the schools stated it was due to lack of faculty (Cranford, 2013).

Solutions to ease the shortage of nursing faculty include recruitment and retention of nurses from the clinical area to academia. Many of these recruited nursing faculty are expert clinicians but novice educators (Schoening, 2013). Cranford (2013) noted that as novice educators make the transition into academia from the clinical area, they are faced

with having to learn new skills and fit into a new culture. Often this leads to role strain, perceived role ambiguity, and difficulty with the transition. Cranford also explained that between 200 and 300 doctorally prepared faculty and between 220 and 280 master's prepared faculty will reach retirement age each year between 2012 and 2018. This compounds the current problem of a nursing faculty shortage and nursing shortage.

Researchers support the need to explore why faculty, both novice and experienced, become dissatisfied in the academic role and leave the profession. The intent of this study was to explore why nursing faculty at colleges of nursing in the mountain region of Western North Carolina were experiencing feelings of role strain, role ambiguity, and job dissatisfaction leading to attrition. I also explored why new faculty beginning employment have difficulty transitioning into a faculty role.

### **Definitions**

The following terms were used throughout the study:

*Adjunct faculty:* Personnel contracted on a temporary basis. The adjunct faculty may teach one or more courses, or may work in the clinical area with students. Adjunct faculty are usually contracted for one semester or one quarter at a time (Brannagan & Oriol, 2014).

*Attrition:* A loss of nursing faculty from the nursing educator workforce or from a particular school of nursing (Fang & Bednash, 2014).

*Job dissatisfaction:* Situations occurring when the nursing faculty member is no longer satisfied with the aspects of the job. This may be attributed to the faculty member

desiring a more supportive institutional culture and better working relationships with colleagues (Roughton, 2013).

*Novice faculty:* A beginning educator with no teaching experience. The novice teacher needs to be taught the rules to help perform tasks (Benner, 1982).

*Role ambiguity:* Situations occurring in a job where the expectations or behaviors of the employee are unclear and need to be clarified (Yurur & Sarikaya, 2012).

*Role strain:* The stress that occurs when a person has difficulty adhering to the expectations of a role (Cranford, 2013).

### **Significance**

The study was significant in three ways. First, the study may enable the administrators of the colleges and universities in the study to determine why attrition among nursing faculty is high and what factors need to be addressed to solve the problem. Second, the information may be used by colleges and universities of nursing in the region as well as educational institutions in other areas of the United States to determine the factors contributing to nursing faculty attrition. Finally, the study has the potential to impact social change by increasing the retention of qualified faculty and by addressing the needs of nursing faculty who are considering leaving academia.

As the number of qualified nurses graduating and entering the workforce decreases, which is linked to the lack of faculty in schools of nursing (Cranford, 2013), health disparities among populations increase, the cost of health care increases, and poor outcomes for patients increase (National League for Nursing [NLN], 2013; Ritter, 2011).

Research has been conducted to understand the implications of the nursing shortage on patient care (Aiken et al., 2010; Needleman et al., 2011), and researchers determined that there was a direct correlation between the lack of nurses and patient mortality. Nurses are the primary professionals of quality health care delivery in the United States, and without enough of them the quality of health care will decline and everyone could be affected (NLN, 2013). By studying the factors leading to attrition of nursing faculty such as role ambiguity, role strain, difficulty with role transition, and job dissatisfaction, nursing administrators at colleges and universities may be able to determine methods needed to retain nursing faculty.

Role ambiguity occurs when information is not clear or communication is lacking (Moura, Orgambidez-Ramos, & Goncalves, 2014). This lack of specificity for the expectations of the role leads to role ambiguity for the employee. Ambiguity may negatively and significantly affect the person and the way the job is performed. Role ambiguity often leads to role strain when more than one demand is put on the employee (Cranford, 2013). The expected roles are already uncertain, and adding more uncertainty leads to role strain and negative employee reactions (Tang & Chang, 2010).

Role strain has been determined to be a major factor in the decision of nursing faculty to leave a position or to leave academia (Bittner & O'Connor, 2012). Role strain results from two or more role pressures or role expectations put on an employee causing increased stress when the expectations cannot be met (Moura et al., 2014). Cranford (2013) investigated the extent to which role strain was a factor in the decision of nursing

faculty to stay in academia or to leave. Faculty from 31 programs in the Southeastern United States were surveyed. Cranford found that the most common reasons leading to role strain and the intent to leave academia included exhaustion, never being able to complete work, and inadequate time to prepare for lectures and exams.

Leaving the clinical area and transitioning into academia for a nurse requires the new faculty member to go through a socialization process to fit into the new role. This is not always an easy transition, as moving from patient care to academia is not a traditional route for a nurse. Teaching is certainly a part of patient care, but teaching in academia as the primary nursing role may be a difficult transition (Clark, 2013). The lack of preparedness for the expectations of the faculty role may lead to dissatisfaction in the job, limited effectiveness as a faculty member, and possible failure in the role as a nurse transitions into academia. Difficulty transitioning often results from role ambiguity and role strain culminating in job dissatisfaction and departure from academia within the first 5 years of teaching (Cranford, 2013). Sohag, Memon, Mahmood-Ur-Rahman, and Rao (2012) noted that the attitudes and feelings of people toward a job are directly correlated with job satisfaction. Sohag et al. also noted that the level of job satisfaction is affected by intrinsic and extrinsic factors, social relationships in the workplace, and the degree to which employees fail or succeed in their role.

### **The Effects of Nursing Faculty Attrition at the Local Level**

The AACN (2013) determined that in the state of North Carolina 2,397 qualified nursing student applicants were turned away from schools of nursing. An executive

summary report for 2014 by the NCBON showed that in 2013 there were 15, 891 qualified applicants in pre-licensure nursing programs in the state. Only 45% were enrolled that year. According to a report by Spero (2014), there were 106.9 registered nurses per 10,000 people in metropolitan areas of North Carolina and 74.4 nurses per 10,000 people in rural areas of the state. Spero also noted that in that same year only 4.4% of registered nurses had a master's degree in nursing, which is a requirement to teach in most nursing schools in the state, and less than 1% had a doctorate degree, which is the preferred degree to teach nursing in some schools of nursing in the state. According to the NCBON executive summary report (2014), as of October 1, 2013 there were a total of 76 vacant full-time faculty positions listed and 78 vacant part-time faculty positions listed.

### **The Effects of Nursing Faculty Attrition at the National Level**

According to the Bureau of Labor Statistics (2013), occupations with the largest projected job openings due to replacement needs from 2012 to 2022 include the registered nurse. The Bureau of Labor Statistics predicts that by 2022 there will be 1.1 million job openings for registered nurses. As the demand for nurses continues to grow, the expected health care needs for populations will exceed the number of registered nurses available to provide care. Schools of nursing across the United States struggle each year to meet the enrollment needs for student nurses, and a shortage of faculty continues to be a problem. The shortage of qualified faculty and budget constraints are cited as reasons, but without enrollment of student nurses, the nursing workforce is

limited (AACN, 2013). Faculty shortages are a primary obstacle to expanding the nation's nursing workforce. Shortages of nursing faculty are not just at the pre-licensure level. Shortages exist at the master's and doctoral levels as well, which adds to the overall problem. In 2013, the AACN reported that over 14,000 master's degree nursing students and over 1,700 doctoral students were turned away due to a lack of faculty for graduate programs. As current nurses and faculty begin to retire and current faculty leave academia due to workload demands and job dissatisfaction, the problem will only intensify.

Discovering why nursing faculty experience role ambiguity, role strain, and difficulty transitioning into the role may help administrators of educational institutions determine how to improve job satisfaction and retain faculty. This, in turn, will allow institutions to keep qualified, experienced nursing faculty and increase student enrollment in their programs.

### **Research Questions**

The purpose of this study was to explore the factors leading to role ambiguity, role strain, difficulty with role transition, and job dissatisfaction among the nursing faculty at universities and colleges of nursing in the mountain region of Western North Carolina. Research has been conducted addressing the issues of role ambiguity and role strain in professions such as nursing (Clark 2013; Cranford 2013; Tull, 2014). However, no research has been conducted addressing nursing programs in the study area. Several studies have been conducted regarding the problems with transition from clinical nursing

to academia (Cranford, 2013; Roughton, 2013; Schoening, 2013). However, these studies have addressed adjunct faculty with little emphasis on full-time faculty entering academia. The phenomenon of job dissatisfaction and the intent to leave a position has been studied by many researchers (Bittner & O'Connor, 2012; Bowling, Hoepf, LaHuis, & Lepispo 2013; Gardner, 2014; Gilbert & Womack, 2012; Ryan, Healy, & Sullivan, 2012; Tull, 2014), yet there is no research specific to the colleges and universities in the study area. Further research focusing on why the nursing faculty at the colleges and universities are experiencing role ambiguity, role strain, difficulty with role transition, and job dissatisfaction leading to high attrition may help administrators determine how to solve the problem at the educational institutions in the region. The following research questions were used to develop the case study on role ambiguity, role strain, role transition, and job dissatisfaction among nursing faculty:

Question 1: How do role ambiguity, role strain, difficult role transition, and job dissatisfaction contribute to the attrition of nursing faculty at colleges and universities of nursing in the mountain region of Western North Carolina?

Question 2: Why do the nursing faculty experience role strain when beginning a new job in academia?

Question 3: Why do the nursing faculty experience job dissatisfaction when beginning a new job in academia?

Question 4: Why do newly hired nursing faculty experience role ambiguity when beginning employment in academia?



Question 5: Why are newly hired faculty experiencing problems with transitioning into the role when beginning employment in academia?

Question 6: Why are nursing faculty considering leaving the position within the first 5 years of employment?

## **Review of the Literature**

### **Conceptual Framework**

The conceptual framework for the study was based on the idea that both novice nursing faculty and experienced faculty experience role ambiguity, role strain, difficulty transitioning into academia, and job dissatisfaction when beginning a new job as a nursing instructor. Studies have shown that role ambiguity and role strain experienced by both novice and experienced faculty have led to poor transition into academia or into a new role in a new institution resulting in job dissatisfaction and attrition of faculty (Bittner & O'Connor, 2012; Cranford, 2013; Clark, 2013; Gardner, 2014; Gilbert & Womack, 2012). Two theories were used to describe the difficulties nursing faculty face as they transition into academia from clinical nursing and begin teaching in new roles.

Organizational role theory was developed in the 1960s by Kahn, Wolfe, Quinn, Snoek, and Rosenthal (1964). The theory was developed to provide a better understanding of the physical and emotional processes an individual goes through when starting in a new workplace. The theory focuses on how the individual accepts and adapts to a new role within an organization. The assumptions of the theory were applicable to nursing faculty assuming a new role in academia or at a new institution. Organizational

role theory is a theory of behavior that focuses on the four assumptions of role taking, role consensus, role compliance, and role conflict (Katz & Kahn, 1978).

Role taking assumes that individuals will accept the role and all that it entails when they accept a new position. Katz and Kahn (1978) noted that accepting a new role can become a problem when too many expectations cause the individual to be unable to work up to the expectations of the role. Role consensus assumes that the employee and the employer have come to a consensus regarding what the expectations of the role are. It is assumed that by adhering to the role consensus, the employee will meet the expectations in a consistent and accepted way. Complex expectations of the role, increased responsibilities, and unforeseen changes in the role expectations may lead to the employee not being able to meet the expectations. Role compliance assumes that each role has a set of expected behaviors that each employee will adhere to consistently. These behaviors are defined in policies, procedures, and job descriptions. Role conflict assumes that when more expectations of the role are added, conflict arises when the employee has to juggle multiple expectations.

Schlossberg's transition theory (Schlossberg, Waters, & Goodman, 1995) also provided a theoretical framework for the study. Although Schlossberg's theory was developed in the discipline of psychology rather than education, it was applicable to the transition of faculty into academia or into a new working environment. Schlossberg developed the theory to establish a framework to assist in the understanding of adults in transition. Transition, according to Schlossberg, refers to any change in a role or

relationship experienced by an adult. Three types of transitions are described in the theory: anticipated transitions, unanticipated transitions, and non-event transitions. These transitions explain how an adult adapts to changes in life.

Anticipated transitions refer to expected transitions, such as a scheduled event. Unanticipated transitions occur when the event is unplanned and happens unexpectedly. Non-event transitions occur when an expected transition did not occur. Novice faculty or experienced faculty starting a new position would experience anticipated transitions starting a new job or beginning a new career. Unanticipated transitions are likely to occur when novice faculty or experienced faculty begin a new job or leave a job. The expectations may not be clear, things may not go well, and mistakes may be made. These unanticipated transitions will lead to increased stress and role strain for the faculty member (Schlossberg et al., 1995).

These two theories were used to set the foundation for understanding the experiences and difficulties nursing faculty face as they move from clinical nursing, where they are experts, to academia, where they are novices. Organizational role theory has been used for years by researchers in the fields of psychology and sociology and has also been used to analyze various forms of social systems (Yau De & Han Jen, 2010). Although the theory originated in the sociology discipline, it is applicable to other professions in which transition into a new career may lead to role ambiguity, role strain, and difficulty with the transition such as in nursing education (Brookes, Davidson, Daly, & Holcomb, 2007; Cranford, 2013; Yau De & Han Jen, 2010). Despite the references to

role theory in more recent years, Parker and Wickham (n.d.) argued that the concepts in the theory are outdated and not applicable to the complex roles in the workforce of today because the theory does not encompass the person's roles outside of work. Schlossberg's transition theory expands on the ideas presented in organizational role theory to encompass both expected and unexpected transitions that a person may encounter when changing roles. Unlike role theory, transition theory goes beyond the roles in a job and includes roles in relationships outside of work (Schlossberg et al., 1995).

### **Literature Review**

In a review of the broader problem, I conducted an investigation of literature pertaining to the topics of role ambiguity, role strain, role dissatisfaction, and nursing faculty attrition. I used databases available in the Walden University online library such as Educational Resources Information Center (ERIC), Education Research Complete, Nursing and Allied Health, Cumulative Index to Nursing and Allied Health (CINAHL), National Library of Medicine journal database (MEDLINE), Proquest, and the Walden University dissertation database. Online sources including the American Association of Colleges of Nursing, Bureau of Labor Statistics, National League for Nurses, and the North Carolina Board of Nursing were also included. I visited local libraries to obtain books and articles on nursing theory and case study research.

Keywords used in the searches included *new nursing faculty*, *novice nursing faculty*, *role transition*, *faculty role transition*, *faculty attrition*, *nursing faculty attrition*, *nursing faculty retention*, *faculty retention*, *nursing faculty intent to leave*, *nursing faculty*

*dissatisfaction, role ambiguity, role dissatisfaction, and role strain.* The primary purpose of the review was to investigate the incidences and causes of role strain, role ambiguity, role transition, job dissatisfaction, and attrition among nursing faculty as well as faculty in other disciplines to develop a basis for the study. In the following review of the literature, I examine the topics of role ambiguity, role strain, role transition, and job dissatisfaction leading to attrition among faculty.

### **Role Ambiguity**

Role ambiguity has been described as situations occurring in a job where the expectations or behaviors of the employee are unclear and need to be clarified (Gahlan & Singh, 2014; Yurur & Sarikaya, 2012). Research has been conducted to address how role ambiguity contributes to difficulty transitioning into academia for nursing faculty; however, role ambiguity has usually been addressed concurrently with role strain and role conflict (Phillips et al., 2014). The problem identified in Section 1 was role ambiguity, increased role strain, and decreased job satisfaction resulting in poor role transition and attrition among the nursing faculty at colleges in the mountain region of Western North Carolina. The rationale for the study was that although extensive research has been conducted on nursing faculty role ambiguity, role strain, difficulty with transition into academia, and role dissatisfaction, all leading to attrition (Barksdale et al. 2011; Bittner & O'Connor, 2012; Cranford, 2013; Gilbert & Womack, 2012; Nardi & Gyurko, 2013; Schoening, 2013), to the best of my knowledge no research has been conducted on this topic at the colleges and universities in the region of study. The nursing shortage in the

United States is continuing to grow as the demand for nurses is becoming greater than the supply (Cranford, 2013), which has the potential to adversely affect the health care of all populations and all areas of the United States (Nardi & Gyurko, 2013). An even greater problem than the shortage of nursing is the shortage of nursing faculty. Retaining current, qualified nursing faculty is needed (Baker, 2010). Research addressing role ambiguity in other professions such as social work and information technology (IT) has also been conducted, and the results may be useful when considering the relationship between role ambiguity and job dissatisfaction among nursing faculty (Faucett, Corwyn, & Poling, 2013; Gahlan & Singh, 2014; Madlock & Chory, 2014; Moura et al., 2014; Yurur & Sarikaya, 2012). Although the majority of the research addressed role ambiguity in relation to difficulty transitioning into academia or into a new position, some researchers focused on the effects of role ambiguity on burnout among nurses in the clinical areas and in other professions (Phillips et al., 2014; Tastan, 2014).

Role ambiguity is thought to contribute to burnout in some professions. Tastan (2014) conducted a study of Turkish nurses to investigate the relationship between job demands and burnout. Tastan found that job demand factors, including role ambiguity, were directly related to job stress, job performance, and possibly retention. Phillips et al. (2014) found that role ambiguity was associated with attrition in the paid workforce. However, Phillips et al. also noted that when studying volunteer hospice workers, role ambiguity and burnout were not significant factors or concerns among this population of workers. Although not specific to nursing education, the findings of these studies can be

used to enhance the understanding of how role ambiguity relates to job dissatisfaction and role transition for novice nursing faculty.

Studies have been conducted to determine the effects of ambiguity specifically in the transition of a clinical nurse into academia (Schoening, 2013; Specht, 2013). Schoening (2013) used a grounded theory approach to describe role ambiguity experienced by novice nursing faculty. Schoening (2013) described the phases of transition and noted that the participants reported feeling unprepared and unsure of the role expectations. In a quantitative study, Specht (2013) found a correlation between role ambiguity and difficulty transitioning into academia for novice faculty. Although these studies addressed correlations between role ambiguity and difficulty transitioning into academia, other research has been conducted focusing on the effects of role ambiguity on job satisfaction and faculty attrition (Baker, 2010; Bittner & O'Connor, 2012; Cranford, 2013; Suplee & Gardner, 2009).

Bittner and O'Connor (2012) conducted a descriptive quantitative study to identify barriers to nursing faculty job satisfaction. Results from 226 survey responses supported the theory that role ambiguity led to role strain, difficulty in transitioning, and the intent to leave academia. However, although role ambiguity was noted as a factor in the decision to remain in academia, 87% of the respondents to the survey reported satisfaction in their current job and only 19% reported an intent to leave academia within 1 year. Cranford (2013) conducted a study to determine whether role ambiguity, role strain, and job satisfaction played a significant role in the intent to leave academia.

Cranford surveyed faculty from 31 nursing programs in the Southeastern United States, and the findings indicated that there was a direct correlation between role ambiguity, as well as role strain and job satisfaction, and the intent to leave academia. Baker (2010) and Suplee and Gardner (2009) also found that role ambiguity was directly related to the intent to leave academia among nursing faculty.

Several authors recognized role ambiguity as a factor related to difficulty transitioning into academia and the intent to leave academia; however, mentoring was determined to be the only viable solution to the problem (Barksdale et al., 2011; Gardner, 2014; Singh et al., 2014). Singh et al. (2014) conducted a mixed-method study but reported only the quantitative findings in the article. Results of the study indicated that novice nursing faculty were vulnerable to turnover due to factors such as lack of support and role ambiguity. Singh et al. (2014) suggested that the findings supported the need for mentoring programs to aid in the transition of novice faculty and ease stressors such as role ambiguity. No other solutions to alleviate role ambiguity were suggested. In a similar study, Gardner (2014) noted that novice faculty were often unprepared for the role of educator and reported role ambiguity as a precursor to stress. Gardner (2014) recommended mentoring as a solution to the problem. Barksdale et al. (2011) described the institution of a faculty development program to guide novice faculty and ensure the expectations and challenges of the role are addressed. Barksdale et al. (2011) noted that without some type of program to foster the transition of novice faculty, role ambiguity



occurs and leaves the faculty feeling unprepared and possibly considering leaving the position.

Role ambiguity has also been studied in professions other than nursing (Gahlan & Singh, 2014; Faucett et al., 2013; Madlock & Chory, 2014; Moura et al., 2014; Yurur & Sarikaya, 2012). Yurur and Sarikaya (2012) studied the effects of role ambiguity among social workers in Turkey. Yurur and Sarikaya (2012) determined that like nursing, role ambiguity was a significant factor leading to poor job satisfaction and burnout among social workers. In similar studies by Faucett et al. (2013) and Gahlan and Singh (2014), both clergy and IT professionals experienced role ambiguity when beginning a new position. Faucett et al. (2013) and Gahlan and Singh (2014) determined that role ambiguity was directly related to job dissatisfaction. Moura et al. (2014) and Madlock and Chory (2014) conducted studies on workers in professions other than nursing and determined that socialization and employee engagement suffered when role ambiguity was present among the workers. In several professions, including nursing education, role ambiguity has been determined to be a partial factor in the intent to leave a position. However, role strain, in addition to role ambiguity, has also been identified as a major reason for job attrition.

### **Role Strain**

Role strain is stress generated when an employee has difficulty with the expectations of a role (Andrews & Kacmar, 2014; Cranford, 2013; Engle & Prince, 2012). Koehler and Kim (2012) concluded that many new educators are faced with

barriers in the first few years and they need support and guidance. Researchers have conducted studies to investigate the relationship between role strain, as well as other factors, and the intent to leave academia among nursing faculty (Bittner & O'Connor, 2012; Clark, 2013; Cranford, 2013; Yedidia, Chou, Brownlee, Flynn, & Tanner, 2014). Bittner and O'Connor (2012) concluded that role strain was influenced by workload. Using a quantitative survey Bittner and O'Conner determined that 44% of the respondents experienced role strain related to workload and considered it to be a major factor in the decision to leave academia with 52% planning to leave academia within five years. Clark (2013) discussed the fact that role strain contributed to difficulty transitioning into academia; however, it was not a major factor. Clark concluded that novice faculty progress through five stages while transitioning and if they established positive relationships with other faculty, role strain was less likely to be experienced. Mentoring or some type of one-on-one guidance has been suggested by some researchers as a method to decrease role strain but research regarding other methods to combat the problem is sparse.

In studies by Cranford (2013) and Yedidia et al. (2014), role strain due to a lack of preparedness for the role and role ambiguity were determined to be significant reasons contributing to the intent to leave academia within five years. Cranford and Yedidia et al. suggested that mentoring new faculty may help diminish role ambiguity and role strain. Nick et al. (2012) noted that orientation to the faculty role, integration into the academic community, and development of teaching skills should be included in a mentoring

program to help decrease role strain and aid in the transition to academia for new faculty. Nick et al. did not suggest any other alternatives to mentoring as methods to decrease role strain. Researchers have concluded that role strain is a significant factor in the decision to remain in academia among nursing faculty; however, research among workers in other fields has also been conducted (Andrews & Kacmar, 2014; Engle & Prince, 2012; Jaramillo, Mulki, & Boles, 2011).

In professions other than nursing, role strain is a factor leading to employee turnover. Quantitative studies by Jaramillo et al. (2011) and Engle and Prince (2012) were conducted to determine if role strain, a combination of role conflict and role ambiguity, was a significant factor in the job turnover among sales people. Jaramillo et al. and Engle and Prince concluded that role strain did lead to emotional exhaustion and a higher turnover of employees. Orgambídez-Ramos, Pérez-Moreno, and Borrego-Alés (2015) conducted a study to examine the relationship between role stress and in a similar study Andrews and Kacmar (2014) also concluded that role strain significantly affected workers and led to a higher turnover. However, Andrews and Kacmar also noted that employees feeling they had a sense of empowerment in the job, reported significantly less instances of role strain and the intent to leave the job. Although ambiguity and role strain appear to lead to job dissatisfaction, the transition into a new role for both novice and experienced individuals can also lead to job dissatisfaction and the intent to leave a position.

## **Role Transition**

Role ambiguity and role strain may lead to difficulties when transitioning into academia and the role of nursing faculty (Cranford, 2013). Researchers have shown that nurses choose academia initially or leave a clinical role to teach for a variety of reasons; however, the transition is often difficult. In a grounded theory study, Shoening (2013) concluded that nurses transitioning from a clinical role to academia are often unprepared and struggle with understanding that the skills required for teaching are different from the skills required in the clinical area. A new set of skills has to be learned. Novice educators experience a form of reality shock when entering academia. Feiman-Nemser (2012) discussed the intense learning during the first years of teaching and the intense feelings of loneliness for some new educators. The research suggests that new faculty need support as they transition into the role.

Baker (2010) and Gilbert and Womack (2012) both discussed the development and implementation of community college nursing faculty orientation programs. It was determined in both studies that a comprehensive orientation program aids in the transition of clinical nurse to educator and leads to increased retention of new faculty. In both studies no other alternatives to address the issue were reported. Gardner (2014) explained that nurses often are not prepared for the role expectations of new faculty. Gardner further explained that new educators often teach in the manner in which they were taught. Findings of the study indicated that new nursing faculty valued the importance of mentoring and without it they felt as if they fell through the cracks. Vaill and Testori

(2012) noted that a quality professional development experience aids faculty to begin teaching with skills, confidence, and experience to provide a valuable learning experience. Easing the transition into the faculty role may help decrease feelings of role ambiguity and role strain as well as increasing the likelihood of satisfaction and retention of the novice faculty member.

### **Job Dissatisfaction and Attrition**

Job dissatisfaction leads to unpleasant working conditions and may ultimately lead to attrition of qualified employees. Faculty retention is of increasing importance. Law et al. (2012) wrote that the loss of one faculty member has many negative effects including financial effects. The cost of recruiting, hiring, training, and mentoring a new faculty member costs about 1.5 times the salary of the faculty member. In a similar study, Hailu, Mariam, Fekade, Derbew, & Mekashaet (2013) noted that faculty attrition affects both workers and institutions and is costly to overcome. McCoy, Newell, and Gardner (2013) wrote that one way to increase employee retention is to increase job satisfaction. Not only are dissatisfied faculty more likely to leave a position, they may have significant influence on remaining faculty which could affect morale and retention.

Researchers have conducted studies indicating that issues with the expected workload of a nursing instructor have been identified as significant reasons for job dissatisfaction. Bittner and O'Connor (2012) performed a descriptive, quantitative study based on a previous pilot project started in 2007 to determine faculty satisfaction. Findings indicated that overall job dissatisfaction among nursing educators was high. The

most highly rated barriers to satisfaction were a lack of autonomy, a lack of support, poor relationships with colleagues, and a lack of a sense of accomplishment. Cranford (2013) implemented a study to clarify the intent to stay in academia based on role strain and satisfaction with the transition to education. The most common findings for intent to leave nursing education due to job dissatisfaction were increased workload, extra job functions, and a lack of support from administration. In a similar survey study Roughton (2013) noted that 45 percent of nursing faculty were dissatisfied in their current roles and about 25 percent of those nurses intended to leave academia. Nurses working in the clinical area also experience job dissatisfaction. Although they do not work in academia, problems leading to job dissatisfaction are similar to those in academia (Amiresmaili & Moosazadeh, 2013; Kalandyk & Penar-Zadarko, 2013; Ravari, Bazargan-Hejazi, Ebadi, Mirzaei, & Oshvandi, 2013).

Job dissatisfaction leads to similar problems in clinical nursing as it does in academia. Several studies focused on nurses working in the clinical area have shown that these nurses also experience job dissatisfaction. In a study by Kalandyk and Penar-Zadarko (2013), 300 nurses were surveyed and interviewed to determine their perceptions of professional problems in nursing. Findings indicated that job dissatisfaction correlated with job stress and feelings of frustration with the job. A similar study was conducted by Ravari et al. (2013) focusing on job satisfaction and job dissatisfaction among Iranian nurses. Ravari et al. noted that job satisfaction was directly related to attitude, emotional reactions to aspects of the job, and the personal values of the nurse. The findings

indicated that the nurses felt dissatisfied with the job when increased stress occurred. The stress was caused by things such as workloads, pay, and the inability to follow perceptions of the core values of a nurse. Amiresmaili and Moosazadeh, (2013) also conducted a study of job satisfaction among Iranian nurses and determined that the more satisfied nurses are with the job, the less likely they are to leave. Amiresmaili and Moosazadeh also attributed long working hours and difficulty of the job to job dissatisfaction among the nurses. Job dissatisfaction has been researched and it has been determined to be a problem among nurses in academia as well as in the clinical areas; however, other professions also experience job dissatisfaction among employees.

Nursing faculty and clinical nurses do experience job dissatisfaction; however, the issue is not limited to the nursing profession. Research has also been conducted regarding job dissatisfaction in professions other than nursing (Bowling et al., 2013; Rossler, 2012; Sohag et al., 2012; Tull, 2014). Rossler (2012) conducted a study focused on job dissatisfaction among mental health care workers. Rossler discussed factors related to job dissatisfaction including workload, fatigue, stressful interactions with patients, increased work demands, and increased accountability. Although the study focused on mental health workers the findings are relevant to the study of job dissatisfaction among nurses and nursing faculty. In a study by Tull (2014) focusing on role ambiguity and role strain as it relates to job dissatisfaction, the findings indicated a direct correlation between feelings of role strain and role ambiguity and job dissatisfaction. Tull also noted the employees experiencing job dissatisfaction have a higher propensity to leave the position.

In a similar study, Orgambídez-Ramos et al., (2015) conducted research to examine the relationship between role stress and job satisfaction. The quantitative study included 586 participants working in entrepreneurial organizations across Spain. Results showed that the role stressors of role strain and role ambiguity were directly related to job satisfaction. Bowling et al. (2013) wrote about job satisfaction levels getting worse over time. Bowling et al. explained that according to literature most workers are dissatisfied with their jobs and job dissatisfaction has increased dramatically in recent years. However, Bowling et al. also noted that job satisfaction is increased when workers experience lower levels of job stress. In a similar study, Sohag et al. (2012) concluded that factors causing job dissatisfaction such as the workload, pay, and the working environment increased role stress and strain and ultimately job dissatisfaction. As with the research focusing on role ambiguity and role strain, mentoring of new employees has been suggested as a method to increase job satisfaction and attrition (Bickel, 2012; Bittner & O'Connor, 2012; Bucklin, Valley, Welch, Tran, & Lowenstein, 2014).

Mentoring of new employees and novice faculty has been discussed in the literature as an approach to ease the transition into academia. Bittner and O'Connor (2012) studied the barriers affecting nursing faculty job satisfaction and determined that the working environment and workload were consistent factors affecting job satisfaction. Bittner and O'Connor suggested that solutions to ensure nursing faculty job satisfaction include fostering growth of new faculty, ensuring the faculty are utilized pertaining to their strengths, and improving the work experience for the faculty through mentoring.



Bickel (2012) noted that faculty attrition is expensive for an institution. Methods to promote a more congenial work environment and incorporating methods to increase faculty skill levels may help decrease faculty attrition and turnover. According to Bucklin et al. (2014), faculty leave academia for a variety of reasons including a lack of recognition for experience, work load, and a lack of mentoring for a new position. Gilbert and Womack (2012) discussed the development of a novice faculty orientation program as a method to ease the transition into academia and increase retention. However, Gilbert and Womack did not discuss any other approaches to promote faculty retention in nursing.

Researchers have shown that factors such as role ambiguity, role strain, and difficulty with role transition lead to job dissatisfaction and in some cases attrition or the intent to leave a job (Gahlan & Singh, 2014; Phillips et al. 2014; Specht, 2013; Suplee & Gardner, 2009; Tastan, 2014; Yurur & Sarikaya, 2012). Professions including academia, nursing, business, and other medical positions have been studied and all professions appear to experience role ambiguity, role strain, difficult role transition, and job dissatisfaction to some degree (Amiresmaili & Moosazadeh, 2013; Cranford, 2013; Engle & Prince, 2012; Jaramillo et al., 2011; Kalandyk & Penar-Zadarko, 2013; Ravari et al., 2013). The study focused on the factors related to role ambiguity, role strain, difficult role transition, as well as job dissatisfaction and attrition among the nursing faculty at the colleges and universities included in the study. Determining why the nursing faculty at

the educational institutions are experiencing these situations was needed to implement changes to improve the situation and retain experienced faculty.

### **Implications**

Common themes in the literature when discussing nursing faculty job dissatisfaction and the intent to leave academia were role strain, role ambiguity, and difficulty with role transition from clinical nursing to academia. Much of the research discussed the need for faculty orientation and mentoring programs to ease the difficulties associated with the transition to academia to decrease the instances of role ambiguity and role strain for novice nursing faculty. The results of the study may be useful to the administration of the colleges and universities in the area to help determine why nursing faculty attrition is high. The findings could be used to develop and implement plans to decrease role ambiguity and role strain for both novice and experienced faculty thus increasing retention of quality faculty and decreasing attrition.

### **Summary**

The problem, identified and discussed in Section 1, that initiated this study was role ambiguity, increased role strain, and decreased job satisfaction resulting in poor role transition and attrition among the nursing faculty at colleges in the mountain region of Western North Carolina. The rationale for the study was that although extensive research has been conducted regarding nursing faculty role ambiguity, role strain, difficulty with transition into academia, and role dissatisfaction, all leading to attrition (Barksdale et al. 2011; Bittner & O'Connor, 2012; Cranford, 2013; Gilbert & Womack, 2012; Nardi &

Gyrko, 2013; Schoening, 2013), after a thorough search for similar research conducted in the region, to the best of my knowledge, no research had been conducted regarding this issue at the colleges and universities in the region all of which had open faculty positions at the time of the study. The nursing shortage in the United States is continuing to grow as the demand for nurses is becoming greater than the supply (Cranford, 2013) which has the potential to adversely affect the health care of all populations and all areas of the United States (Nardi & Gyrko, 2013). An even greater problem than the shortage of nursing is the shortage of nursing faculty (Baker, 2010). Key terms used throughout the study were defined. I discussed the local and national effects of the shortage of nursing faculty which supports the need for more research. I also discussed the research questions used to guide the study, discussed the conceptual framework, and conducted a thorough literature review. I will discuss the methodology including data collection and analysis in Section 2.

## Section 2: The Methodology

### **Introduction**

Using the concepts of Kahn's organizational role theory (1984) and Schlossberg's transition theory (1985), I explored the factors related to role ambiguity, role strain, job dissatisfaction, difficulty transitioning into academia, and attrition among the nursing faculty at the regional colleges and universities. Gaining an understanding of why current faculty are experiencing these problems would enable the administration of the colleges to develop methods to combat the problem. Keeping qualified nursing faculty is the key to be able to continue admitting and educating student nurses and to allow more nurses to enter the profession. According to Maxwell (2013), in a qualitative study the researcher is exploring a host of factors that may be influencing a situation, which is why a qualitative case study design was used for this study. Yin (2014) noted that the case study design may be used in a variety of situations to gain knowledge about an individual, a group, or an organization. Yin also noted that the case study design is commonly used in the education and nursing fields and is preferred when examining events when behaviors cannot be manipulated.

### **Qualitative Research Design and Approach**

I used a qualitative case study design for the doctoral study. Although a quantitative approach or a mixed-methods approach may be considered, the approach largely depends on the goals of the researcher (Hancock & Algozzine, 2011). I gathered data from online interviews with current faculty members at regional colleges and

universities to try to understand why the problems of role ambiguity, role strain, job dissatisfaction, difficulty transitioning into academia, and faculty attrition were occurring. According to Hancock and Algozzine (2011), in qualitative research the goal is to understand the situation from the participant's perspective rather than from the researcher's perspective. Because I was attempting to explore reasons for the problems occurring among the nursing faculty at the colleges and universities, a qualitative approach was appropriate. I chose a case study design because of the small number of available participants and because the research was focused on only six colleges and universities of nursing within the mountain region of Western North Carolina.

The use of a case study design for this study was appropriate because the participants were all from nursing programs at one of six colleges and universities of nursing, and I was attempting to learn why the nursing faculty were experiencing role ambiguity, role strain, job dissatisfaction, difficulty transitioning into academia, and attrition. According to Yin (2014), when the focus of research is to answer "how" and "why" questions, a case study design is a recommended choice.

An explanatory case study design is appropriate for research exploring why nursing faculty express feelings of job dissatisfaction and role strain and may be considering leaving the position. An explanatory case study is used to explain how or why some condition came to be, such as the role strain and job dissatisfaction among the nursing faculty. Other types of case studies such as a descriptive case study, exploratory case study, and multiple case study were considered to explore the reasons for the faculty

feelings of job dissatisfaction; however, these were not as appropriate as an explanatory case study.

Quantitative research designs were considered for the study; however, these designs were not the best choice. According to Creswell (2012), a quantitative approach would be used when a trend needs to be studied or when there is a need to explain the relationship between variables. This type of research would also involve collecting numerical data from a large number of people and statistical analysis would be used to interpret the data. In contrast, a qualitative approach is appropriate for the study of a small group of nursing faculty to explore why feelings of role strain and job dissatisfaction may be leading to attrition. A qualitative approach is a better choice when the researcher desires to explore a problem and gain a detailed understanding of a phenomenon or event. The data are gathered from a small number of participants and the views and feelings of the participants are included.

Other types of qualitative research considered but not chosen include ethnography, phenomenological, and grounded theory research. Ethnography would be appropriate for the study of a cultural or social group. A phenomenological design would be used to explore the meanings of lived experiences, but this was not what I was attempting to accomplish. A grounded theory approach requires the creation of a theory to explain an action or process (Hancock & Algozzine, 2011). An explanatory case study approach was the most appropriate method to study the factors affecting role strain, job

dissatisfaction, and attrition among the nursing faculty at colleges and universities in North Carolina.

### **Participants**

I used a convenience sample for the study. All nursing faculty currently teaching in the classroom or clinical areas from six colleges and universities in the mountain region of Western North Carolina were considered potential participants. I purchased a list of current registered nurses, including name, email address, discipline, employment status, and level of education in the state of North Carolina, for public use to aid in recruiting for employment and research from the NCBON. According to Creswell (2012), it is typical in qualitative research to study a few individuals or a few cases due to the nature of wanting to provide an in-depth analysis of a case or a few individuals. Creswell also explained that the number may vary from as few as one or two participants to as many as 30 or 40. Utilizing the list from the NCBON and college and university faculty lists from college websites, I was able to match current faculty listed on the websites with personal email addresses on the list.

I gained access to the participants for the study via email invitations sent from my Walden email address. I conducted all of the interviews online. I provided a private phone number and Walden email address for communication with participants wishing to participate in the study. Although it was offered, no participants requested a follow-up face-to-face or telephone interview.

To ensure confidentiality, all participants were informed that no information would be obtained or stored on a computer accessible by anyone at any of the colleges or universities. I could not identify which participants completed the online survey, so anonymity was ensured. These measures helped me establish a trusting working relationship with the participants.

When accessing the survey on Survey Monkey, all participants were presented with an institutional review board informed consent form, which included the name of the researcher, the name of the study, contact information for the researcher, and the expected duration of the study. The consent form also included the purpose of the study, procedures used to gather data, risks and benefits to participation, a statement regarding confidentiality and voluntary participation, and a statement informing the participants of their right to withdraw from the study at any time without consequences. All data were coded and stored in a password protected file on my personal home computer with no access granted to anyone else.

### **Data Collection**

Two days after approval to proceed with the final study was granted by the Walden University IRB, approval number 08-04-15-0075053, expiration August 3, 2016, I emailed invitations to participate to 22 current nursing faculty at colleges and universities in the mountain region of Western North Carolina. The first invitations were emailed to private emails from my Walden University email. I received requests from two of the invited participants to include additional faculty requesting to participate in the survey. I



emailed the additional invitations 3 days after the first emails were sent. I sent a total of 22 invitations, with two being returned because of inactive or inaccurate email addresses. One week after the last email invitation was sent, I sent a second email to all of the previously invited nursing faculty. The survey was then closed one week after the final reminder email was sent.

The invitation to participate, which was emailed to each potential participant, included a link to a file containing the full consent form with information about the study, including any potential risks and benefits of participation, and an online link to the actual survey on Survey Monkey. The participants were also informed that anonymity was ensured in the online format, but if a follow-up face-to-face or telephone interview was requested, confidentiality would apply but anonymity would no longer be ensured. Participants wishing to expand beyond the online interview were assured that pseudonyms and numerical codes would be used to protect the identity of the respondents. Upon opening the survey via the provided link, each participant was advised to read the full consent form and a statement indicating that by completing the survey, he or she would be giving consent to participate in the study. Fifteen open-ended qualitative questions (Appendix B) were presented on a private Survey Monkey site and were available to each participant after reading the consent and moving forward to the survey. The questions were designed to gather information to answer the six original research questions for the study.

Table 1 indicates the relationship between the research questions and the interview questions used in the study.

Table 1

*Relationship of the Research Questions to Interview Questions*

Research Question	Sample Interview Questions
Why do newly hired nursing faculty experience role ambiguity when beginning employment in academia?	1. Describe the first few weeks of teaching at your college or university. When you began your job did anyone help guide you through the required paperwork such as job description and policy and procedures for your job? Please explain.
Why do the nursing faculty experience role strain when beginning a new job in academia?	1. Describe your feelings when you are given a new teaching assignment or a new job requirement for your current teaching position.
Why do the nursing faculty experience job dissatisfaction when beginning a new job in academia?	1. Please describe your level of satisfaction with your current job.
Why are newly hired faculty experiencing problems with transitioning into the role when beginning employment in academia?	1. Tell me about your experiences as you transitioned from the clinical area or from another job into your current faculty position. Do you think your transition into your current position was difficult or fairly smooth? Please elaborate.
Why are nursing faculty considering leaving the position within the first 5 years of employment?	1. At the end of your first quarter of teaching at your college or university, how did you feel about continuing to teach at the college or university?

The interviews were conducted using the questionnaire guide (Appendix B) to answer the research questions about role ambiguity, role strain, job dissatisfaction,

difficulty transitioning into academia, and faculty attrition among nursing faculty. The questions were open-ended to encourage communication. Prior to providing access to the online interviews, the questions were reviewed by three of my peers with experience interviewing and collecting data. All three peers have graduate degrees in nursing or education and made recommendations for any changes needed to ensure the questions were not biased. All data gathered were kept in a confidential, password protected file on my personal home computer.

### **Role of the Researcher**

I am a nursing instructor in an accelerated associate's degree in nursing (ADN) program. I have been in this position since I completed my master's degree in nursing education in 2011. As an instructor, I have the same duties and responsibilities as all of the potential participants in the study. I did not interview any of the department chairs of any of the colleges because, as faculty supervisors, department chairs do not typically teach classes. Although I was acquainted with most of the potential participants through regional nursing and nursing education meetings, I did not have any relationship with any participant other than a professional working relationship. I expected the interviews to be congenial and focused. We were not friends outside of work, and all of the relationships were strictly professional as nursing faculty. I had been teaching at one of the colleges for 3 years, and prior to that I had taught at another college in the certified nursing assistant program. For both of my teaching positions, I did experience role ambiguity, role strain, and difficulty transitioning into the position. These factors could have led to biases

related to my study topic. I had to remain acutely aware of my biases and avoid leading questions or influencing the participant responses in any way. I downloaded transcripts of the interviews without any changes or deletions to the participants' answers.

### **Data Analysis**

A total of 12 online surveys were completed and no requests for follow-up face-to-face or telephone interviews were received. I downloaded the survey transcripts from the Survey Monkey website and saved them on my personal computer in a password protected file. The responses were marked using SM and the number corresponding to the respondent number on the downloaded survey. No information was deleted, excluded, changed, or added to the downloaded survey transcripts. Member checking was not possible because all of the participants were anonymous.

### **Coding Procedure**

I coded of the data by hand due to the complexity and learning curve needed for coding software and due to the small number of interviews used in the study. Although there is no definite procedure for coding, Creswell (2012) suggested following steps to make the process easier. Per Creswell's recommendation, I began by reading all of the transcripts carefully several times and making notes as needed. I then reread each document and made more notes while looking for common words, themes, and ideas. This step was followed by the actual highlighting of common words and thoughts. I then assigned labels or codes to chunks of data such as phrases and sentences as described by Miles and Huberman (1994). Next, I clustered the common data and identified themes

arising from the transcripts. Table 2 shows initial code words, clustering of ideas, and themes identified from the data.

Table 2

*Coding of Data*

Initial Key Words	Final Codes	Themes
Overwhelmed Naïve Challenging Excited Nervous	Challenging, unprepared, overwhelmed, uncertainty, naïve, chaotic, confusing	Lack of preparation for academic role expectations
Uncertainty Chaotic Anxious Stressed	Overwhelmed, nervous, stressed, hopeful, concerned, excited, anxious	Lack of awareness of new role requirements or new teaching assignments
Unprepared Concerned Confusing Hectic Dread Struggled No orientation	Stressful, confusing, informal mentors trial and error, difficult, hectic, struggled, rapid, relatively chaotic, rocky, little guidance, dread, paralyzing	Difficulty transitioning into academia or a new teaching position
No mentoring Constant change Not satisfied Satisfied Motivated	HR orientation only, no department orientation, no formal mentor, definitely needed, beneficial	Need for orientation and mentoring for nursing faculty
Unsure Hopeful Rapid Smooth Rocky Conflicted	Buyer's remorse, stressed, hopeful, concerned, no administrative support, frustrated, disappointment, overwhelmed, satisfied, not satisfied underpaid, love what I do, motivated, feel at home, conflicted	Satisfaction related to the desire to stay or leave a position
Love what I do Feel at home Unsupported Frustrated		Nursing faculty love what they do

## **Results and Analysis of the Data**

The purpose of the study was to explore why nursing faculty experience role ambiguity, role strain, difficulty transitioning, and job dissatisfaction which may lead to attrition. The research questions were:

Question 1: How do role ambiguity, role strain, difficult role transition, and job dissatisfaction contribute to the attrition of nursing faculty at colleges and universities of nursing in the mountain region of Western North Carolina?

Question 2: Why do the nursing faculty experience role strain when beginning a new job in academia?

Question 3: Why do the nursing faculty experience job dissatisfaction when beginning a new job in academia?

Question 4: Why do newly hired nursing faculty experience role ambiguity when beginning employment in academia?

Question 5: Why are newly hired faculty experiencing problems with transitioning into the role when beginning employment in academia?

Question 6: Why are nursing faculty considering leaving the position within the first 5 years of employment?

### **Research Question 1**

All of the questions included in the survey were designed to gather information to explore how role ambiguity, role strain, difficult role transition, and job dissatisfaction contribute to the attrition of nursing faculty in the region to answer the research question.

Responses to all of the questions provided insight into how each experience relates to attrition and revealed 6 themes during analysis of the data: The results of the study revealed 6 themes: lack of preparation for academic role expectations, lack of awareness of new role requirements or new teaching assignments, difficulty transitioning into academia or a new teaching position, need for orientation and mentoring for nursing faculty, satisfaction related to the desire to stay or leave a position, and nursing faculty love what they do.

### **Research Question 2**

I included three questions in the survey to answer this research question to explore why nursing faculty experience role strain when beginning a new job in academia. The questions in the survey were *1. Describe your feelings when you are given a new teaching assignment or a new job requirement for your current teaching position, 2. Describe your feelings about your current teaching workload or teaching assignment, 3. Describe your stress level, if any, while at work or when working on class assignments, tests, etc.* Responses to these questions led to the development of one of six themes: The need for orientation and mentoring for nursing faculty. There were a wide range of responses to these survey questions.

In response to the first question, which asked participants to describe their feelings when given a new assignment or job requirement, SM#1 wrote “I feel excitement and nervousness at the prospect of teaching a new subject.” SM#2 wrote “I automatically feel overwhelmed and want to start on the project right away.” SM#4 wrote “Let’s do

this!” SM#7 wrote “It is challenging. I am excited to try something new. However, I am overwhelmed and insecure at not being able to meet expectations.” SM#8 wrote “I like change.” SM#12 wrote “In my old job, the NCBON has a sensible rule that new nursing faculty are to be given a year’s grace period before being appointed to academic committees, the course coordinator position, etc.”

In response to the second question, which asked participants to describe their feelings about their current workload, SM#1 wrote “I feel good, I feel like the workload at my current job is fair.” SM#2 wrote “we have had some turnover, this is extremely overwhelming, but I welcome the challenge.” SM#3 wrote “I think my workload is fair and I am comfortable with my current teaching assignment.” SM#5 wrote “Four years later, I still feel like a fish out of water some days.” SM#6 wrote “Since I’m still new to academia, I’m not familiar with what constitutes a fair or balanced workload.” SM#9 wrote “It is very stressful to administer exams, it is also very stressful to rotate various clinical sites.”

In response to the third question, which was designed to explore levels of stress, SM#12 wrote “Initially it was very high. One of my biggest stressors at my old job came from poor instructional technology performance.” SM#11 wrote “The stress I feel is in monetary compensation and benefits.” SM#8 simply wrote “none.” SM#7 wrote “My stress level increases right before presentation of lecture, I do not feel overly stressed in the clinical environment.” SM#6 wrote “I love working on lectures and class activities, so



that time is fairly stress-free.” SM#4 wrote “Stress comes mainly from administration.” Finally, SM#2 wrote “I love what I do and this makes the tasks more fun than stressful.”

### **Research Question 3**

I included one question in the survey to answer research question three to explore the reasons why nursing faculty experience job dissatisfaction when beginning a new job in academia. The question included in the survey was *1. Please describe you level of satisfaction with your current job.* As with the responses to the previous question, responses there were a wide range of responses to this question.

In response to this question, SM#1 wrote “Good, my only complaint is with the top-level micro managing that seems to happen here.” SM#2 wrote “I am really satisfied with my job.” SM#3 wrote “I would say currently, I am not satisfied with my job. Too many changes are expected every day.” SM#6 wrote “There are parts of my job that I totally love. I am less satisfied when I feel that there are shifting expectations and I am not quite sure how I’m supposed to handle them.” SM#7 wrote “I am moderately satisfied with my job.” SM#10 wrote “My level of job satisfaction is very low.” SM#11 wrote “I love what I do.” Finally, SM#12 wrote “I feel pretty good. Time will tell whether I will meet new role expectations.”

### **Research Question 4**

I included four questions in the survey to explore why new nursing faculty experience role ambiguity when beginning a new job in academia. The questions were *1. Please describe your perception of what goals and objectives were expected in your job*

*when you began teaching in your current position, 2. Describe the first few weeks of teaching at your college or university, 3. When you began your job did anyone help guide you through the required paperwork such as job description and policy and procedures for your job? Please explain, 4. Did you attend any type of formal orientation program prior to beginning your current job? Please explain.* Responses to these questions led to the development of two of six themes: Faculty are unprepared for academic role expectations and Faculty are unsure and unaware about new role requirements or new teaching assignment

The respondents submitted a wide range of responses to these questions. The first question was designed to explore the participants' perception of job expectations. SM#1 wrote in response, "I was excited about the opportunity to work with pre-licensure students and get the academic experience." SM#3 wrote "I believe I was expected to teach courses that I could handle and that were in need of an instructor. I think goals for me were to be able to quickly adapt to the system, understand what I was doing, and do it effectively." SM#5 wrote "I didn't receive much guidance in this area, therefore initial goals were simply aimed at articulating the course content in such a way to deliver student outcomes as best as possible." SM#9 wrote "My perception was that our students were going to learn how to become a nurse, and how the nursing faculty were going to help them achieve this goal."

In response to survey question two, which asked participants to describe the first few weeks of teaching, SM#10 wrote "My own perceptions of my job expectation and

my role as a clinical instructor were to perform all of my duties in a professional and competent manner.” SM #11 wrote “To meet the goals and objectives according to the college’s policy and procedures and with the department chair approval. To seek guidance from fellow faculty members to increase my knowledge base and effectiveness as a new nurse educator.” SM#12 wrote “I pretty much thought that if I covered class and clinical well I was in good shape. That was naïve.”

In response to survey question three, which was designed to explore the process of orientation to the job that occurred when hired, SM#2 wrote “I wasn’t sure what questions to ask at the beginning. I learned by trial and error.” SM#3 wrote “My first few weeks were hectic. I was literally handed a book and a syllabus and told that I could do whatever I wanted as long as I covered the chapter and course objectives.” SM#4 wrote “The first few weeks were somewhat chaotic as I was hired one day and began the next day.” SM#6 wrote I was assisting with a course and had a great mentor, but I didn’t know what I didn’t know, so I felt as though I was always behind.”

Finally in response to survey question four, which explored whether or not an orientation had been offered to the participants’, SM#7 wrote “The college provided a formal face to face orientation program as well as computer tutorials on how to use Moodle, and use college attendance program.” SM#8 wrote “I attended convocation of the entire college.” SM#9 wrote “The college did not provide any formal orientation program for my current position.” SM#10 wrote “My orientation was chaotic and disorganized.

### Research Question 5

I included four questions in the survey to explore the reasons by newly hired faculty experience difficulty transitioning into a new role in academia. The questions were *1. Tell me about your experiences as you transitioned from the clinical area or from another job into your current faculty position. Do you think your transition into your current position was difficult or fairly smooth? Please elaborate, 2. Please describe your first few weeks in your current job. Did anyone at your college or university formally or informally mentor you? Please explain, 3. Please tell me about how you developed your style of teaching. Did anyone at your college or university help you learn to develop tests, choose books, prepare your syllabi, or handle difficult students? Please elaborate, 4. Do you think a formalized orientation and mentoring program would be beneficial for faculty transitioning from clinical nursing to academia or when beginning a new job in academia? Please explain.* Responses to these questions led to the development of one of the six themes: Faculty experience difficulty transitioning into academia or a new teaching position. A wide range of responses were noted in the data analysis for these questions.

In response to the first question, which asked participants to describe their experiences during transition into the role, SM#1 wrote “I felt that my transition from staff development to academics was smooth.” SM#2 wrote “It was a culture shock to me.” SM#3 wrote “I struggled with the transition from clinical nursing to academia.” SM#4 wrote “I think the transition was fairly smooth.” SM#6 wrote “I think my

transition was pretty rocky, but mostly due to my own insecurities.” SM#9 wrote “As I would transition from one position to another, the lack of structured orientation was very frustrating and a huge dissatisfier [sic]. I felt as if I wasted a lot of time trying to understand the new role.” SM#11 wrote “I feel that my transition into my current position was relatively smooth.” Finally, SM#12 wrote “I am not sure yet.”

Question two was designed to explore the first few weeks of teaching. In response to this question, SM#1 wrote “Yes I did have numerous informal mentors.” SM#3 wrote “Very stressful, I had an informal mentor who showed me a few things but I did not agree with her teaching style so it was not helpful.” SM#5 wrote “I did receive an unofficial orientation manual which consisted of a 3-ring binder with copies of forms, etc.” SM#6 wrote “Yes, thank goodness, I had an awesome mentor.” SM#9 wrote “The first few weeks in my current job were very confusing and stressful.” SM#10 wrote “My orientation was very haphazard and disorganized.”

The third question was developed to explore how new faculty develop a teaching style. In response to this question, SM#12 wrote “I have adopted existing course material and texts.” SM#10 wrote “My teaching style that I use in the clinical and classroom setting is one that I have obtained through many years of giving in services, lectures, and programs in the clinical setting.” SM#9 wrote I observed other faculty develop their course content and observed how they developed the information. SM#8 wrote “all the faculty did.” SM#5 wrote “Teaching style was formed by trial and error.” Finally, SM#4 wrote “I just learned by asking questions and copying what others had done.”

The final question was designed to explore whether or not the participants felt like some type of formalized orientation and mentoring program would have made the transition into the role easier. All of the participants indicated that some type of orientation is needed when transitioning into academia. In response, SM#1 wrote “I do think a more formalized orientation for academia would be helpful.” SM#2 wrote “I certainly do!” SM#3 wrote “Definitely!” SM#4 wrote “I do think it would be helpful.” SM#5 wrote “Absolutely.” SM#6 wrote “Yes, I think it would be very helpful.” SM#10 wrote “A formalized orientation and mentoring program should be mandatory for any new clinical nursing faculty.” Finally, SM#12 wrote “Nursing is so weirdly different that I think you need someone in your area of expertise to guide you.”

### **Research Question 6**

I included two questions in the survey to explore nursing faculty consider leaving a position within the first five years of employment. The questions included were *1. At the end of your first quarter of teaching at your college or university, how did you feel about continuing to teach at the college or university?* *2. Tell me in detail what would have the most influence on your decision to remain at your college or university or to leave your current job.* The responses to these questions led to the development of two themes: Satisfaction relates to the desire to stay or leave a position and Nursing faculty love what they do. There were a wide range of responses to these questions.

In response to the first question, which was designed to explore feelings about the job and possible feelings of leaving, SM#1 wrote “I love teaching! This is what I want to

do for the next several years.” SM#2 wrote “despite my frustration, I felt joy and elation to finally be doing what I was meant to do in nursing.” SM#3 wrote “I was not sure at the time. I stayed but I was so overwhelmed and really still had no clue of what I was doing.” SM#5 wrote “I absolutely wanted to give up.” SM#7 wrote “I was still hopeful but concerned that I was not “teacher” material.” SM#9 wrote “I felt frustrated and disappointed after my first quarter of teaching.” SM#10 wrote “I felt compelled to stay and help where I was needed.” SM#11 wrote “Motivated to continue to shine the light of passion I have for lifelong learning and nursing.” Finally, SM#12 wrote “I felt at home. I enjoy teaching.”

The second question was designed to explore what influences may lead to attrition. In response, SM#1 wrote “If the program is no longer representative of what my goals and standards are, I would not stay.” SM#2 wrote “I believe it is job satisfaction and happiness. I plan to retire as a teacher.” SM#5 wrote “adequate support and resources to accomplish set goals and objectives.” SM#7 wrote “I feel that if my service as an instructor does not provide a positive correlation...students meeting objectives, passing the course, and passing NCLEX, then I need to exit this role.” SM#10 wrote “It is very important to me to have a competent, educated, seasoned, and wise Department of Nursing Chairperson who can lead the department by example.” Finally, SM#12 wrote “A savvy approachable dean and supportive colleagues.” Data analysis of all research questions and the responses to the questions led to the development of six major themes.

Six major themes emerged from the data throughout the analysis:

1. Lack of preparation for academic role expectations,
2. Lack of awareness of new role requirements or new teaching assignments,
3. Difficulty transitioning into academia or a new teaching position,
4. Need for orientation and mentoring for nursing faculty,
5. Satisfaction related to the desire to stay or leave a position,
6. Nursing faculty love what they do.

Common words and ideas presented by many of the participants in response to questions about role ambiguity to answer the research question why do newly hired nursing faculty experience role ambiguity when beginning employment in academia?, included challenging, unprepared, overwhelmed, uncertainty, chaotic, confusion, and naïve. Respondent SM#1 wrote “The first few weeks were somewhat chaotic as I was hired one day and began the next day” and respondent SM#10 wrote “My first few weeks of teaching at my college were very chaotic.” Respondent SM#6 wrote “For some naïve reason, I believed that curricula were spelled out” and respondent SM#3 described the first few weeks as “hectic and overwhelming.” Respondent SM#9 described feelings of “uncertainty and feeling unprepared to teach” during the first teaching assignment in academia. These responses led to the development of the themes: Lack of preparation for academic role expectations and lack of awareness of new role requirements or new teaching assignments.

When asked questions about role strain and stress to answer the research question why do the nursing faculty experience role strain when beginning a new job in



academia?, common words included challenging, anxious, overwhelmed, frustration, and anywhere from no stress to extremely stressful. Respondent SM#3 wrote “feel overwhelmed at times and I think my workload is fair.” The respondent went on to say “I have a lot of stress while I am at work due to micro-managing and no support from administration.” Respondent SM#2 described the stress level as a “5 on a scale of 1-10” and also elaborated by stating “teaching can be extremely overwhelming but I welcome the challenge.” Respondent SM#1 described “some stress but I feel excitement at the prospect of teaching a new subject and I think my workload is fair.” These comments suggested that faculty are sometimes unprepared for academia and they are unsure and unaware of the role requirements leading to feeling overwhelmed, frustrated, unprepared, and confused. These responses led to the development of one theme: Need for orientation and mentoring for nursing faculty.

When asked questions about transitioning into academia or into a new job to answer the research question why are newly hired faculty experiencing problems with transitioning into the role when beginning employment in academia?, participant’s wrote words like rapid, rocky, few resources, and lack of mentoring. Respondent SM#10 wrote “There was no real orientation for me as an adjunct as I transitioned into the academic setting, my transition was stressful. My orientation was very haphazard and disorganized.” Respondent SM#5 stated “I had to train myself and after a year or so on the job, I discovered that there did exist a faculty handbook which would have helped. I learned by trial and error.” Not all respondents reported problems during the transition

into academia. Respondent SM#4 wrote “I think the transition was fairly smooth, I learned by asking questions and copying what others had done re. syllabi, tests, etc.” The theme: Difficulty transitioning into academia or a new teaching position was developed from the responses to these questions.

Included in the survey with questions about role ambiguity and transitioning, were questions about the possible need for an orientation and mentoring program and every participant indicated a need for departmental orientation and mentoring for all nursing faculty. SM#4 wrote “I do think it would be beneficial, many new nursing faculty appear to be quite overwhelmed when they first start teaching.” Respondent SM#2 wrote “I certainly do! It is completely different and I would have benefited and learned faster and more effectively” and respondent SM#3 wrote “Definitely! Moving from clinical nursing to teaching is a huge change and having a process to make sure questions are answered and guidance through the first year teaching assignment would be beneficial.” These responses also led to the development of the theme: Need for orientation and mentoring for nursing faculty.

Finally when asked about job satisfaction and the intent to leave or stay to answer the research questions why do the nursing faculty experience job dissatisfaction when beginning a new job in academia? and why are nursing faculty considering leaving the position within the first 5 years of employment?, many of the participants stated they love their jobs, love teaching, and do not want to leave. However, some stated they were conflicted about staying or leaving and mentioned factors for leaving such as a lack of

support from administration. Respondent SM#6 wrote “I am not sure at this time about staying” and “the reputation of the college needs to improve and the administration of the college needs to be more supportive.” Respondent SM#9 wrote “after my first quarter of teaching I felt frustrated and disappointed but I felt like I needed to give the job one more quarter” and respondent SM#8 wrote “I was still hopeful but concerned that I was not “teacher” material.” These questions led to the development of two themes: Satisfaction relates to the desire to stay or leave a position and nursing faculty love what they do.

Questions were also added to the survey regarding the highest degree earned by the participant and the years of teaching experience for each participant. These questions were added to the survey to determine if the highest degree earned or the years of experience in academia would yield different data. The findings did not reveal any difference in responses based on the highest degree level attained by the participants. Three of the participants had terminal degrees including one Doctorate of Nursing Practice (DNP), one Doctorate of Education (EdD), and one Doctor of Philosophy (PhD). All of the participants did have a Master’s Degree in Nursing (MSN). Seven of the participants held MSN in nursing education and the remaining five held MSN in leadership and management. Five of the respondents had one year or less experience in academia, five of the respondents had taught between one and five years, and two of the respondents had ten or more years of experience in academia. I did discover some differences in responses based on the years of teaching experience but all of the respondents indicated feelings of being overwhelmed and stressed when beginning a new

job or taking a new assignment in academia. Some of the respondents with five or more years of experience indicated that although feeling stressed and overwhelmed, they adapt quickly and still like teaching and like what they do. Respondent SM#8 stated “I like change” and “I feel pretty good about it” when asked about feelings when given a new teaching assignment or beginning a new job. Respondent SM#12 stated “I feel at home. I enjoy teaching.”

No salient data were identified during the analysis of the interviews; however, discrepant data from one respondent were identified and were not factored into the final analysis of the data. The respondent answered 75% of the questions with the phrase “not much different than where I was previously employed as nursing faculty.” The responses were not useful because no explanation was given as to what or how things occurred at the previous place of employment. I had no way of determining if this was a positive or negative response.

### **Evidence of Quality**

Creswell (2012) explained that throughout the process of data collection and analysis, the researcher needs to ensure that the findings and interpretations are accurate. Creswell suggested triangulation, member checking, and auditing. Although I was not able to gather data from more than one type of interview due to no participants participating in a face-to-face or telephone interview in addition to the online interview, I did invite participants from more than one college or university in the region. This approach allowed me to gather information from faculty teaching in different nursing

programs throughout the region including ADN programs, BSN programs, accelerated programs, and programs using traditional teaching methods and concept based teaching methods. Comparing data from faculty from different types of programs gave depth to the study by allowing me to gather data from participants with varying viewpoints. Member checking was not feasible in the study because all of the data came from online interviews. I chose this format to ensure anonymity and encourage open communication. The interview questions were added to Survey Monkey just as they appeared in the interview instrument (see Appendix A) submitted to the Walden University IRB for approval. I did however, download the transcripts word for word from Survey Monkey without any deletions or changes to the participants' words or thoughts. To make sure I was staying on track and keeping my own personal biases in check, I asked for the assistance of a peer with a doctorate in education who was not included in the study to review my notes and coding as I progressed through the process.

### **Conclusion**

In Section 2 of the study, I addressed the methods used for data collection and analysis. The process for identifying and accessing participants was discussed as well as my role as the researcher for the study. I chose a case study approach to answer the research questions. The results of the study revealed 6 themes: lack of preparation for academic role expectations, lack of awareness of new role requirements or new teaching assignments, difficulty transitioning into academia or a new teaching position, need for orientation and mentoring for nursing faculty, satisfaction related to the desire to stay or

leave a position, and nursing faculty love what they do. Through the themes, I was able to answer the original research questions regarding role ambiguity, role strain, and difficulty transitioning into academia, job dissatisfaction and attrition. The data and themes derived from the analysis support the conceptual framework for the study. Two theories, Organizational Role Theory and Transition Theory were used to frame of the study. The use of both theories help describe the difficulties newly hired and novice nursing faculty face as they begin a new role in academia. The results of the study may be used by the administrators of colleges and universities in the area to develop more training and orientation for novice and newly hired faculty to ease the transitioning process and decrease role ambiguity, role strain, and job dissatisfaction ultimately leading to faculty retention. In Section 3 of the study. I will include the dissemination of the results and the project, a professional development program, to assist newly hired and novice nursing faculty transitioning into a new role.

### Section 3: The Project

#### **Introduction**

The purpose of the project study was to explore the factors leading to role ambiguity, role strain, difficulty with role transition, and job dissatisfaction among the nursing faculty at colleges and universities of nursing in the mountain region of Western North Carolina. The goal of the project was to develop a professional development program to assist nursing faculty transitioning from the clinical area to academia with minimal obstacles. Data indicated that most of the participants had experienced role ambiguity, role strain, and difficulty transitioning into academia or into a new teaching job. Many of the participants also indicated that, although they were still working, they had considered leaving the position after the first quarter or semester of teaching, but the love of teaching kept them from leaving. All of the participants indicated that training and support, whether in the form of an orientation or mentoring program or professional development classes, are needed by new faculty due to the demands of the position. Therefore, a professional development plan was developed to present a solution to the problem new faculty are experiencing. The professional development teaching sessions will be presented over 3 full days and will include teaching methods such as lecture, PowerPoint, and discussion followed by 2 days of observation in both the clinical setting and in the classroom (Appendix A).

### **Description and Goals**

The project, a 5-day professional development plan, was developed to aid in the transition of new nursing faculty as they move from clinical nursing to academia. The focus of the study, as described in Section 1, was role ambiguity, increased role strain, and decreased job satisfaction resulting in poor role transition and attrition among the nursing faculty at colleges and universities in the mountain region of Western North Carolina. Sessions planned for 3 of the 5 days were designed to provide more clarification of the nursing faculty role, what to expect, how to perform assessments and evaluations, and how to handle difficult students. New faculty have not encountered some of these issues, which could result in role ambiguity, increased stress and role strain, and difficulty transitioning into the role.

The goals of the project were the following:

1. To develop a program to offer an extended welcome to faculty who are joining a college or university for the first time.
2. To provide educational support for newly hired faculty to ease the transition into a new position at a college or university.
3. To provide resources for newly hired faculty to ease the transition into a new position at a college or university.

### **Rationale**

A professional development program was chosen based on the data analysis. When analyzing the data, I noted that the problems of role ambiguity, role strain, and



difficulties with the transition occur when newly hired faculty begin a new teaching job. Through the findings, I determined that professional development of newly hired faculty may be beneficial and may ease the transition into a new role. The study participants indicated that they had difficult transitions due in part to not having any type of orientation, mentoring, or professional development program in place. A lack of available resources led some of the participants to experience feelings of role ambiguity, role strain, and job dissatisfaction, and some participants considered leaving academia after teaching less than a year.

The project was developed to meet the needs of newly hired nursing faculty by providing resource information covering topics they would encounter but may not have ever experienced, which would hopefully lead to a smooth transition into the role. Educational experiences based on adult learning principles were included throughout the project program. The content of the program aligned with other novice faculty professional development programs cited in the literature (Baker, 2010; Cranford, 2013; Suplee & Gardner, 2009). The program would provide the opportunity for new nursing faculty to participate in educational experiences to aid in the development of skills to succeed in the new role.

### **Review of the Literature**

The purpose of the literature review was to find current literature that supported the subject matter and the chosen project genre. A comprehensive literature review was performed, and the findings guided the development of the project. The genre chosen was

a professional development plan for newly hired faculty to ease the transition into academia or into a new teaching job in nursing education. Data from the study indicated that both novice and experienced nursing faculty experience role ambiguity, role strain, and difficulty transitioning into a new job in academia, which then leads to feelings of job dissatisfaction and thoughts of leaving the position. Many of the participants revealed that they experienced feelings of being overwhelmed and anxious when beginning a new job in academia. Reasons included role ambiguity and increased stress from being unsure of how or what to teach and how to interact with students. The development of an orientation program was considered for the project; however, the data were collected from nursing faculty from six different colleges and universities in the study area and each college and university would require a unique orientation program. The participants all indicated a need for some type of orientation, mentoring, or professional development to make the transition into a new job easier. Professional development was identified throughout the literature as a method to provide needed education and support to new faculty (Cangelosi, 2014; Creten & Huyghe, 2013; Duphily, 2011; Gies, 2013).

### **Theoretical Framework**

The theoretical framework for the project was based on the idea that new nursing faculty need support during the transition from clinical nursing to academia, and they need to build on knowledge they already have from nursing experiences. Kemp and Baker (2013) noted that professional development for nurses and nurse educators should be taught in a way that allows the learners to engage their own experiences and previous

knowledge. Knowles's (1984) adult learning theory was the foundation for the development of the project. Knowles's theory revolves around six assumptions about adult learners:

1. As a person matures, he or she becomes a self-directing rather than a dependent personality.
2. Adult learners have a reservoir of experience to use as a resource for learning.
3. The readiness of an adult to learn is related to his or her social role.
4. An adult learner is more problem centered than subject centered.
5. Motivations for learning are internal rather than external.
6. Adults desire to know why they need to know something.

Knowles argued that the climate for learning as an adult should be respected and supported. The adult learner needs to be self-directed and participate in his or her own learning (Knowles, 1984). Providing support and learning through a professional development program geared toward newly hired nursing faculty can meet the needs of the adult learner, contribute to a better understanding of the position, and aid in transition from clinical nursing to academia.

The development of the project was also based on the core competencies for nurse educators developed by the National League for Nursing (NLN, 2007). The NLN developed eight core competencies that every nurse educator should possess:

1. Facilitate learning,
2. Facilitate learner development and socialization,

3. Use assessment and evaluation strategies,
4. Participate in curriculum design and evaluation of program outcomes,
5. Function as a change agent and leader,
6. Pursue continuous quality improvement in the nurse educator role,
7. Engage in scholarship,
8. Function in the educational environment.

Nursing faculty engage in various roles and functions, all of which revolve around and reflect the core competencies of nursing educators. Beginning educators possess the basic competencies to begin teaching, but mastering teaching in academia requires guidance, practice, and ongoing professional development (NLN, 2007).

### **Literature Review**

I conducted a search for literature supporting the need for professional development to foster the growth and ease the transition of newly hired faculty. I used databases available in the Walden University online library, such as Educational Resources Information Center (ERIC), Education Research Complete, Nursing and Allied Health, Cumulative Index to Nursing and Allied Health (CINAHL), National Library of Medicine journal database (MEDLINE), and Proquest. I also used online sources including the National League for Nurses and the National Council for State Boards of Nursing.

Keywords used in the searches included *new nursing faculty development, novice nursing faculty development, role transition, faculty role transition, professional*

*development, faculty professional development, and supporting new faculty.* The primary purpose of the review was to investigate the use of professional development courses to ease the transition of newly hired faculty in academia.

Researchers have revealed that newly hired nursing faculty struggle when transitioning into a new job in academia. Role ambiguity and role strain have been shown to be factors contributing to difficult transitions resulting in job dissatisfaction and possible attrition of faculty (Cranford, 2013). Suplee and Gardner (2009) noted that both new and experienced faculty struggle to meet the demands in academia, and support in the form of faculty development is needed. Suplee and Gardner further noted that new faculty in particular need opportunities for development, and they rely on the institution to provide these opportunities. Nurses teaching in academia have master's degrees or higher, but they are often unprepared for the teaching role due to a lack of academic teaching experience. They are viewed as content experts but not teaching experts (Gardner, 2014). Schoening (2013) conducted a grounded theory study to generate a theoretical model to describe the social process that occurs as a clinical nurse transitions into an academic role. Schoening found that novice educators often learn to teach by trial and error on the job and that their practice is guided by their own experiences as students. Schoening also noted that the majority of the participants felt that the lack of appropriate training hampered the transition process. Vaill and Testori (2012) addressed the need for faculty development designed to meet the needs of novice instructors. Vaill and Testori stated that organized faculty development programs are a critical factor in the successful

transition into teaching. Some comprehensive development plans have been developed and described in the literature.

Barksdale et al. (2011) described a comprehensive faculty development program that builds on the expertise of current faculty to guide, teach, and support new faculty to foster their academic career development. Barksdale et al. noted that faculty development programs provide opportunities for newly hired faculty to reflect on educational practices and discuss teaching activities, which leads to improvements in their instruction. Creten and Huyghe (2013) described the organizing of a professional development program for novice faculty at the University of Leuven in Flanders, Belgium. Novice faculty were enrolled in a 2-day workshop followed by four 1-day sessions to ease into the teaching role with support. Gilbert and Womack (2012) developed a 2-day intensive workshop to facilitate the transition of expert clinical nurses to novice nursing educators. Gilbert and Womack found that ongoing short workshops and mentoring from experienced faculty promoted successful transition into the nurse educator role. Research has also been conducted to determine whether professional development programs aid in transition into academia.

Several studies have been conducted to determine whether professional development programs aid in the transition of newly hired nursing faculty. Duphily (2011) noted that inexperienced nurse educators have high stress levels, which may hamper the transition process. Duphily conducted a qualitative phenomenological study among nursing faculty at two Massachusetts community colleges. Duphily found that

faculty were not prepared for the expectations of the position, and that the transition from the clinical setting to academia required socialization and enculturation into the new faculty role. Duphily recommended a quality professional development program for new nursing faculty to guide educators into a successful academic teaching career.

McDonald and Flint (2011) conducted a qualitative study using participants from six schools in New Zealand to determine the importance of development programs for new teachers. The study participants were mentors for new faculty. McDonald and Flint found that professional development and support including mentoring of novice teachers was essential for the first few years of teaching. Needleman, Bowman, Wyte-Lake, and Dobalian (2014) conducted annual surveys of nursing faculty at schools of nursing funded by the Department of Veterans Affairs in Virginia over 2 years. Needleman et al. (2014) concluded that professional development and training for novice educators are important to the faculty. Needleman et al. (2014) also concluded that providing the support needed for novice faculty would facilitate their transition into the new role and promote job satisfaction. Cangelosi (2014) conducted interviews with 20 novice faculty and found that all of the participants expressed disappointment about the lack of guidance they experienced as new faculty; however, Cangelosi also suggested that in addition to faculty development programs, a mentor is required to ensure a smooth transition for novice faculty. Research has also been conducted regarding the perceptions of novice faculty as they transitioned into an academic role.

Studies have been conducted to examine the perceptions of new faculty transitioning into an academic role. Boman, Yeo, and Matus (2013) reported on the outcomes of a needs assessment for new faculty at Mount Royal University. New faculty described the transition to a faculty career as demanding, stressful, and characterized by significant concerns. Boman et al. also learned that novice faculty had a high need for intensive support throughout the first full year of teaching. Gardner (2014) conducted a study to understand the lived experiences of nurse educators. Participants described feeling lost, learning by trial and error, and experiencing difficult transitions into the role. Baker (2010) described feelings of frustration and role strain experienced by novice faculty due to lack of knowledge about the instructional processes such as development of syllabi, lesson plans, and lectures; teaching in the clinical area; and addressing student issues. Job dissatisfaction and attrition of faculty related to a lack of professional development, which leads to role ambiguity and strain, has also been researched.

Studies have been conducted that were focused on role ambiguity and role strain occurring as a result of a lack of professional development for faculty. Gies (2013) noted that faculty job satisfaction is threatened by unclear job expectations concerning the curriculum and instruction; however, Gies also noted that professional development, a smooth transition into the role, and job satisfaction are all a direct result of an effective mentoring program. Roughton (2013) conducted a study to identify characteristics and perceptions of nursing faculty that would best predict their intent to leave the role. The survey study included 4,118 nursing faculty and a predictor of intent to leave was a lack



of professional development opportunities; however, the results also showed that the majority of the participants were very or somewhat satisfied with their job. The literature has shown that there is a need for professional development of new nursing faculty to prevent role ambiguity, role strain, and job dissatisfaction, and to facilitate the transition into academia. New faculty in departments other than nursing also have a need for professional development to ease in the transition into the role.

The need for novice faculty development is also experienced in professions other than nursing. According to Lancaster, Stein, MacLean, Van Amburgh, and Persky (2014), more faculty development is needed in health science programs. Lancaster et al. concluded that pharmacy faculty members should develop the skills to train students in critical thinking and problem solving, work in teams, and coach students through professional development programs. Vaill and Testori (2012) discussed the need for organized faculty development programs to promote successful transition into online teaching as well as face-to-face teaching. Felder (2012) described the development of a 4-day workshop to support new faculty as they transition into a new role. Felder noted that a good support program for new faculty can cut years off the usual learning curve for education. Finally, Haines and Popovich (2014) described the development of a program to ease the transition of new pharmacy faculty into academia. Haines and Popovich noted that faculty development is fundamental to the success of the college of pharmacy. Research has also been conducted to determine what topics should be included in a professional development program for novice and new faculty.

Studies and research focused on the topics that should be included in professional development programs for new faculty have been conducted. According to Poindexter (2013), novice nurse educators reported the need to gain proficiency in assessment and evaluation and curriculum design. Duphily (2011), concluded that novice faculty need guidance regarding role expectations, student advising, technological skills needed to develop and implement educational programs, shadowing programs, and group discussions with peers. Suplee and Gardner (2009) concluded that novice educators needed guidance on developing teaching skills, managing the workload, and program specific topics such as test development, curriculum development, dealing with incivility, managing challenging students, and providing quality clinical evaluations. Gilbert and Womack (2012) developed a professional development program based on the Core Competencies of the Nurse Educator (NLN, 2007) with one day focused on clinical teaching and a second day focused on classroom teaching and evaluation. Barksdale, et al (2011) discussed the need to provide faculty development for novice faculty to include designing student assignments to meet course objectives, developing rubrics, and assessing and grading students' work.

The literature has shown that there is a need for professional development for newly hired and novice faculty to decrease role ambiguity, role strain, job dissatisfaction, and difficulty transitioning into the role. Some researchers have indicated the need for 1 or 2 day programs while others have focused on a comprehensive orientation followed by a mentoring program to provide the guidance needed for new faculty. Nursing academia

is quite different from clinical nursing; it is a major transition that can lead to stress and dissatisfaction (Cranford, 2013). It is crucial to provide the needed professional development for novice nursing faculty to ensure a smooth transition and the retention of qualified nursing faculty.

### **Implementation**

After completion of the project, I will present the program to the department chairs of the nursing departments in colleges and universities in the region. If the college or university adopts the program, the entire project will be provided including the brochure for advertising the program, the PowerPoint presentation, and the evaluation forms. The target audience will be newly hired and novice nursing faculty and it should be presented prior to teaching the first class or attending the first clinical experience for the faculty.

### **Potential Resources and Existing Supports**

Potential resources include the administration of the colleges and universities in the region. Administrators could be supportive in the adoption of the program and the development of policies for their institution to foster the growth of novice nursing faculty. Providing the funding, classroom space, and facilitators would be one of the roles of the college or university sponsoring the event. Another potential resource for the success of the program is the current nursing faculty at the colleges and universities in the region. Experienced faculty will be needed to facilitate the learning sessions and to

provide support to novice and newly hired faculty. Faculty can be supportive of the implementation of a program.

### **Potential Barriers**

A potential barrier to implementation of the project is the number of days allotted for the program, five in total including two days of shadowing experience, and the eight hour time frame for each day of the program. It may be difficult for faculty and the department chair to attend on the chosen days and allotted times. Current, experienced faculty and the department chairs are integral participants in the program.

Another potential barrier is buy-in from the colleges and universities in the region. They will be presented with the study results in order to see that the findings indicated a need for some type of professional development to aid in the transition of newly hired and novice nursing faculty into a new role. A third potential barrier is buy in from the experienced faculty at the colleges and universities to participate in a five day program for newly hired co-workers. Hopefully, after seeing the research results and reviewing the program, it will be adopted and put into place at one or more of the colleges and universities in the region.

### **Proposal for Implementation and Timetable**

Implementation begins with the project being disseminated to nursing administration at colleges and universities in the region. Once adopted by a program, the program will need to be updated to include material specific to the college or university and then a plan to set up the program for newly hired and novice faculty will occur. The

materials and information for each session was carefully chosen and developed to meet the needs of newly hired and novice faculty unfamiliar with program specifics, resources, and common occurrences in nursing education. Each topic will be presented by a facilitator chosen by the college or university using PowerPoint, lecture, and discussion. Small group discussions will provide the opportunity for more in-depth study of portions of the topics. The suggested timeline and process for implementation is depicted in Table 3.

Table 3

*Implementation Plan*

Task	Time
Program specific design (update material specific to program, determine schedule, obtain location for program, secure location for day 3 lunch)	8 weeks prior to the program
Development (develop needed instructional materials, select speakers, obtain needed supplies, order food for day 3 lunch)	4 week prior to the program
Implementation	8 hours/3 days for instruction 8 hour clinical rotation day 8 hour classroom and lab day
Evaluation	Formative conclusion of each day for 3 days Summative conclusion of program

**Roles and Responsibilities of Student and Others**

To ensure success of the program, each key stakeholder will have a role. The key stakeholders include administration of the college or university, nursing administration, nursing faculty, and the participants. First and foremost, the administration of the college

or university has to agree to sponsor the program, provide any funding required, and to provide the physical space for the program. Faculty facilitators will be responsible for learning the content and making any needed revisions to the content, objectives, and delivery of their specific topic. The participants, or learners, need to commit to the program which means attending every day and remaining for all sessions. Each participant also needs to truthfully fill out and submit the evaluations each day and at the end of the program. Faculty assigned to have a participant shadowing them, need to be open to sharing information and tips to make classroom, laboratory, and clinical experiences successful. Each person successfully completing his or her roles and responsibilities should lead to the efficient and smooth transition of newly hired and novice faculty in the new role.

### **Project Evaluation**

Program evaluation is used to determine whether or not the design and delivery of a program was effective and if the objectives and outcomes were met. Instructional evaluations are done for several reasons including for improvement of instructional processes and materials, to assist the participants to be more effective learners, to ascertain whether or not the participants have learned, and to provide data for the overall program (Caffarella & Daffron, 2013). The evaluations will be used to explore whether or not the professional development program sessions and the entire program are worthwhile and successful in providing support to new faculty to aid in the transition into a new role.

Formative and summative evaluations will be used throughout the professional development program. Formative evaluation involves gathering information during the planning, development, and implementation of a program with the purpose being to assist in making changes to refine or improve the program or the outcome. Summative evaluation is used at the end of a program to measure the final outcomes or results (Bradshaw & Lowenstein, 2007). An evaluation form containing sections for each learning session was developed to be given to the participants each day for formative evaluation data. A final evaluation form covering aspects of the entire program was developed to be given to participants on the final day after the last learning session to gather summative data.

The evaluation data will be used to determine if the program did meet the overall goals of the program. The goals were:

1. To develop a plan to offer an extended welcome to faculty who are joining a college or university for the first time.
2. To provide educational support for new faculty to ease the transition into a new position at a college or university.
3. To provide resources for new faculty to ease the transition into a new position at a college or university.

Key stakeholders include the administration of the participating colleges and universities, the current faculty, the new faculty, the students, and the community. Each of the stakeholders is affected by the outcomes of the program. If the program is

unsuccessful, new faculty may not receive needed support and as a result, role ambiguity, role strain, job dissatisfaction, and possible attrition may be the result. Without qualified nursing faculty to teach nursing students, a shortage of nurses in the area continues to be a problem which could ultimately lead to less medical care in the community.

### **Implications Including Social Change**

#### **Local Community**

Extensive research has been conducted regarding nursing faculty role ambiguity, role strain, difficulty with transition into academia, and role dissatisfaction, all leading to attrition (Barksdale et al. 2011; Bittner & O'Connor, 2012; Cranford, 2013; Gilbert & Womack, 2012; Nardi & Gyurko, 2013; Schoening, 2013); however, to the best of my knowledge, no research has been conducted regarding this issue at the colleges and universities in the mountain region of Western North Carolina, that at the time of the study, were recruiting nursing faculty to fill 17 advertised positions. With so many unfilled nursing faculty positions in the region, the number of students entering the nursing programs is potentially less than the maximum number of allowed students in any one program. Turning away nursing students results in fewer nursing graduates and fewer nurses entering practice in the area. The results of the data analysis indicated that new faculty in the region have experienced role ambiguity, role strain, difficult transitions, job dissatisfaction, and have considered leaving the job or academia. The project was developed to provide support for new faculty to ease the transition into the role. Retention of quality nursing faculty in the region will allow more students to be



admitted to programs and eventually more nurses entering the profession to care for the people in the community.

### **Far-Reaching**

Researchers have shown that nursing faculty in other areas of the United States also experience role ambiguity, role strain, difficulty transitioning, and job dissatisfaction and the nursing shortage nationwide continues to be a problem (Cranford, 2013; Gardner, 2014; Schoening, 2013; Specht, 2013; Tull, 2014). Studies have been conducted documenting the need for novice faculty development programs (Duphily, 2011; Lancaster et al, 2014; Poindexter, 2013; Roughton, 2013); however, the problems faced by new faculty are still an issue. The project was designed in a generic format to be easily adapted to fit program specific information for different colleges and universities. The project could be adopted in nursing programs in other parts of the United States and used as a tool for retention of nursing faculty. Retention of faculty will enable nursing programs across the United States to admit and educate more safe and competent nurses to enter the profession.

### **Conclusion**

In Section 3, I discussed the development and implementation of the project: A professional development program to ease the transition into academia for newly hired and novice faculty. I discussed the goals of the project and conducted a thorough literature review to find supporting data for the project development. Also included in Section 3 is my discussion of the method for implementation and a time table for

implementation. I also included a discussion of the evaluation methods for the learning sessions and the entire program as well as the roles and responsibilities of all involved in the program and the implications for social change. In Section 4, I will conclude the study with personal reflections and recommendations for the study.

## Section 4: Reflections and Conclusions

### **Introduction**

The project was developed to improve the transition of newly hired faculty into a new role in academia. I used a qualitative method for the collection of data. Based on the analysis of the data, I chose a professional development program for newly hired and novice nursing faculty to provide resources and support as they transition into a new role. In this section, I describe the project strengths, recommendations, implications for future research, and the potential impact on social change. I also present my perspectives on scholarship, project development, and analysis of self as a scholar, practitioner, and project developer.

### **Project Strengths**

The purpose of the study leading to the project development was to gain an understanding of why nursing faculty experience role ambiguity, role strain, difficulty transitioning, and job dissatisfaction. A strength of the project was that the data collected confirmed the need for support and training for newly hired nursing faculty. The data indicated that the majority of the participants had experienced role ambiguity, role strain, and difficulty transitioning into new roles. The data also indicated that most of the participants had not participated in any type of professional development program or orientation to acclimate them to the role. In the professional development program, I highlighted the information newly hired faculty need to know but may have never learned. Novice faculty have experienced role ambiguity and strain while transitioning

into a new job (Cranford, 2013; Schoening, 2013). This professional development program could be the impetus for mandatory training programs to foster the development of new nursing faculty.

### **Recommendations for Remediation of Limitations**

A limitation of the project was the time involved for the training sessions. The professional development program was developed to be presented over 3 full days followed by 2 full days of shadowing in a clinical area, lab setting, and classroom setting. Due to time constraints, job responsibilities, and personal responsibilities, it was unrealistic to expect faculty to attend a workshop for an entire week. An alternative to a 3-day intensive program would be the development of a program in an online, asynchronous format. This would allow the new faculty member to access the modules at a more convenient time and have more time to spend on the content. This format would also allow the faculty member to go back and repeat or review sessions as needed. Presenting the program online would also allow for the sessions to be completed over a span of weeks rather than in 3 long days on campus.

### **Scholarship**

According to Hutchins, Huber, and Ciccone (2011), “cultural change seldom moves easily or evenly through complex systems; it can take years of advocacy, activism, and experience to reach that Gladwellian tipping point” (p. 105). As an educator and a doctoral student, I have learned how true this statement is. When I began this long journey, I was oblivious to the amount of time, hard work, and commitment that would

be required to reach the end. Now, at the end of this journey, I am amazed that I did it and even more amazed at how much I actually enjoyed researching and finding out new things about teaching in nursing and teaching in general. I am anxious to continue learning and passing on my knowledge to my co-workers as they pursue higher degrees and to my students as they become competent nurses.

I did face challenges and setbacks along the way. Frustration with the process led me to examine my research and my writing to make what I wanted to express more concise and clear. It was difficult to read feedback and to not take it personally but to learn from it instead. When my original site for the study became unavailable, I challenged myself to find a better way to produce a better study. This is part of scholarship, gaining knowledge, and using it to make a difference.

The advancement of knowledge is essential in nursing and in nursing education. Throughout this process, I have read numerous research articles and books, many of which have addressed the scholarship of teaching to enhance teaching and learning. Billings and Halstead (2011) stated that the volume of research and publications is less important than the quality (p. 490). I worked diligently to find quality research based on current practice in the development of this study, and I have become a better scholar in the process.

### **Project Development and Evaluation**

One of the most important lessons I learned about project development and evaluation is that it takes time to do it right. Cafferella and Daffron (2013) observed that

planning programs for adults is “like swimming in the ocean. Some days the ocean is calm and welcomes people. On other days, the ocean provides challenges for even the best of swimmers” (p. 1). This was true throughout the development of the project. Some things worked although many did not, so changes were made for the better.

Understanding the feelings and needs of the targeted learners via the data analysis helped in the choice and design of learning activities that would ease the transition into academia for novice faculty.

Traditional evaluation methods were used in the development of the project. Although asking participants to evaluate each session and then the program at the end may have seemed tedious, the information gathered was useful to ensure current, applicable information and sessions for future programs. I kept the evaluations short and to the point and left space for additional comments if desired by the participants. Using the evaluation feedback to make improvements in the program will foster the development of novice nursing faculty.

### **Leadership and Change**

My decision to pursue a doctorate in education has led me to become a leader among my nursing faculty colleagues at work. Other faculty often seek my advice and mentorship when preparing to teach a new course. I have also become the mentoring faculty for all new faculty in our department. For change to occur, someone has to take the initiative to make it happen. My colleagues have encouraged me through the process to share ideas to implement changes in our department. The process of collecting and

analyzing data led me to discover that there is a need for education and support for newly hired nursing faculty, which ultimately led to the development of the professional development program. I hope to elicit change in my own workplace by sharing the findings and the program with my colleagues and the administrators of the college.

Developing the project for this study has been a scholarly endeavor that has allowed me to understand that there is more to nursing education than simply providing information to students. I have learned that being a nurse and a scholar also makes me a leader, and as a leader I have the ability to make change. I am more acutely aware of the necessity for change. I worked to create a program that could truly make a difference for novice nursing educators to make the process of transitioning to academia better, and as a result I have developed a better idea of the significance of becoming a change agent.

### **Analysis of Self as Scholar**

When I began my first semester at Walden, I had no idea if I could finish, and I did not think of myself as a scholar. I work in nursing education, so I have always considered myself more of an instructor than a scholar. Now, near the end of my journey, I have come to realize that as a nursing instructor, I was already a scholar. As a scholar, I have learned to synthesize knowledge and create learning environments and experiences that allow my students to flourish. Through the development of the project, I have learned to discover new knowledge and build on it to make improvements in my field. I am not only an instructor, I am a scholar with the desire to learn as much as I can to implement change.

### **Analysis of Self as Practitioner**

From my very first course at Walden, I have used the knowledge I have acquired in my role as a nursing instructor. When I learned about different ways to implement technology in the classroom, I did it for my students. I have also encouraged my colleagues to try some of the strategies I learned about while in this program, which has led to more positive student evaluations. I spend hours preparing lectures and classroom activities to stimulate learning for my students. Keeping up to date with current evidence-based practice and skills is important to me as a practitioner and an educator. This is an essential component of quality practice to ensure my students become safe and competent nurses.

### **Analysis of Self as Project Developer**

Becoming a project developer during this process has been a challenge for me. I am used to writing lectures and material for short programs, but planning, designing, and implementing an entire professional development course was entirely different. I have always been willing to be an active participant in programs, but this time I had to take the lead role and work to make needed changes. Some colleagues have not agreed with my ideas and plans, and that was hard to accept. Developing the project has helped me accept feedback, both positive and negative, and make needed changes to make the project even better. I have discovered that I do have the knowledge, skills, and ability to design and develop programs that make a real contribution in my field.



### **The Project's Potential Impact on Social Change**

Nursing is an integral part of patient care in communities throughout the United States and the world. It is crucial to have safe, competent, well-educated nurses working in the profession. Without nursing faculty to educate our future nurses, the nursing shortage continues to worsen. The research and the data indicated that novice faculty need support while transitioning into academia. Without support, attrition may result. The project was developed to support novice faculty and decrease attrition of nursing faculty. Implications for positive social change for newly hired nursing faculty include support during transition to a new role, which will increase job satisfaction and retention.

### **Implications, Applications, and Directions for Future Research**

While reflecting on this research process and the importance of the work I have done, I thought about my first day as a nursing instructor and how frightened and disillusioned I was at the end of the day. I also thought about novice nursing instructors facing the same issues I faced as a novice faculty member. Retention of great nursing faculty is crucial to the success of any nursing program. Measures to foster the development and training of novice faculty will provide much needed support as they transition into academia.

The nursing instructor has many roles to fulfill. He or she is a facilitator, course developer, mentor, advisor, and advocate for nursing students. Novice faculty may struggle with the roles and responsibilities required. Participation in a professional development program specific to the needs of newly hired faculty will provide the much

needed support and resources. I confronted challenges during the process. My original plan for a site to conduct the study and implement the project had to be changed due to the decision of administrators not to allow me to proceed. I came up with a different plan that included input from more than one college and university of nursing in the area. This made the results much more applicable to the region as a whole. The research findings showed that nursing faculty from different nursing programs have similar experiences.

The study did have limitations. The sample size was relatively small (12 participants), and the study was focused on only one region of the state of North Carolina. Nursing departments from six colleges and universities in the region were represented in the study, but I was unable to determine whether the number of BSN faculty was equal to the number of ADN faculty participating in the study. Studies conducted in different types of nursing programs could potentially yield different data.

Future research should include a larger sample size and include nursing programs across the entire state. Other methodology choices such as mixed-method or quantitative would allow for comparison of responses between faculty from different types of programs. A study comparing the experiences of faculty who participated in a formal orientation and mentoring program to those who did not participate in an orientation and mentoring program should also be considered.

### **Conclusion**

This section marks the end of the study and the project development. I have described project strengths as well as recommendations for remediation of project

limitations. I have also described what I have learned about scholarship. I included personal reflections of myself as a scholar, a practitioner, and a program developer. Finally, I addressed the implications for social change and recommendations for future research.

The results of this study provide an opportunity for the colleges and universities in the region to examine the current processes in place for the transition of newly hired faculty into a new role in academia. The findings indicated that nursing faculty do experience difficulties during the transition into a new role, and support is needed to ease this transition. The project provides ideas and materials that can be easily implemented by any of the nursing programs in the region to foster the development of new nursing faculty. Researchers have shown that the shortage of nurses in the United States continues to be a concern, and a shortage of nursing faculty is directly linked to the shortage of nurses (Cranford, 2013). A well-planned and well-designed professional development program could help ease the transition into academia for new nursing faculty. Supporting new faculty may increase job satisfaction and retention and promote the admission of more students into nursing programs in the region. Increasing the number of safe, competent nurses entering the profession would be the result.

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## Appendix A: The Project



You Are Hired,  
Now What?  
A 5 Day Professional Development Program  
for  
New Nursing Faculty

**Purpose:** The purpose of the 5-day professional development program is to provide assistance and resources to new nursing faculty transitioning from the clinical area to academia.

**Goals** The overall goal of the project is to provide a professional development program to assist nursing faculty transitioning from the clinical area to academia with minimal obstacles.

**Learning Outcomes:** The learning outcomes for the professional development program are:

1. Identify the expectations of faculty and sources for ongoing support,
2. Create a learning environment that facilitates student learning,
3. Create a learning environment that helps nursing students develop the skills expected of a nurse,
4. Identify methods to assess and evaluate student performance objectively,
5. Understand the role of nursing faculty and how to function in that role,
6. Create a learning environment to facilitate student learning in the clinical areas,
7. Identify ethical and legal issues in nursing education,
8. Identify student behaviors and issues that may impact the learning environment,

**Target Audience:** The target audience for the professional development program includes new full-time and adjunct nursing faculty, new full-time and adjunct clinical faculty, and any faculty member with the desire to refresh knowledge about the concepts covered in the sessions.

**Implementation Plan:** The following implementation plan is recommended for the planning, preparation, and implementation of the program.

1. Eight to twelve weeks prior to the program the planning should begin. The facilitator should update materials, the brochure, power points, and daily schedule to make them specific to the college or university. The schedule of events should be determined, a location for the program should be chosen and secured, and a location and menu for the lunch on day 3 should be chosen.
2. Four weeks prior to the program, the speakers should be selected and secured, any needed supplies including a projector, white board, pens, pencils, and markers should be obtained, and the food for the lunch on day 3 should be ordered.
3. On the day prior to the program, the room should be set up, ensure that computers, projectors, and microphones work, ensure that the seating is adequate.
4. Each day of the program, a registration table should be setup for participants to sign in, and the room will be in use for 8 hours.
5. At the end of each day, the facilitator should clean and straighten the room, make sure everything is in place for the next day, and collect all formative evaluations for the day.
6. At the end of day 3, the facilitator should collect all formative evaluations and all summative evaluations, clean up the room, and return all supplies and equipment.
7. After completion of the program, all evaluation forms should be analyzed and required changes to the program should be implemented.

**Components and Timeline for Implementation:** The following program plan was designed to indicate the topic, objectives, and time for each session of the program throughout the five days: Table 4 shows the agenda for day 1 of the program.

Table 4

*Day 1*

<b>Topic for Session</b>	<b>Objectives</b>	<b>Time Frame</b>
Registration Welcome and overview of the three days of the program	Identify the purpose of You Are Hired, Now What? Review the plans for the program	45 minutes 8:00am – 8:45am
Transitioning into Academia	Discuss reasons for difficulty transitioning and methods to make the process smooth, discuss the roles and responsibilities of the nursing faculty at (name of college or university_	75 minutes 8:45am – 10:00am
Break	Opportunity to ask questions one-on-one	30 minutes 10:00am – 10:30am
Facilitate Learning	Discuss how to create an environment in the classroom, laboratory, and clinical areas to facilitate learning	90 minutes 10:30am – 12:00pm
Lunch	On your own	75 minutes 12:00pm – 1:15pm
Facilitate learner development and socialization	Discuss methods to help students develop as nurses and integrate the values and behaviors expected of a nurse.	60 minutes 1:15pm – 2:15pm
Break	Opportunity to ask questions, meet with faculty	15 minutes 2:15pm – 2:30pm
Effective assessment and evaluation strategies	Describe how to use assessment and evaluation strategies effectively.	60 minutes 2:30pm – 3:30pm

Table 5 shows the agenda for day 2 of the program.

Table 5

*Day 2*

<b>Topic for Session</b>	<b>Objectives</b>	<b>Time Frame</b>
Registration Questions from day 1	Review content for day 2,	45 minutes 8:00am – 8:45am
The faculty role	1.Discuss the categories that define the role of a nurse educator according to the NLN 2.Discuss examples of activities to fulfill the roles	75 minutes 8:45am – 10:00am
Break	Opportunity to ask questions, talk to faculty	30 minutes 10:00am – 10:30am
Function within the educational environment	1.Discuss the characteristics of core competency 8 2.Discuss methods to meet this competency	90 minutes 10:30am – 12:00pm
Lunch	On your own	75 minutes 12:00pm – 1:15pm
Effective teaching and learning in the classroom and clinical areas	1.Discuss the role of teaching and learning within the nursing professions 2.Identify characteristics of a good learning environment 3.Identify the qualities of a good instructor	60 minutes 1:15pm – 2:15pm
Break	Questions	15 minutes 2:15pm – 2:30pm
Ethical and legal issues	1.Discuss ethical issues and obligations for nursing faculty. 2. Discuss legal issues and obligations for nursing faculty.	60 minutes 2:30pm – 3:30pm
Summary and evaluation day 2	Evaluations and questions,	30 minutes 3:30pm – 4:00pm

Table 6 shows the agenda for day 3 of the program.

Table 6

*Day 3*

<b>Topic for Session</b>	<b>Objectives</b>	<b>Time Frame</b>
Registration Announcements and questions from day 1 and 2	Review content for day 3, brief question and answer session from day 1 and day 2 content	45 minutes 8:00am – 8:45am
Student misconduct and dealing with student problems	1. Discuss types of student misconduct. 2. Discuss proactive strategies for managing student misconduct.	75 minutes 8:45am – 10:00am
Break	Opportunity to ask questions, meet with faculty	30 minutes 10:00am- 10:30am
Your first day of teaching	Preparing for your first day	90 minutes 10:30am – 12:00pm
Lunch	With faculty, provided	90 minutes 12:00pm – 1:30pm
Faculty panel discussion and Q&A session	What I wish I had known my first year.	75 minutes 1:30pm – 2:45pm
Break	Opportunity to ask questions, meet with faculty	15 minutes 2:45pm – 3:00pm
Summary and evaluation of day 3 and the program	Summary of the day and the program, answer questions, participants fill out evaluations for day 3 and for the program and submit	60 minutes 3:00pm – 4:00pm

Table 7 shows the agenda for days 4 and 5 of the program.

Table 7

*Days 4 and 5*

<b>Topic for Session Day 4</b>	<b>Objectives</b>	<b>Time</b>
Shadow a clinical faculty member in a clinical setting for a day	To develop a better understanding of what a typical day in a clinical setting will entail.	6:30am – 3:30pm
<b>Topic for Session Day 5</b>	<b>Objectives</b>	<b>Time</b>
Shadow a faculty member in the classroom and lab for a day	To develop a better understanding of what a typical day of teaching will entail.	

## You Are Hired, Now What?

This professional development program was designed for novice and newly hired nursing faculty to ease the transition into the position.

### Goals:

- To offer an extended welcome to faculty who are joining (name of college or university) for the first time.
- To provide educational support for newly hired and novice faculty to ease the transition into a new position.
- To provide resources for newly hired and novice faculty to ease the transition into a new position.

### Program Commitment:

Five full days of instruction and shadowing to provide the knowledge to begin teaching your first course including the clinical role.

If you are currently a nursing faculty member new to the profession or beginning a new job at the (college or university) and you would like to attend the program, you may contact

\_\_\_\_\_ to reserve a space.

Registration for the class is due a week prior to the program date. Late registration accepted on day of program based on space availability.

### Day 1 Agenda

8:00 am Registration  
Coffee and Pastries  
8:30 am Welcome and Overview  
8:45 am Transitioning into Academia  
10:00 am Break  
10:30 am Facilitate Learning  
12:00 pm Lunch (on your own)  
1:15 pm Facilitate Learner Development and Socialization  
2:15 pm Break  
2:30 pm Effective Assessment and Evaluation Strategies  
3:30 pm Summary and Evaluation

### Day 2 Agenda

8:00 am Registration  
Coffee and Pastries  
8:30 am Announcements  
Questions from Day 1  
8:45 am The Faculty Role  
10:00 am Break  
10:30 am Function within the Educational Environment  
12:00 pm Lunch (on your own)  
1:15 pm Effective Teaching and Learning in the Classroom and Clinical Areas  
2:15 pm Break  
2:30 pm Ethical and Legal Issues  
3:30 pm Summary and Evaluation



*Insert college or university logo here*

### Day 3 Agenda

8:00 am Registration  
Coffee and Pastries  
8:30 am Announcement  
Questions from Day 2  
8:45 am Student Misconduct and Dealing with Problem Students  
10:00 am Break  
10:30 am Your First Day of Teaching  
12:00 pm Lunch with Faculty and Colleagues (Provided)  
1:30 pm Faculty Panel Discussion  
What I Wish I had Known My First Year!  
2:45 pm Break  
3:00 pm Summary, Final Evaluations, Dismissal

### Day 4 Agenda

6:30am Shadow in clinical setting all day

### Day 5 Agenda

8:30 am Shadow on campus all day



# You are Hired, Now What?

A 5 Day Professional Development Program for Newly Hired and Novice  
Faculty

( insert the name of the college or university)

## Day 1

- Welcome to the program
- Purpose of the program
  - To offer an extended welcome to faculty who are joining (name of college or university) for the first time.
  - To provide educational support for newly hired and novice faculty to ease the transition into a new position.
  - To provide resources for newly hired and novice faculty to ease the transition into a new position.
- What we will cover over the next few days

The facilitator should welcome everyone to the program, provide information about restrooms, silencing cell phones, etc. This should be followed by a brief overview of what will be covered each day, how the days will progress, and what is expected of the participants. Follow-up with having the participants introduce themselves and tell what

he or she will be teaching, what he or she hopes to gain from participation in the course. Remind the participants that the program was developed based on some of the task statements for nurse educators NLN Core Competencies of Nurse Educators (2005). Have a copy of the statement book available for review.

## Transitioning into Academia

- **Transitioning may not be as smooth as you anticipate.**
  - Could lead to increased role strain
  - 4 common causes of role strain for a newly hired or novice nursing faculty member
    - Ambiguity
    - Incongruity
    - Conflict
    - Overload

AACN (2015)

This session should be led by the chair for the nursing department. Explain that transitioning into academia from a clinical role and beginning a new job in education may lead to increased role strain and may not be as smooth as the new faculty member had anticipated. Reassure the participants that this is common and normal and that this program was designed to provide information to make the process easier and less difficult. Review the common causes of role strain leading to a difficulty transition experience.

## Transitioning into Academia

- **Ambiguity**
  - Ambiguity occurs when the behaviors and responsibilities within a role are not well defined or understood by the new faculty member.
  - Ambiguity is a common occurrence.
- **Incongruity**
  - Incongruity occurs when there is the incompatibility between the different aspects of a role.
  - Conflict between the skills and abilities, values and expectations or role obligations

AACN (2015)

Discuss what role ambiguity and incongruity are and provide some examples. Ask the participants to discuss examples. Also discuss methods to prevent and manage role ambiguity and incongruity.

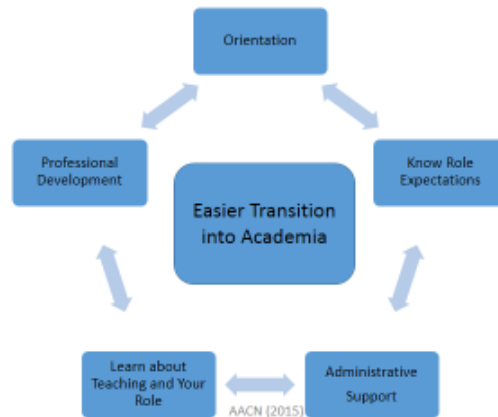
## Transitioning into Academia

- **Conflict**
  - Occurs when the expectations are perceived to be contradictory or incongruent
- **Overload**
  - Occurs when the demands of the role overwhelm the new faculty member
    - results in difficulty in meeting the obligations of the role
  - Can lead to workplace tension, anxiety, and personal conflict

AACN (2015)

Explain what role conflict and overload are and discuss examples with the participants. Also discuss ways to prevent or manage conflict and overload.

## Transitioning into Academia: Components of a Smooth Transition



Explain that each box represents a process or intervention to ease the transition into academia. All of the components go together to make the process smooth. Ask the participants to give examples of each of the components and provide information about how the college or university fits into these components.

## Transitioning into Academia: Components of a Smooth Transition

- Know the expectations of your college or university
- Obtain a dedicated mentor within the first few weeks of employment.
- Professional development should be an ongoing process.
- Establish administrative support through early communication when issues are discovered.
- Become immersed in academic culture.
- It is important to maintain membership in professional associations that are tied to your area of specialization or instruction.

## Faculty Expectations and Academic Support

- What it means to be a faculty member at (name of college or university)
- What we expect from you
- What you can expect from us
- HIPAA and FERPA
- Academic support
  - Where can you go for help
  - Whom do you call for support?

The speaker should remind the participants that the college or university and the department members are excited he or she has joined the team, review the mission of the college or university, review the overall expectations of the faculty, review where the faculty can go for support or help if needed. Make sure to include a brief discussion about HIPAA and FERPA requirements. At the end of this session, offer a break to the participants, have faculty present to meet the participants, answer questions.

## Facilitate Learning

- Objective

1. Discuss how to create an environment in the classroom, laboratory, and clinical areas to facilitate learning

(NLN, 2007)

Review the objectives for this learning session.

## Facilitate Learning

- Implement a variety of teaching strategies
- Utilize evidence-based teaching practices
- Recognize factors that influence teaching and learning
- Engage in self reflection and continued learning
- Use technology to support the teaching-learning process
- Create learning opportunities

(NLN, 2007)

Discuss that these are the responsibilities of the nurse educator related to competency 1 of the core competencies for nurse educators (NLN, 2007). The facilitator should provide examples and personal experiences to elaborate each skill. Ask participants to provide

examples to involve them in the session. Break the larger group into smaller groups and assign some of the methods to facilitate learning to each group. Let the group discuss the skills for a few minutes and then discuss the findings with the larger group.

## Facilitate Learning

- Show enthusiasm for teaching and learning
- Respect the learners
- Develop collegial working relationships with students, colleagues, clinical agency personnel to promote positive learning environments
- Maintain professional practice knowledge
- Serve as a role model of professional nursing

(NLN, 2007)

Throughout the presentation the participants should be asked ways to complete each of the responsibilities and discuss as a group. At the end of this session, a lunch break should be provided.

## Facilitate Learner Development and Socialization

- **Objective**

- 1. Discuss methods to help students develop as nurses and integrate the values and behaviors expected of a nurse.

(NLN, 2007)

Welcome the participants back from lunch and clarify any questions. Explain that this is competency 2 of the NLN (2007) core competencies for nurse educators.

## Facilitate Learner Development and Socialization

- **Identify individual learning styles and unique learning needs**

- Adults
- Multicultural
- Educationally disadvantaged
- Physically challenged
- At-risk learners
- Second degree learners

(NLN, 2007)

This is a good time to discuss the process at your college or university for students with disabilities and what is expected of the student and the instructor. Briefly discuss



scenarios involving students in each of the categories of unique learning needs.

## Facilitate Learner Development and Socialization

- Provide resources for diverse learners.
- Engage in effective advisement to help learners meet professional goals.
- Create learning environments focused on socialization to the role of the nurse.
- Assists learners to develop the ability to engage in thoughtful and constructive self and peer evaluation.
- Models professional behaviors for learners
  - Involvement in professional organizations
  - Engagement in lifelong learning activities

(NLN, 2007)

This session is more hands-on than lecture. Role play sessions should be set up with facilitator and a volunteer student or faculty member on student advisement about goals with a discussion and feedback involving the participants at the end. After scenarios, the participants should break into smaller groups and discuss one of each of the bullet points. After discussion with the small group, regroup and each smaller group should present ideas and concepts discussed. At the end of the discussions, offer a break.

## Effective Assessment and Evaluation Strategies

- Objective

- 1. Describe how to use assessment and evaluation strategies effectively.

(NLN, 2007)

Explain that using effective assessment and evaluation strategies is competency 3 of the core competencies for nurse educators (NLN, 2007).

## Effective Assessment and Evaluation Strategies

- Develop and use evidence-based assessment and evaluation practices
- Implement a variety of strategies to assess and evaluate learning in the cognitive, psychomotor, and affective domains
- Use strategies appropriate to the learner and learner goals
- Provide timely, constructive, and thoughtful feedback to learners

(NLN, 2007)

Explain the necessity to remember that not everyone learns in the same way so a variety of activities and methods should be used for assessment and evaluation. For example

observation, critical thinking activities (case studies), and demonstrations. Remind the faculty that timely, constructive feedback is beneficial to the students. They cannot learn from mistakes if they do not know a mistake was made. Positive feedback is important so the feedback should not always be negative. Remind them that as the instructor in a clinical area, feedback is of utmost important and ensuring patient safety is paramount. They will have to make decisions about failing an unsafe student in the clinical area even though he or she excels in the didactic portion of the class. Provide some examples of positive and negative feedback, role play giving feedback with a volunteer faculty member.

## Effective Assessment and Evaluation Strategies

- **Grading is often confused with evaluation**
  - Grading involves quantifying data and assigning a value
  - Evaluation is the process of determining the outcomes of student learning from participation in the program or course

(Billings & Halstead, 2011)

## Effective Assessment and Evaluation Strategies

- **Purpose of Evaluation**
  - To facilitate learning
  - To find problems
  - To make decisions
  - To improve products
  - To judge effectiveness

(Billings & Halstead, 2011)

## Effective Assessment and Evaluation Strategies

- **Formative Evaluation**
  - Occurs during the program or learning
  - Focuses on the parts instead of the whole
- **Summative Evaluation**
  - Data collected at the end of an activity, course, or program
  - Focuses on the whole event

(Billings & Halstead, 2011)

## Summary of Day 1

- Review of the objectives from the sessions
  - 1. Discuss how to create an environment in the classroom, laboratory, and clinical areas to facilitate learning
  - 2. Discuss methods to help students develop as nurses and integrate the values and behaviors expected of a nurse.
  - 3. Describe how to use assessment and evaluation strategies effectively.

Remind all of the participants to make sure the evaluations have been completed for each session and turn them in prior to leaving. Thank them for attending, remind them what time day 2 starts.

**This is the end of Day 1  
Thank you for attending.**

Evaluations for day 1 should be filled out before dismissing the participants for the day.

## Day 1 Evaluation

Please circle the appropriate response for each statement.

Scale key: 5-strongly agree 4-somewhat agree 3-agree 2-disagree 1-strongly disagree

Faculty Expectations , Support	Day 1 Session 1
1. Session Instructor (knowledgeable of content, communicates clearly, professional, answered questions)	5 4 3 2 1
2. Session Content (content applicable to your job, organized information)	5 4 3 2 1
3. Learning Materials (PowerPoint)	5 4 3 2 1
1. Learning Activities (reinforced the session content)	5 4 3 2 1
4. You can apply the information presented in your teaching role	5 4 3 2 1
5. Environment (comfortable, temperature, lighting, seating, availability of refreshments)	5 4 3 2 1

Please provide any additional comments

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Faculty Expectations , Support	Day 1 Session 2
2. Session Instructor (knowledgeable of content, communicates clearly, professional, answered questions)	5 4 3 2 1
3. Session Content (content applicable to your job, organized information)	5 4 3 2 1
4. Learning Materials (PowerPoint)	5 4 3 2 1
5. Learning Activities (reinforced the session content)	5 4 3 2 1
6. You can apply the information presented in your teaching role	5 4 3 2 1
7. Environment (comfortable, temperature, lighting, seating, availability of refreshments)	5 4 3 2 1

Please provide any additional comments

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Facilitate Learner Development and Socialization	Day 1 Session 3
1. Session Instructor (knowledgeable of content, communicates clearly, professional, answered questions)	5 4 3 2 1
2. Session Content (content applicable to your job, organized information)	5 4 3 2 1
3. Learning Materials (PowerPoint)	5 4 3 2 1
4. Learning Activities (reinforced the session content)	5 4 3 2 1
5. You can apply the information presented in your teaching role	5 4 3 2 1
6. Environment (comfortable, temperature, lighting, seating, availability of refreshments)	5 4 3 2 1

Please provide any additional comments

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Effective Assessment and Evaluation Strategies	Day 1 Session 4
1. Session Instructor (knowledgeable of content, communicates clearly, professional, answered questions)	5 4 3 2 1
2. Session Content (content applicable to your job, organized information)	5 4 3 2 1
3. Learning Materials (PowerPoint)	5 4 3 2 1
4. Learning Activities (reinforced the session content)	5 4 3 2 1
5. You can apply the information presented in your teaching role	5 4 3 2 1
6. Environment (comfortable, temperature, lighting, seating, availability of refreshments)	5 4 3 2 1

Please provide any additional comments

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Thank you for your responses. Your feedback is important and will be used in future programs.



## Day 2

- Announcements
- Questions from Day 1?
- Review what topics will be covered today and the plan for the day.

Welcome participants back to day 2. Clarify any questions from day 1.

## The Faculty Role

- Objectives
  - 1. Discuss the categories that define the role of a nurse educator according to the NLN
  - 2. Discuss examples of activities to fulfill the roles

## The Faculty Role

- The National Council of State Boards of Nursing (2008) defined 3 categories that define the roles of a nurse educator.
  - Collaborator
  - Director of student learning
  - Role model

(NCSBN, 2008)

Discuss with the participants that the NCSBN categorized the roles of a nurse educator.

## Collaborator

- Examples of this role
  - Communication
  - Manger of learning experiences
  - Shared decision making
  - Build partnerships
  - Teamwork

(NCSBN, 2008)

In this role, the faculty brings experts together or collaborates with others to coordinate student learning in the classroom and in the clinical areas.

## Director of Student Learning

- Examples of this role
  - Clinical faculty
  - Simulation faculty
  - Classroom faculty
  - Curriculum development
  - Laboratory faculty
  - Student and program evaluation

(NCSBN, 2008)

This role encompasses facilitation of learning, curriculum and program development, program evaluation, and assessment of individual students. This is a good time to review the processes for curriculum and program development and evaluation at your college or university.

## Role Model

- Examples of this role
  - Leadership
  - Scholarship and research
  - Practice/clinical relevance (faculty teaching in clinical areas of expertise)
  - Patient focused
  - Mentoring of novice faculty

(NCSBN, 2008)

All faculty act as role models for the students. This is particularly important in the clinical areas where students learn how to relate to patients, assess the situation, and make decisions. Examples are interacting with physicians, reporting to staff, and asking questions for clarification. At the end of this session, offer a break.

## Functions Within the Education Environment

- **Objective**

- 1. Discuss the characteristics of core competency 8
- 2. Discuss methods to meet this competency

## Functions Within the Education Environment

- **Characteristics**

- Uses knowledge of history, current trends, and issues in higher education as a basis for making recommendations and decisions
- Identifies how social, economic, political, and institutional forces influence nursing education
- Develops networks, collaborations, and partnerships to enhance nursing's influence within the academic community
- Determines professional goals within the context of academic nursing and the mission of the institution and nursing program
- Integrates values of respect, collegiality, professionalism, and caring to build a climate that fosters the development of students and teachers
- Incorporates goals of the nursing program when proposing change or managing issues
- Advocates for nursing and nursing education in the political arena

Review the characteristics and then break up the group into smaller groups. Assign each group 2 or 3 of the characteristics and have them determine ways to meet the competency and characteristic. Have each group discuss findings and ideas with the larger group. At the end of this session send participants for a break.

## Effective Teaching and Learning in the Classroom and Clinical Areas

- **Objective**

- 1. Discuss the role of teaching and learning within the nursing professions
- 2. Discuss the theories of how adults learn and integration into practice
- 3. Identify characteristics of a good learning environment
- 4. Identify the qualities of a good instructor

(Hand, 2006)

Welcome the participants back from lunch and clarify any questions from previous sessions. Review the objectives for this session.

## Effective Teaching and Learning in the Classroom and Clinical Areas

- Your perceptions of learning will affect how you teach
- Learning in all 3 domains is important in nursing educations
  - Having the skill without the rationale makes the nurse unsafe
  - Having the knowledge of the skill but not being able to perform the skill makes the nurse unsafe
  - Having the knowledge and the skill leads to informed practice

(Hand, 2006)

Review the 3 domains of learning, this should be fairly brief for masters prepared faculty. Discuss examples you have encountered regarding the domains, for example a nurse who knew how to give an injection but could not perform the skill correctly.

## Effective Teaching and Learning in the Classroom and Clinical Areas

- Factors that affect learning
  - Embarrassment or discomfort
  - Lack of assessment of the student's ability, prior knowledge, and experience
  - Lack interest
  - Lack of structure in the teaching
  - Negative past experiences
  - Poor motivation or poor self-esteem
  - Anxiety
  - Tiredness, pain, hunger, illness

(Hand, 2006)

Talk about examples of each of these factors and ask the participants to give examples

too.

## Effective Teaching and Learning in the Classroom and Clinical Areas

- **A good learning environment**
  - A humanistic approach (relate to learners with kindness, show interest, clinical staff who are approachable and promote self-esteem and confidence)
  - A good team spirit, an atmosphere of trust and respect
  - A high standard of care being provided using efficient but flexible approaches in clinical settings
  - Clinical staff who want to learn, ongoing development is promoted, information is shared, learning opportunities are created

(Hand, 2006)

## Effective Teaching and Learning in the Classroom and Clinical Areas

- **Opportunities for clinical learning**
  - Case conferences
  - Case notes
  - Experiential learning
  - Observation of staff
  - Observation of procedures
  - Spending time with members of multidisciplinary team
  - Visits to other departments
  - Patient rounding

(Hand, 2006)

Have one or more of your clinical faculty available for this session to talk about how he or she runs a clinical day, how learning opportunities are discovered. At the end of this session send the participants for a break. Have faculty remain to provide additional

information and answer questions.

## Ethical and Legal Issues and Obligations

- **Objectives**

- 1. Discuss ethical issues and obligations for nursing faculty.
- 2. Discuss legal issues and obligations for nursing faculty.

Review the objectives for this session.

## Ethical and Legal Issues and Obligations

- The primary purpose of teaching is to encourage learning, this is also the first ethical responsibility of an instructor.
- The ethical instructor:
  - Knows the content to be learned
  - Knows the students who will be learning
  - Knows methods to use to foster learning
  - Is responsible for remaining current and presenting accurate material



## Ethical and Legal Issues and Obligations

- Faculty responsibilities to students
  - Encourage learning
  - Demonstrate respect for students
  - Respect confidentiality
  - Model best scholarly and ethical standards
  - Foster honest academic conduct
  - Ensure fair evaluation
  - Avoid exploitation, harassment, or discrimination

(Billings & Halstead, 2011)

## Ethical and Legal Issues and Obligations

- Legal Considerations
  - Student Rights
    - Due Process
    - Fair Treatment
    - Confidentiality and Privacy

(Billings & Halstead, 2011)

## Ethical and Legal Issues and Obligations

- Due Process
  - Protected by the Fourteenth Amendment of the U.S. Constitution
  - Ensures that procedures are fair under the circumstances.
- Due Process for Academic Issues
- Due Process for Disciplinary Issues

(Billings & Halstead, 2011)

## Ethical and Legal Issues and Obligations

- Due Process for Academic Issues
  - Provide a copy of student and faculty rights and responsibilities in formal documents
  - Review and update policies in the handbook and catalog
  - Course requirements and expectations should be clearly established and communicated at the beginning of the course
  - Retain all tests and written work in a file until the student has completed the course or the program (or according to facility policy)
  - Students should have the opportunity to view all evaluation data that are placed in the student file
  - When students are not making satisfactory progress and the potential for failure or dismissal exists, students must receive notification of and information about the academic deficiencies

(Billings & Halstead, 2011)

## Ethical and Legal Issues and Obligations

- **Due Process for Disciplinary Issues**
  - Students dismissed for misconduct or disciplinary issues must be assured that due process has been followed.
  - Must receive, in writing, a copy of the charges or concerns
    - Should include details about which policy or rule was violated
    - Enough information must be provided to ensure that the student can develop a defense against the charges

(Billings & Halstead, 2011)

## Ethical and Legal Issues and Obligations

- **Grievances and Student Appeal Process**
  - Student must follow the grievance policy stated in the student handbook.
  - Students need to follow the chain of command.
  - Before seeking the assistance of the court system, students must first use all available resources within the institution.
  - Faculty should be involved and give consideration for re-evaluation if needed (ex: grades) and if student concern is legitimate, the grade should be changed
    - Do not act in haste for fear of the grievance procedure
    - If you are unsure of what to do, ask your supervisor for advice.

(Billings & Halstead, 2011)

## Ethical and Legal Issues and Obligations

- **Academic Failure in the Clinical Setting**
  - Clinical faculty must ensure learning experiences to develop skills to ensure that students will become safe, competent practitioners.
  - Faculty are expected to make judgments and decisions about the ability of the student to satisfactorily meet clinical objectives and expectations.
  - When students do not satisfactorily meet clinical objectives, faculty have the legal and ethical responsibility to deny academic progression.
  - Provide consistent feedback throughout the clinical experience and address deficiencies in private conferences away from the clinical setting.
  - Follow institutional guidelines for dismissal of a student for unsatisfactory clinical performance.

(Billings & Halstead, 2011)

## Ethical and Legal Issues and Obligations

- **Remember**
  - Intervene quickly if there is a problem
  - Document, document, document
  - If a student does not meet safe practice guidelines or is impaired in a clinical setting, he or she must be removed from the setting immediately.
  - If you follow guidelines and policies and document thoroughly, you will have the support of the department and administration

(Billings & Halstead, 2011)

## Summary of Day 2

- Review the objectives that were met today
  - 1. Discuss the categories that define the role of a nurse educator according to the NLN
  - 2. Discuss examples of activities to fulfill the roles
  - 3. Discuss the characteristics of core competency 8
  - 4. Discuss methods to meet this competency
  - 5. Discuss the role of teaching and learning within the nursing professions
  - 6. Discuss the theories of how adults learn and integration into practice
  - 7. Identify characteristics of a good learning environment
  - 8. Identify the qualities of a good instructor
  - 9. Discuss ethical issues and obligations for nursing faculty.
  - 10. Discuss legal issues and obligations for nursing faculty.

Remind all of the participants to make sure the evaluations have been completed for each session and turn them in prior to leaving. Thank them for attending, remind them what time day 3 starts.

**This is the end of Day 2  
Thank you for attending.**

Day 2 evaluation should be filled out prior to dismissing the participants for the day.

## Day 2 Evaluation

Please circle the appropriate response for each statement.

Scale key: 5-strongly agree 4-somewhat agree 3-agree 2-disagree 1-strongly disagree

The Faculty Role	Day 2 Session 1
6. Session Instructor (knowledgeable of content, communicates clearly, professional, answered questions)	5 4 3 2 1
7. Session Content (content applicable to your job, organized information)	5 4 3 2 1
8. Learning Materials (PowerPoint)	5 4 3 2 1
9. Learning Activities (reinforced the session content)	5 4 3 2 1
10. You can apply the information presented in your teaching role	5 4 3 2 1
11. Environment (comfortable, temperature, lighting, seating, availability of refreshments)	5 4 3 2 1

Please provide any additional comments

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Function within the Educational Environment	Day 2 Session 2
8. Session Instructor (knowledgeable of content, communicates clearly, professional, answered questions)	5 4 3 2 1
9. Session Content (content applicable to your job, organized information)	5 4 3 2 1
10. Learning Materials (PowerPoint)	5 4 3 2 1
11. Learning Activities (reinforced the session content)	5 4 3 2 1
12. You can apply the information presented in your teaching role	5 4 3 2 1
13. Environment (comfortable, temperature, lighting, seating, availability of refreshments)	5 4 3 2 1

- Please provide any additional comments

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Effective Teaching and Learning in the Classroom and Clinical	Day 2 Session 3
7. Session Instructor (knowledgeable of content, communicates clearly, professional, answered questions)	5 4 3 2 1
8. Session Content (content applicable to your job, organized information)	5 4 3 2 1
9. Learning Materials (PowerPoint)	5 4 3 2 1
10. Learning Activities (reinforced the session content)	5 4 3 2 1
11. You can apply the information presented in your teaching role	5 4 3 2 1
12. Environment (comfortable, temperature, lighting, seating, availability of refreshments)	5 4 3 2 1

Please provide any additional comments

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Ethical and Legal Issues	Day 2 Session 4
7. Session Instructor (knowledgeable of content, communicates clearly, professional, answered questions)	5 4 3 2 1
8. Session Content (content applicable to your job, organized information)	5 4 3 2 1
9. Learning Materials (PowerPoint)	5 4 3 2 1
10. Learning Activities (reinforced the session content)	5 4 3 2 1
11. You can apply the information presented in your teaching role	5 4 3 2 1
12. Environment (comfortable, temperature, lighting, seating, availability of refreshments)	5 4 3 2 1

Please provide any additional comments

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Thank you for your responses. Your feedback is important and will be used in future programs.



## Day 3

- Announcements
- Questions from Day 1 or Day 2?

Welcome the participants back to day 3 and clarify any questions from day 1 or day 2. give a brief overview of the plan for the day.

## Student Misconduct and Dealing with Problem Students

- Objectives
  - 1. Discuss types of student misconduct.
  - 2. Discuss proactive strategies for managing student misconduct.

## Student Misconduct and Dealing with Problem Students

- Student misconduct is going to occur.
- It is your responsibility to ensure that the learning environment is safe and productive for all where a quality teaching and learning experience can be provided.
- Make sure you read and are aware of the policies addressing student behaviors that are not expected or acceptable.

(Billings & Halstead, 2011)

## Student Misconduct and Dealing with Problem Students

- 3 Categories of Student Behaviors
  - Annoying acts
  - Administrative violations
  - Criminal conduct

(Billings & Halstead, 2011)

## Student Misconduct and Dealing with Problem Students

- **Examples of Annoying Acts**
  - Sleeping in class
  - Talking in class
  - Late to class
  - Poor hygiene
  - Eating, drinking in class
  - Cellphones
  - Leaving early

(Billings & Halstead, 2011)

Review examples of annoying acts and tell some stories of when some of these acts occurred in a class you were teaching or that required intervention. Ask the participants for more examples.

## Student Misconduct and Dealing with Problem Students

- **Handling Annoying Acts**
  - Communicate with the student regarding the annoying behaviors
  - Document any observed behaviors and interactions regarding conduct (even though it may seem small)
  - Stay focused on the class activity, even though the behavior is annoying you.
  - Clearly and consistently holding students accountable for their actions has an impact upon the individual as a learner.

(Billings & Halstead, 2011)

## Student Misconduct and Dealing with Problem Students

- **Examples of Administrative Violations**
  - Dishonesty
  - Disorderly conduct
  - Physical and/or verbal abuse
  - Cheating
  - Plagiarism

[Billings & Halstead, 2011]

Review the examples and tell a story of an incidence when one or more of these occurred while teaching. Ask participants to give more examples.

## Student Misconduct and Dealing with Problem Students

- **Handling Administrative Violations**
  - How it is handled depends on the type of violation (ex: a violation of a policy that has zero tolerance would lead to expulsion so you cannot do much to help the student)
  - Document the behavior and refer to the appropriate administrative person on campus
  - Communicate with the student regarding any allegations of misconduct.

[Billings & Halstead, 2011]

Ask the participants for examples of how to handle administrative problems. Make sure you review your college or university policy regarding administrative misconduct.

## Student Misconduct and Dealing with Problem Students

- **Examples of Criminal Conduct**
  - Threats of violence against self or others
  - Possession of firearms
  - Intimidation, harassment, stalking
  - Alcohol or drug possession and/or sale
  - Theft

(Billings & Halstead, 2011)

Ask the participants to think of any other violations. Tell a story of one or more of these occurrences you have encountered and discuss how it was handled.

## Student Misconduct and Dealing with Problem Students

- **Handling Criminal Conduct**
  - Let your supervisor know immediately
  - Security needs to be alerted
  - If you are in the clinical area, the hospital security personnel will also need to be alerted

(Billings & Halstead, 2011)

## Student Misconduct and Dealing with Problem Students

- **Responding to Student Misconduct**
  - Gather and document information
  - Engage and confront the student about the behaviors observed
  - Focus on the behavior
  - Discuss required new behaviors
  - Discuss the consequences of noncompliance
  - Refer unresolved or high risk cases to resources on campus

(Billings & Halstead, 2011)

Make sure you let the participants know that the majority of students do not misbehave or cause problems. At the end of this session, send the participants for a break and make sure you let them know what time to return.

## Your First Day of Teaching

- **Preparation is the key to success**
  - Set your alarm clock!
  - Do not leave any detail unattended from the night before
    - Pack up your lecture notes
    - Pick out your clothes
- **It is normal to be apprehensive and have anxiety**
  - Practice some stress-reducing techniques before the first day of class

(Webster, 2008)

Welcome the participants back from break and briefly review what will be presented

during this session.

## Your First Day of Teaching

### Project a professional image

- Appearances are important in first impressions
- A professional, yet business casual look is best
  - Cargo pants, flip-flops probably do not convey the right message
  - May be better to err on the side of appearing frumpy instead of fashionable
- Observe what your new colleagues are wearing

(Webster, 2008)

Make sure you cover any dress code requirements for your college or university at this time. Acceptable dress for didactic and clinical should be addressed.

## Your First Day of Teaching

### • Ease Anxiety

- Be well-prepared and organized to reduce stress on your first day
  - Focus on what you can do.
  - Keep your emotions in check.
  - Sometimes you just have to laugh it off.
  - Set goals for preparing for the class.
  - Seek out support.
  - Arrive early.

(Webster, 2008)

## Your First Day of Teaching

- **Introductions**

- From the first minute of walking into class, work on establishing rapport with the students.
- Allow students to introduce themselves.
- Tell students something about your life so they can relate to you as a person (nothing really personal)
  - Mention your family, pets, hobbies

(Webster, 2008)

## Your First Day of Teaching

- **Break the Ice**

- Cover the basics
- Try an icebreaker activity
  - Ask students to introduce themselves to 5 other students, interview the people in the group and then have each student share what they have learned about another student
  - Go around the room and ask each student what he or she hopes to learn during the course.

(Webster, 2008)



## Your First Day of Teaching

- **The Classroom is your Stage**
  - Students are more attentive in classrooms with instructors who are good entertainers
  - The goal is to capture the students' attention
    - Use dramatic gestures
    - Exciting speech
    - Show enthusiasm for the subject matter
    - Move around
    - There is nothing more boring than listening to an instructor read PowerPoint slides word for word with no expression and no excitement

(Webster, 2008)

## Your First Day of Teaching

- **Learn Student Names**
  - Repeat the person's name back to them without being obvious that you are trying to remember it.
  - Make up rhymes or pictures in your head that will help you remember names
    - Tall Tom, Merry Sherri, Plain Jane
  - Spell the name backwards to make you concentrate on the name

(Webster, 2008)

## Your First Day of Teaching

- Have Fun!
- If it does not go as perfectly as planned.....it is OK!

At the end of this session, send the participants to lunch and remind them of the time to return.

## What I Wish I Had Known My First Year

- Faculty panel discussion
  - Experienced faculty experiences
  - Question and answer session

Welcome the participants back from lunch and explain that there is a faculty panel to talk about the topic. This will be followed by a question and answer session for the

remainder of the time.

## Summary of Day 3

- Review the objectives that were covered today
- Clarify questions
- Make sure all evaluations have been completed and submitted
- Talk briefly about the shadowing days for clinical and didactic settings

## Thank You!

- Welcome to (name of college or university)
- Thank you for attending.
- Please make sure you fill out your evaluations and submit before leaving.

This is the end of day 3. Days 4 and 5 are in the classroom and clinical areas. Evaluations should be filled out at the end of day 3.

Day 3 Evaluation

Please circle the appropriate response for each statement.

Scale key: 5-strongly agree 4-somewhat agree 3-agree 2-disagree 1-strongly disagree

Student Misconduct and Dealing with Student Problems	Day 3 Session 1
12. Session Instructor (knowledgeable of content, communicates clearly, professional, answered questions)	5 4 3 2 1
13. Session Content (content applicable to your job, organized information)	5 4 3 2 1
14. Learning Materials (PowerPoint)	6 4 3 2 1
15. Learning Activities (reinforced the session content)	6 4 3 2 1
16. You can apply the information presented in your teaching role	6 4 3 2 1
17. Environment (comfortable, temperature, lighting, seating, availability of refreshments)	5 4 3 2 1

Please provide any additional comments

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Your First Day of Teaching	Day 3 Session 2
14. Session Instructor (knowledgeable of content, communicates clearly, professional, answered questions)	5 4 3 2 1
15. Session Content (content applicable to your job, organized information)	5 4 3 2 1
16. Learning Materials (PowerPoint)	5 4 3 2 1
17. Learning Activities (reinforced the session content)	5 4 3 2 1
18. You can apply the information presented in your teaching role	5 4 3 2 1
19. Environment (comfortable, temperature, lighting, seating, availability of refreshments)	5 4 3 2 1

Please provide any additional comments

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Faculty Panel Discussion	Day 3 Session 3
13. Session Instructor (knowledgeable of content, communicates clearly, professional, answered questions)	5 4 3 2 1
14. Session Content (content applicable to your job, organized information)	5 4 3 2 1
15. Learning Materials (PowerPoint)	5 4 3 2 1
16. Learning Activities (reinforced the session content)	5 4 3 2 1
17. You can apply the information presented in your teaching role	5 4 3 2 1
18. Environment (comfortable, temperature, lighting, seating, availability of refreshments)	5 4 3 2 1

Please provide any additional comments

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Thank you for your responses. Your feedback is important and will be used in future programs.

### Evaluation of the Program

Thank you for attending this professional development program. Please complete the survey. Your feedback is important and will be used in future programs.

Scale key: 5-strongly agree 4-somewhat agree 3-agree 2-disagree 1-strongly disagree

1. The professional development program met your expectations.	5	4	3	2	1
2. Was the registration process for the program easy?	5	4	3	2	1
3. Was the physical environment conducive to learning?	5	4	3	2	1
4. Would you recommend this program to a colleague?	5	4	3	2	1
5. Do you think the program helped in the transition into your new role?	5	4	3	2	1

6. What did you like about the program?

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7. What did you dislike about the program?

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8. What other professional development programs would you be interested in attending? \_\_\_\_\_

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9. Is there anything else you would like to comment

about? \_\_\_\_\_

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## Day 4

- **Clinical shadowing experience**
  - You will be with a faculty member in the clinical setting
  - All day experience

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## Day 5

- **Classroom shadowing experience**
    - You will be with one or more faculty members during classroom sessions
    - Shadowing during a lab session
    - Shadowing during a simulation scenario (if used by the college or university)
-



## References

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## Appendix B: Interview Questionnaire Guide

### Interview Instrument

#### Question Set One: Background Information

Questions to gather information about teaching experience and preparedness to teach in academia.

1. Would you please describe what educational degree you have earned and are you pursuing another degree or a higher degree?
2. Explain how long you have been teaching in academia and what is your area of expertise.

#### Question Set One: Role Ambiguity

Questions to help answer the research question Why do newly hired nursing faculty experience role ambiguity when beginning employment in academia?

1. Please describe your perception of what goals and objectives were expected in your job when you began teaching in your current position.
2. Please describe your perception of your job expectations and your role as a nursing instructor when you began teaching in your current position.
3. Describe the first few weeks of teaching at your college or university. When you began your job did anyone help guide you through the required paperwork such as job description and policy and procedures for your job? Please explain.
4. Did you attend any type of formal orientation program prior to beginning your current job? Please explain.

#### Question Set Two: Role Strain

Questions to answer the research question Why do the nursing faculty experience role strain when beginning a new job in academia?

1. Describe your feelings when you are given a new teaching assignment or a new job requirement for your current teaching position.
2. Describe your feelings about your current teaching workload or teaching assignment.
3. Describe your stress level, if any, while at work or when working on class assignments, tests, etc..

#### Question Set Three: Job Dissatisfaction

Questions to answer the research question Why do the nursing faculty experience job dissatisfaction when beginning a new job in academia?

2. Please describe you level of satisfaction with your current job.

#### Question Set Four: Difficult Transition

Questions to answer the research question Why are newly hired faculty experiencing problems with transitioning into the role when beginning employment in academia?

1. Tell me about your experiences as you transitioned from the clinical area or from another job into your current faculty position. Do you think your transition into your current position was difficult or fairly smooth? Please elaborate.
2. Please describe your first few weeks in your current job. Did anyone at your college or university formally or informally mentor you? Please explain.
3. Please tell me about how you developed your style of teaching. Did anyone at your college or university help you learn to develop tests, choose books, prepare your syllabi, or handle difficult students? Please elaborate.
4. Do you think a formalized orientation and mentoring program would be beneficial for faculty transitioning from clinical nursing to academia or when beginning a new job in academia? Please explain.

#### Set Five Faculty Attrition

Questions to answer the research question Why are nursing faculty considering leaving the position within the first 5 years of employment?

1. At the end of your first quarter of teaching at your college or university, how did you feel about continuing to teach at the college or university? .
2. Tell me in detail what would have the most influence on your decision to remain at your college or university or to leave your current job.

#### Set Six: Concluding Questions

1. Do you have any suggestions, recommendations, or anything else to add? Please explain.
2. Are full-time faculty, part time faculty, or adjunct faculty?
3. Is your primary teaching role in the classroom or in the clinical area?
4. Do you teach in an ADN program or a BSN program?
5. Do you work for a private institution or a state or public institution?

## Appendix C: Interview Protocol Form for Face-to-Face or Telephone Interviews

Project Study: Role Ambiguity, Role Strain, Job Dissatisfaction, and Difficulty

Transitioning Into Academia Among Nursing Faculty

Date \_\_\_\_\_

Time \_\_\_\_\_

Location - \_\_\_\_\_

Interviewer \_\_\_\_\_

Interviewee \_\_\_\_\_

Consent from signed? \_\_\_\_\_

**Notes to interviewee:**

Thank you for your participation. I believe your input will be valuable to this research and in helping grow all of our professional practice.

Confidentiality of your responses is guaranteed and you may stop the interview at any time if you no longer wish to participate.

Approximate length of interview: 1 hour, 32 questions

Purpose of the research:

The purpose of this study is to explore the factors leading to role ambiguity, role strain, difficulty with role transition, and job dissatisfaction among nursing faculty at colleges of nursing in the mountain region of Western North Carolina.

Research questions to be explored:

1. How do role ambiguity, role strain, difficult role transition, and job dissatisfaction relate to the attrition of nursing faculty at colleges of nursing in the mountain region of Western North Carolina?
2. Why do the nursing faculty experience role strain when beginning a new job in academia?
3. Why do the nursing faculty experience job dissatisfaction when beginning a new job in academia?
4. Why do newly hired nursing faculty experience role ambiguity when beginning employment in academia?
5. Why are newly hired faculty experiencing problems with transitioning into the role when beginning employment in academia?
6. Why are nursing faculty considering leaving the position within the first 5 years of employment?

**Interview questions:**

1. Would you please describe what educational degree you have earned and are you pursuing another degree or a higher degree?

Response from Interviewee:

Reflection by Interviewer

2. Explain how long you have been teaching in academia and what is your area of expertise. Response from Interviewee:

Reflection by Interviewer:

3. Please describe your perception of what goals and objectives were expected in your job when you began teaching in your current position.  
Response from Interviewee:

Reflection by Interviewer:

4. Please describe your perception of your job expectations and your role as a nursing instructor when you began teaching in your current position.

Response by Interviewee:

Reflection by Interviewer:

5. Describe the first few weeks of teaching at your college or university. When you began your job did anyone help guide you through the required paperwork such as job description and policy and procedures for your job? Please explain.  
Response by Interviewee:

Reflection by Interviewer:

6. Did you attend any type of formal orientation program prior to beginning your current job? Please explain.  
Response by Interviewee:

Reflection by Interviewer:

7. Describe your feelings when you are given a new teaching assignment or a new job requirement for your current teaching position.  
Response by Interviewee:

Reflection by Interviewer:

8. Describe your feelings about your current teaching workload or teaching assignment .  
Response by Interviewee:

Reflection by Interviewer:

9. Describe your stress level, if any, while at work or when working on class assignments, tests, etc.

Response by Interviewee:

Reflection by Interviewer:

10. Please describe your level of satisfaction with your current job.

Response from Interviewee:

Reflection by Interviewer:

11. Tell me about your experiences as you transitioned from the clinical area or from another job into your current faculty position. Do you think your transition into your current position was difficult or fairly smooth? Please elaborate.

Response from Interviewee:



Reflection by Interviewer:

12. Please describe your first few weeks in your current job. Did anyone at your college or university formally or informally mentor you? Please explain.

Response from Interviewee:

Reflection by Interviewer:

13. Please tell me about how you developed your style of teaching. Did anyone at your college or university help you learn to develop tests, choose books, prepare your syllabi, or handle difficult students? Please elaborate.

Response from Interviewee:

Reflection by Interviewer:

14. Do you think a formalized orientation and mentoring program would be beneficial for faculty transitioning from clinical nursing to academia or when beginning a new job in academia? Please explain.

Response from Interviewee:

Reflection by interviewer:

15. At the end of your first quarter of teaching at your college or university, how did you feel about continuing to teach at the college or university?

Response by Interviewee:

Reflection by Interviewer:

16. Tell me in detail what would have the most influence on your decision to remain at your college or university or to leave your current job.

Response from Interviewee:

Reflection by Interviewer:

**If participant wishes to discontinue the study, ask if they would be willing to share why:**

**Thank the participant for his/her participation.**

## Appendix D: Informed Consent for Faculty

### CONSENT FORM

You are invited to take part in a research study of the factors related to role ambiguity, role strain, job dissatisfaction, and difficulty transitioning into academia among nursing faculty. The researcher is inviting current nursing faculty at colleges in Western North Carolina to be in the study. This form is part of a process called “informed consent” to allow you to understand this study before deciding whether to take part.

This study is being conducted by a researcher named Paula Whitehead, who is a doctoral student at Walden University. You may already know the researcher as a faculty member in the area, but this study is separate from that role.

**Background Information:**

The purpose of this study is to explore the factors leading to role ambiguity, role strain, difficulty with role transition, and job dissatisfaction among nursing faculty.

**Procedures:**

If you agree to be in this study, you will be asked to:

- Participate in an online interview lasting approximately 30 minutes.
- You will have to option, after completion of the online interview, to participate in face-to-face or telephone follow-up interview if you wish to do so.

Here are some sample questions:

1. Please describe your perception of what goals and objectives were expected in your job when you began teaching at your college or university.
2. Describe your feelings when you are given a new teaching assignment or a new job requirement.
3. Please describe your first few weeks in your current job. Did anyone at your college or university informally mentor you? Please explain.

**Voluntary Nature of the Study:**

This study is voluntary. Everyone will respect your decision of whether or not you choose to be in the study. No one at your college or university will treat you differently if you decide not to be in the study. If you decide to join the study now, you can still change your mind later. You may stop at any time.

**Risks and Benefits of Being in the Study:**

Being in this type of study involves some risk of the minor discomforts that can be encountered in daily life, such as fatigue, stress, or becoming upset. Being in this study would not pose risk to your safety or wellbeing.

Your responses will aid in creating social change by providing college administrators with information regarding faculty perceptions of role ambiguity, role stress, and difficulty transitioning into academia. The information will allow the administrators to address these concerns to make improvements and to design programs to meet the needs of nursing faculty.

**Payment:**

No compensation will be given for participating in the study.

**Privacy:**

Any information you provide will be kept confidential. The researcher will not use your personal information for any purposes outside of this research project. Also, the researcher will not include your name or anything else that could identify you in the study reports. Data will be kept secure by the use of password protected files kept on my personal computer at my home. Pseudonym initials and numerical coding will be used in place of actual names. Data will be kept for a period of at least 5 years, as required by the university.

**Contacts and Questions:**

You may ask any questions you have now. Or if you have questions later, you may contact the researcher via telephone at [REDACTED] or via email at [REDACTED]@waldenu.edu. If you want to talk privately about your rights as a participant, you can call Dr. Leilani Endicott. She is the Walden University representative who can discuss this with you. Her phone number is 612-312-1210. Walden University's approval number for this study is **08-04-15-0075053** and it expires on **August 3, 2016.**

The researcher will give you a copy of this form to keep if you participate in the face-to-face or telephone interviews

Please print or save this consent form for your records if you participate in the online interview.

**Statement of Consent:**

I have read the above information and I feel I understand the study well enough to make a decision about my involvement. By signing below or by returning a completed survey, I understand that I am agreeing to the terms described above.

Printed Name of Participant

Date of consent

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Participant's Signature

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Researcher's Signature

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## Appendix E: Letter to Nursing Faculty

Invitation to participate in the study titled Role Ambiguity, Role Strain, Job Dissatisfaction, and Difficulty Transitioning into Academia among Nursing Faculty through an online interview with an optional follow-up face-to-face or telephone interview.

Dear Nursing Faculty Member:

I am conducting personal interviews as a part of a research study to increase my understanding of faculty perceptions of role ambiguity, role strain, job satisfaction, and experiences during transition from clinical nursing to academia. As a nursing faculty member, you are in an ideal position to provide valuable information from your perspective. This study will be submitted as partial fulfillment of the requirements for completion of my Doctor of Education degree.

You are invited to participate in the study through participation in an interview. You will be provided a link to access the online interview. You may choose a follow-up face-to-face or telephone interview after completion of the online interview. The interview will last approximately 30 minutes. Your identity anonymous for the online interview and will be kept confidential for any follow-up interviews. There is no compensation for participating in the study. Your responses will aid in creating social change by providing college administrators with information regarding faculty perceptions of role ambiguity, role stress, and difficulty transitioning into academia. The information will allow the administrators to address these concerns to make improvements and to design programs to meet the needs of nursing faculty.

If you are interested in participating, please refer to the attached consent form which contains additional information about the study. Your name will not be included in the study and prior to submitting your responses, you will be provided an email with the summation of the study.

If you have any questions please do not hesitate to ask. You may contact me via email at [REDACTED]@waldenu.edu or via telephone at [REDACTED].

Sincerely,  
Paula Whitehead