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Achieving Hospital Sustainability Through Strategies for Nursing Leader Succession Planning

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Walden University

College of Management and Technology

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Venecia Holmes

has been found to be complete and satisfactory in all respects,
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the review committee have been made.

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Walden University
2017

Abstract

Achieving Hospital Sustainability Through Strategies for Nursing Leader Succession

Planning

by

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MHA, University of Mary Hardin Baylor, 2002

BSN, University of Mary Hardin Baylor, 2000

Doctoral Study Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Business Administration

Walden University

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Abstract

Seventy percent of hospital leaders report a lack of succession planning practices as an organizational strategy to mitigate the risk of talent loss and for addressing nursing shortages. The purpose of this multiple case study was to explore succession planning strategies 6 hospital managers used to reduce the shortage of nurse leaders in 2 Hampton Roads, Virginia hospitals. The conceptual framework was Rothwell's succession planning model for understanding the succession planning strategies the hospital managers used to reduce the shortage of nurse leaders. After conducting semistructured interviews, and reviewing supporting hospitals' documents, techniques of compiling, disassembling, reassembling, interpreting, and concluding were used for data analysis. Methodological triangulation was also to validate the findings and ensure the trustworthiness of interpretations. The principal themes emerging from the analysis were identifying organizational staffing needs, providing advancement opportunities, identifying potential leaders, and preparing nurses for leadership positions. The potential pathways for effecting beneficial social change are contributing to leaders' knowledge of succession planning strategies to reduce nurse leader vacancies and contributing to the welfare of society by improving the continuity of healthcare services for patients and communities.

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Dedication

I would like to thank Almighty God for His guidance through this journey. Faith, as a mustard seed, moved every mountain out of my way. For those who encouraged me along the way I cannot extend my gratitude enough. For those who believed my strength outweighed my fragility, I say thank you. For those who prayed with and for me I extend my hand of gratefulness. Most of all thank you for the opportunity to make a difference and hopefully to inspire others to make this journey. Jesus paid it all and all to Him I owe.

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Section 1: Foundation of the Study

Nursing, the largest workforce in healthcare, is experiencing a loss of nurse leaders for a multitude of reasons (Titzer, Phillips, Tooley, Hall, & Shirey, 2013). Hussain, Rivers, Glover, and Fottler (2012) and Waxman and Delucas (2014) found that nurse leaders are departing the healthcare industry for other professions because of work conditions, staffing issues, high acuity of patients, retirement, and work-life balances. The departure of nurse leaders is a human capital concern requiring attention from hospital leaders (Titzer et al., 2013). My focus for this study was to provide hospital leaders with an awareness of strategies to possibly mitigate the nursing leadership shortage and promote the succession of nurse leaders for the future of nursing and healthcare. The healthcare system is reliant on nurse leaders to manage the complex care of patients, maintain quality standards, promote safety, and enhance productivity (Titzer & Shirey, 2013). A shortage of nurse leaders can lead to disruptions of hospital performance and community healthcare needs (Waxman & Delucas, 2014).

Background of the Problem

The management and development of nurse leaders lacks focus from hospital leaders (Mensik & Kennedy, 2015). Nurse leader development stems from clinicians motivated by career advancements or identified as potential leaders (Waxman & Delucas, 2014). Holland (2015) and Van den Heede et al. (2013) proposed healthcare leaders gain a perspective of the need to invest in future nurse leaders through retention measures and succession planning. The healthcare industry is reliant on nurses' expertise and knowledge to provide care and services to healthcare consumers (Trepanier & Crenshaw,

2013). The loss of nurse leaders' tacit knowledge and experience can affect patient care and healthcare organizations' productivity (Holland, 2015). Hospital managers have a responsibility to identify and respond to internal and external issues that affect the nursing profession to secure the future of nurse leadership and healthcare (Trepanier & Crenshaw, 2013). The use of nurse leader succession planning is lagging in research and application within the healthcare industry (Titzer & Shirey, 2013). Waxman and Delucas (2014) suggested the nursing leadership shortage and retirement of tenured nurses provide a catalyst for hospital managers to promote nurse leader succession planning through hospital managers' strategic planning.

Problem Statement

Trepanier and Crenshaw (2013) posited that 70% of the healthcare industry leaders reported a lack of succession planning practices. Nurse leader retirements and underutilization of succession planning can result in a shortage of nurse leaders (Denker, Sherman, Hutton-Woodland, Brunell, & Medina, 2015; Dyess, Sherman, Pratt, & Chiang-Hanisko, 2016) adversely affecting patient care and increasing hospitals' cost. Nurse leader shortages can result in increased costs of \$200-500 thousand per year for each hospital (Titzer & Shirey, 2013). The general business problem was that nurse leader shortages result in loss of quality patient care, productivity, and organizational profitability for hospitals. The specific business problem was some hospital managers lack succession planning strategies to reduce the shortage of nurse leaders.

Purpose Statement

The purpose of this qualitative multiple case study was to explore the succession planning strategies that some hospital managers used to reduce the shortage of nurse leaders. The targeted population included six hospital managers within two hospitals in Hampton Roads, Virginia, who have successfully implemented succession planning strategies to reduce nurse leader shortages. The implication for social change was leaders might benefit from an awareness of succession planning strategies and contribute to the welfare of society by improving continuity of healthcare services for patients and communities.

Nature of the Study

I used a qualitative method for this study. Qualitative researchers focus on people, experiences, stories, and perceptions to engage participants in the natural environment (Gizir, 2014; Hazzan & Nutov, 2014). Quantitative researchers focus on experimentation, analysis, and testing hypotheses, for the significance of relationships and differences among variables (Hoare & Hoe, 2013). Formulating and testing hypotheses for examining relationships or differences among variables was not the purpose of this study. The quantitative method is not appropriate to explore the phenomenon of research (Spector, Rogelberg, Ryan, Schmitt, & Zedeck, 2014). The mixed method researcher incorporates both the qualitative and quantitative method but the mixed method was not appropriate for this study (Griensven, Moore, & Hall, 2014). The qualitative method is a tool researchers can use to explore the context of the phenomenon (Mukhopadhyay &

Gupta, 2014). I sought to answer the research question with the exploration of succession planning strategies to mitigate nurse leader shortages.

I considered several qualitative research designs that included case study, phenomenology, and ethnographic approaches. I used a multiple case study design for this study. A researcher using a case study can answer the research question related to *what*, *why*, and *how* (Yap & Webber, 2015; Yin, 2014). Researchers can gain a perspective of the phenomenon from a case or cases with a case study design (Yin, 2014). Since the goal of this study was not to understand the phenomenon from a participant's lived experiences, phenomenology was not an appropriate design (Birchall, 2014). Researchers using an ethnographic design focus on a groups' cultural perspectives, which was not the purpose of this study (Hyett, Kenny, & Dickson-Swift, 2014; Vohra, 2014). Researchers can use a multitude of resources such as archived documents, observations, financial records, and interviews to explore cases and gather information about a phenomenon (Yin, 2014), and a multiple case study was appropriate for addressing my study's purpose.

Research Question

The central research question used as a guide for this research was:

What succession planning strategies do some hospital managers use to reduce the shortage of nurse leaders?

Interview Questions

1. Why is nurse leader succession planning important to your organization?

2. What succession planning strategies did you use to reduce nurse leader shortage?
3. How did you implement these strategies?
4. What identified successes have come from the use of these succession planning strategies?
5. What have been some barriers to nurse leader succession planning implementation?
6. How have you addressed the barriers to implementing the strategies?
7. How have you assessed the effectiveness of your strategies for your hospital costs and revenues?
8. What other information would you like to add that we have not already discussed?

Conceptual Framework

Rothwell (2005) indicated leaders should use a theory of succession planning not for the purpose of a replacement process, but as a method of performance improvement, employee development, communication enhancement, and organization strategy. Leaders can use succession planning strategies and processes to support, develop, and direct employees for succession planning to support achieving organizations' individual missions (Darvish & Temelie, 2014; Klein & Salk, 2013). Leaders with succession planning comprehension provide (a) succession transparency, (b) individual development, (c) stakeholder accountability, (d) assessment of capabilities, and (e) organizational need analysis (Rothwell, 2005). Business leaders with cost containment

and revenue-generating strategies must also consider talent management for human capital financial and productivity returns (Soewignyo & Soewignyo, 2015). Gothard and Austin (2013) noted that organizations require leadership involvement and continuous succession planning to identify successors, develop and retain knowledge, skills, and abilities of successors, and address talent gaps. Succession planning can occur through implementing strategies for mentorship, coaching, position classification, and resource identification (Carriere, Cummings, Muise, & Newburn-Cook, 2009). Organizational performance relies on leadership succession management, and the application of succession planning can contribute to healthcare organizations' sustainability (Gray, 2014; Titzer et al., 2013).

Operational Definitions

Human capital: Human capital is an adjective to describe value of employees who possess skills, knowledge, and work experience for meeting organizations' missions (Datt & Rivera, 2013).

Internal labor market: An internal labor market is a group of employees within an organization with available skills and talents to move the organization to the next level (McComb, 2013).

Nursing leader shortage: Nursing leader shortage is the lack of nurse leaders to manage a nursing department or unit to carry out the duties and functions that support the mission of the organization, and provide leadership to subordinates (Titzer et al., 2013).

Performance improvement: Performance improvement is the process for achieving an outcome as a defining measurement of an intervention or action (Engler, Jones, & Van De Ven, 2013).

Right fit: The *right fit* refers to the internal or external employees with desirable skills, experience, and talents to achieve organizations' objectives (Trepanier & Crenshaw, 2013).

Strategic agility: Strategic agility is the decision-making response of leaders who assure the flexibility of the organization in a changing business environment (Lewis, Andriopoulos, & Smith, 2014).

Succession planning: Succession planning is the process and management assuring the continuing availability of talent with the use of development, additional skills, and enhancement of experience (Marbury & Mayer, 2013).

Sustainability: Sustainability refers to the practices and processes within an organization that address the need for environmental, social, and financial aspects of organizations and society as a whole (Anca-Letitia, 2013).

Talent management: Talent management is an employer's investment in the development of the employee as an organizational future asset (Anca-Letitia, 2013).

Assumptions, Limitations, and Delimitations

Researchers apply assumptions, limitations, and delimitations to a study. Foss and Hallberg (2014) identified researchers' attempts to identify the unknown, and having to make assumptions for which there is no factual evidence. The researcher's approach of inquiry can produce valuable information or a delimitation of the data and outcome of the

research (Filip, 2014). Fryer et al. (2016) suggested there are concerns for researchers on the lack of control but the researcher has a duty to identify and explain the limitations of the research to the audience.

Assumptions

An assumption is a belief without one's ability to provide substantial evidence of validity (Hudlund-de Witt, de Boer, & Boersema, 2014). I had three assumptions related to this study. My first assumption was that hospital leaders would engage in the interview process so that I would be able to develop themes from the semiconstructed interviews. My second assumption was the leaders would provide honest answers to the interview questions. My third assumption was my personal and nurse manager experience would provide hospital leaders with the comfort level to engage in the interview process.

Limitations

The American Psychological Association (2010) indicated a limitation is an issue outside of the control of a researcher. I identified four limitations within this study. The first limitation was the participants' truthfulness, organizational record accuracy, and the leaders' willingness to share organizational information to advance the study (Malagon-Maldonado, 2014). The second limitation was all participants could decide not to participate and preclude the attainment of data saturation (Muir, 2014). The third limitation was the participants' potential unwillingness to dialogue during the interview process, would prevent gathering information and the need to identify new participants. The fourth limitation was the potential unavailability or inaccessibility to participants for the interview process.

Delimitations

Delimitations are constraints the researcher imposes on the study such as population, criteria for target population, and data collection tools (Vernon-Dotson, 2013; Yin, 2014). Healthcare systems and hospitals come in a variety of sizes and forms (Stock, McDermott, & McDermott, 2014). I imposed two delimitations for this study. The first delimitation was the choice to limit this research to hospitals might not promote transferability of the research information (Stock et al., 2014). The second delimitation was the use of a purposeful sample for time constraints and financial resources minimization.

Significance of the Study

Leaders who use succession planning strategies could effectively reduce the potential and recidivism of nurse leader shortages that can negatively affect revenue (Titzer & Shirey, 2013). Mitchell, Obeidat, and Bray (2013) posited that strategies to enhance human resource practices and development could substantiate organizational performance. Gray (2014) encouraged organizational leaders to address the impending retirement of experienced and tenured employees and to develop new leaders with the use of succession planning. Hospital leaders can plan for the business challenges over the next 10 years with the development of nursing employees into future leaders as an improvement strategy for replacing nursing talent loss (Hunt, 2014). This study was significant to business practice for providing an awareness of the use of effective succession planning strategies for achieving sustainability by retaining capabilities, managing costs, and reducing nursing leadership shortages. The implication for social

change was leaders could learn to develop strategies to reduce the risk of nursing leadership shortages and develop future leaders to benefit the continuity of healthcare services for patients, families, and communities.

A Review of the Professional and Academic Literature

The purpose of this qualitative multiple case study was to explore the succession planning strategies that some hospital managers use to reduce the shortage of nurse leaders. The purpose of this literature review was to explore how leaders use succession planning strategies to enhance (a) succession transparency, (b) individual development, (c) stakeholder accountability, (d) assessment of capabilities, and (e) organizational need analysis (Rothwell, 2005). I addressed the business problem with reviewing the context of leadership, succession planning, and the general aspect of the healthcare industry. The literature search included peer-reviewed journals, books, and approved doctoral studies available through the Walden Library. The key words for the literature search included the following terms: *leadership, strategy, strategic planning, succession planning, succession management, talent management, mentoring, coaching, human capital, healthcare systems, hospitals, and sustainability*. I searched the keywords with the use of the following databases: Science Direct, Business Source Complete, Thoreau, EBSCOhost, PsyInfo, and PsyArticles along with Google Scholar.

Since 92.7 % of the total number of references have a publication date between 2013 and 2017, I satisfied the requirement that at least 85% of the total number of study references have a publication date within 5-years prior to the expected year of the approval from the Chief Academic Officer. The referenced journals, studies, books, and

articles total 211 peer-reviewed sources out of the total 236 with the 89% minimum peer-reviewed sources exceeding the 85% minimum standard . Other scholars have established a foundation for extending my research into succession planning. The current review of this information is an overview of the evolvement of the evidence and was informative in the comprehension of succession planning, leadership, and talent management of healthcare.

I used an interpretive and exploratory view to conduct an in-depth study of the literature to gain an understanding of the inquiry of how hospital managers use strategies for succession planning. Nurse leaders have accountability and responsibility to manage departments appropriately and maintain a budget that adds positively to the balance sheet (Titzer & Shirey, 2013). Profitable outcomes are significant to the strategic welfare of a business, and human resource management is beneficial to the profitable component of the branding of the organization (Soewignyo, & Soewignyo, 2015). Darvish and Temelie (2014) examined the correlation of succession planning and strategic planning in a university setting with recommendations for leaders to use a systematic approach to collaborate strategic planning and succession planning. Titzer and Shirey (2013) provided further research with the indication of how to strategize for succession with (a) successor identification (b) successor development (c) and evaluation. Healthcare leaders' desire for profitable gains proffers from effective leadership and stakeholder awareness to support succession planning (Marbury & Mayer, 2013; Trepanier & Crenshaw, 2013). Shivakumar (2014) stated adequately preparing for a future leadership shortage may include short-term costs but could also provide long-term gains. The costs of future

leader shortage and preparation strategies can have a short-term cost, but a long-term gain may be worth the financial input. The leader and follower relationship has a construction of varied conditions and may be in response to the conduct of the follower versus the leader (Rowold, 2014). A leader's response to the strategy of succession planning can indicate to a subordinate the importance of future planning inclusive of the employee (Marbury, 2012). It is necessary to discuss the attributes of leadership in this review to understand how leaders and leadership can promote the use of succession planning strategies to mitigate nurse leader shortages (Titzer et al., 2013).

Leadership

Leaders focused on only the trends of markets or industries may not account for the opportunities or threats that can affect specific organizations (George, Dahlander, Graffin, & Sim, 2016). Brunnsen (2015) suggested leaders evaluate the cost of sustainability for the organization. Greer-Frazier (2014) agreed with Brunnsen's (2015) suggestion but also recommended a leader maintain awareness of organizations' dynamic environments for effective decision and strategic management. Leaders have to adapt to the future environment with a new realm of leadership practices and thinking (Wolfgramm, Flynn-Coleman, & Conroy, 2015). Vacant positions can slow the progression of business or increase the workload of less experienced or knowledgeable workers, but future leader identification could amend this concern of vacant positions and novice unknowledgeable replacements (Soewignyo, & Soewignyo, 2015; Titzer et al., 2013). The ability to fill major positions without an interruption to business practices can reduce financial and productivity concerns (Taj, 2016). The business environment is

conducive to multiple changes because of general trends and barriers but a leader with a proactive mindset can manage organizational sustainability (Van Wart, 2013).

Leadership is essential in all organizations but comes with a variety of conceptions (Vohra, 2014). Researchers identified leadership styles and theories to highlight traits, behaviors, and personalities of a leader of spiritual (Wu & Li, 2015), transformational (Bass, 1997; Bottomley, Burgess, & Fox, 2014), servant and ethical (Christensen, Mackey, & Whetten, 2014; Ruggieri & Abbate, 2013), and leader-member exchange (Dansereau, Seitz, Chiu, Shaughnessy, & Yammarino, 2013; Tyssen, Wald, & Spieth, 2013; Lorinkova, Pearsall, & Sims, 2013). Cerni, Curtis, and Colmar (2014) extended leadership research to include the information processing talent of leaders through style or system as a cultivation of leadership. Yap and Webber (2015) informed organizational leaders that employees engage with a leader who promotes a healthy work environment, emotional intelligence, knowledge/experience development, and a friendly organizational culture.

Leadership styles. Leadership styles have transformed in leadership history with a scholarly inquiry of the behaviors, traits, and personalities (Boykins, Campbell, Moore, & Nayyar, 2013). Irrespective of the leadership style, some behaviors, skills, knowledge, and abilities have a positive effect on the employee, organization, and community (Cerni et al., 2014). Current and future leaders require skill sets for managing self, conflict, finances, people, processes, public relations, and information (Strickler, Bohling, Kneis, O'Connor, & Yee, 2016). Van Wart (2013) and Storsletten and Jakobsen (2015) found leaders also require the ability to adjust and adapt to the complex and changing business

environment. The healthcare environment reflects changes of the industry as do other businesses' environments (Chow, 2013). The nurse leaders' success warrants succession planning and strategic implementation of strategies to deal with the demands of healthcare and leading in a changing business environment (Titzer et al., 2013). Leaders possess differences in personalities, behaviors, and traits and respond differently to the environment of their practice, which can adversely affect the organization or employees (Cerni et al., 2014).

Leaders respond and behave differently by leadership styles, and the working environment may have an effect on a leader's style of leadership (Kramer & Shuffler, 2014). Boykins et al. (2013) identified coaching, democratic, authoritative, team focused, and rapport guided leadership styles, each with benefits and barriers for followers and organizations. McKinney, Labat, and Labat (2015) studied the leadership styles of successful principals who transformed schools into high-performing institutions, and asserted positive traits and behaviors of involvement, relationship guidance, visionary, and facilitative attributed to the success of the principals and schools. The traits of fidelity and ethical behaviors modeled and embedded into the organizational culture increase the motivation of employees and enhance the social relationship of leaders and subordinates (Hassan, Mahsud, Yukl, & Prussia, 2013). Uhl-Bien, Riggio, Lowe, and Carsten (2014) posited there is too much emphasis on a leader, as the follower has a role in the development of the leader based on the dyad relationship. Oc and Bashshur (2013) agreed with Uhl-Bien et al.'s (2014) proclamation of leadership occurrence through the eyes of the follower can form the behaviors, attitudes, and principles of the leader.

McKinney et al. (2015) declared the dyadic relationship based on a leader's contingency leadership style could promote the development of the followers and transform the vision of a leader into reality.

Contingency leadership. Fielder (1991) proposed the contingency model helped to gain a better understanding of the interaction of leaders with subordinates, dependent upon the situation. The contingency leader emerged with the employee and leader dyad relationship (Oc & Bashshur, 2013). A contingent basis to interact with subordinates and transcend to a visionary and motivational stance is the concept of a combined transactional/transformational leadership style (Bass, 1997). The prescriptive nature of followers is different with each employee, possibly creating a roadblock for effective leadership, and insubordinate followers can wreak havoc on the efforts of a leader (Kalaluhi, 2013; Oc & Bashshur, 2013). McKinney et al. (2015) protested the use of an authoritative style and warned this type of style could lead to negative outcomes. Uhl-Bien et al. (2014) proposed followers have a duty to strengthen the leader by following, challenging, and informing leaders of his or her leadership and decision-making abilities. The positives of understanding the relationship between leaders and followers can provide a greater understanding of the benefits and risks of the dyadic relationship when situations may not promote leadership or followership (Kalaluhi, 2013).

Path- goal leadership. The goal of creating a relationship that is beneficial to the organization relies on the previously mentioned aspects, but other leadership qualities can have more of an effect in varied and altered business environments (Fielder & Chemers, 1974). The path-goal theory became introductory as a prospective theory of leadership

processes (Vroom & Jago, 2007). Evans (1970) introduced path-goal leadership as a method the leader uses to focus on assisting the subordinate by the removal of barriers and provision of structure to deal with changing business environments. Fielder & Chemers (1974) based leadership on the situation or setting that was suitable to the leadership style encompassing a match of the leader to the environment with minimization of flexibility. The leader can develop strategies with the use of perspectives of leadership style, acknowledgment of employee needs, and maintain organizational vision (Boykins et al., 2013).

Leadership awareness. A leader should understand and assess his or her leadership style on a continual basis to effectively lead, motivate, and develop other individuals (Malik, 2013). The acknowledgment of the behaviors, skills, and attributes of leadership styles and theories provides insight into the requirements of sustainability (Anca-Letitia, 2013; Cerni et al., 2014). Sustainability encompasses actions that presently and longstanding effect the environment, society, and economy objectives internally and externally of organizations (Watson & Ripley, 2013). Van Wart (2013) implored leadership role reviews are necessary because of these various complexities of leadership and the trends occurring in business. Leadership role reviews may require the need to include leadership capabilities, adding to the complexity of understanding the leadership phenomenon (Boykins et al., 2013). The leader also has self-awareness of past leadership abilities and the formulation of new abilities (Dansereau et al., 2013).

A leader with a stakeholder focus can develop strategies that produce positive gains for the organization, staff, and community (Bridoux & Stoelhorst, 2014).

Leadership styles are fluent and reliant on variations of a leader, and the quest for sustainability can be the driver to ensure that the leader's focus remains on organizational needs (Anca-Letitia, 2013). Malik (2013) noted the attitudes and behaviors of leaders could change or enhance the motivation of others. Leaders who understand leadership attitudes and behaviors effects can increase or decrease motivation, invest in talent management, and human resource development (Vroom & Jago, 2007). Leaders adopting the optimal strategy for managing and developing talent highlight a strategic and socially responsible measure to strive for sustainability (Anca-Letitia, 2013).

Leadership flexibility. A leader requires a multitude of skill sets that will provide beneficial professional and leadership aptitudes in tandem with leadership flexibility and agility (Van Wart, 2013). Leaders manage a multiplicity of issues and people and should understand the importance of change (Fibuch & Van Way, 2012). Leaders with agility can maintain stability in an inflexible environment and incorporate the needs of the employee simultaneously (Chamberlain, 2013; Van Wart, 2013). Dansereau et al. (2013) believed the leader-member exchange relationship between the leader and follower is a more suitable dyad to develop for ensuing flexibility. The ability to remain faithful to the mission of the organization and effectively lead others may come easier as some employees look to the leader for guidance, support, development, and vision (Chamberlain, 2013). Because of the needs of employees and the organization, leaders require a flexibility that is meaningful and didactic to remain effective in a changing business environment (Fibuch & Van Way, 2012).

Changing business environments require various types of leaders with adaptability, which is not dependent on leadership style or gender (Avolio, Walumbwa, & Weber, 2009). The contingency or situational leadership style accounts for a leader's approach to flexibility in the dynamics of business and decision-making (Kramer & Shuffler, 2014). Latham (2014) noted researchers, quality professionals, and consultants have a continued curiosity about the concept of leadership. Morrow, Glenn, and Maben (2014) indicated the leadership process is an important concept to consider during change management and the introduction of new initiatives. Leadership development initiatives incorporating business trends and for addressing barriers are important for leaders to make strategic decisions that benefit the organization (Mensik & Kennedy, 2015). The use of succession planning strategies can enhance the retention of nurse leaders and promote the *bench strength* of nursing leadership within an organization (Titzer & Shirey, 2013). The financial constraints of recruitment and retention may not align with the organizational strategic plan, but leaders could consider the investment in human capital as a possibility to sustain financial gains and organizational branding (Taj, 2016).

Leadership summation. Leadership as a theory remains a complex interpretive assessment of how a leader behaves, interacts, or processes decisions (Allio, 2013; Greer-Frazier, 2014). Avolio et al. (2009) proposed leadership theories are numerous and varied starting with the foundation of the great man theory to the newest phenomenon of e-leadership. Leaders engage in learning how to manage people, processes, and positions. Subordinates respond according to leader personality traits, subordinate task levels, and if the situation aligns with the personality trait of the leader (Evans, 1970). De Clercq,

Bouckenooghe, Raja, and Matsyborska (2014) and Humphrey and Berthiaume (1993) expressed Fielder's (1991) contingency theory relied on the inherent trait of the leader rather than behavior. Humphrey and Berthiaume (1993) suggested the followers' behavior does not change in the relevance of others, but to the personality traits of leaders. Vroom and Jago (2007) argued that there was merit in Humphrey and Berthiaume's (1993) theory, but concluded that leadership traits do not waver according to a particular situation. Kramer and Shuffler (2014) acknowledged the contingent leader is flexible but may cause disruption within an organization from the unpredictability of a contingency leadership style. Nurse leaders have to be well rounded and versed in quality initiatives, regulatory standards, business acumen, and human resource management (Boyal & Hewison, 2015). Nurse leaders require the correct tools, knowledge, and experience to function effectively as leaders (Waxman & Delucas, 2014).

The role of a leader in the succession planning strategies for emerging leaders reflects a continuous learning process. Delmatoff and Lazarus (2014) proposed the greatest leadership characteristic would be that of emotional intelligence and a leader's self-awareness is important when leading others. The key aptitude and behaviors of leaders require the ability to motivate, develop, and influence individuals (Allio, 2013). Leaders can utilize key roles and capabilities in the progression analysis of an organization to determine the best strategies for succession planning (Sherrod & Holland, 2013). Waxman and Delucas (2014) decided nurse leaders who have a gatekeeping perspective of patient care and services can leverage capabilities to achieve and ensure patient care, safety, and satisfaction of healthcare consumers.

Succession Planning

The failure to acknowledge the requisite initiatives and accountability to carry out a succession management plan may deter a leader from the utilization of the initiative as a strategy of competitive advantage and sustainability (Toterhi & Recardo, 2013). To maintain organization viability and sustainability, organizational leaders, inclusive of human resource leaders, have to account for the strategies for succession management to distinguish one company from another (Marbury, 2012). Rothwell (2011) suggested leaders attuned to organizational goals consider succession planning as part of the organization strategy of differentiation. The tumultuous events of the business milieu warrants organizational leaders to prepare themselves and subordinates for complexities and variabilities that could hinder or enhance an organization (Van Wart, 2013).

The business environment of today may encounter changes in response to globalization, diversity, and other business trends (Weber & Tarba, 2014). Marbury (2012) validated the use of leadership as a process to focus on the phenomenon of succession planning. Donaldson and Schoemaker (2013) informed leaders of the expansion of risks to industries on a global and national level. Marbury (2012) promoted leadership to advance succession planning strategies because of the changing aspects of the business environment and noted the effects of different leadership styles on the organization or employee. Leaders can gain organizational strategic agility with the constant assessment of business trends, responsiveness to globalization, and management of resources in a volatile and transforming environment (Weber & Tarba, 2014). How leaders prepare the organization for the multitude of changes will rely on the

management of the current and future organizational human capital, response to business trends, and strategic initiatives (De Vos & Dries, 2013).

Employee brand and succession planning. Employees are the brand of the organization, and the ineffective management and development of employees can tarnish an organization's brand (Taj, 2016). Talent management inclusive of recruitment and retention paralleled with career development and succession planning are initiatives that can have positive metrics (Titzer, Shirey, & Hauk, 2014). De Vos and Dries (2013) posited leaders should account for the worth and uniqueness of employees in the context of competitive advantage and employee capabilities gain because the value of human capital in collaboration with cost allocation is a part of future planning preparation. By the year 2020, the failure to have succession planning will amount to organizational financial costs of \$21 billion on human resource expenditures (Marbury & Mayer, 2013). The human resource (HR) leader is no longer the gatekeeper of talent, but this task rests on the daily management and leadership of organizational leaders (Rothwell, 2005). The understanding of succession planning strategies that will continue to motivate, support, and develop others into future leaders and decrease leadership shortages with the retention of knowledge and experience are necessary for a dynamic environment (De Vos & Dries, 2013; Titzer et al., 2013). Succession planning as a long-term strategy can serve as a driver for competitive advantage and sustainability (Marbury & Mayer, 2013).

Healthcare leaders should consider the many current and future trends and barriers in tandem to deal with the expansion of healthcare availability, technology enhancements, globalization, funding decreases, and employee attrition as business

challenges (Titzer et al., 2014). Sustainability requires healthcare leaders to develop visions that contemplate and incorporate the various changes, threats, and opportunities (Taj, 2016). The development of strategies without the consideration of employee capabilities may lead to financial losses for organizations (Marbury & Mayer, 2013). A leader with an understanding of the stakeholder ramification can develop strategies that incorporate stakeholder requirements (Rothwell, 2005).

A leader can promote diversity and inclusion in search for the candidate who has the capabilities to enhance the future of the organization with succession planning strategies (Stock et al., 2014). Lyons, Ng, and Schweitzer (2014) emphasized employee development requires involvement with a promotion of diversity and inclusion as outcomes of talent management. Succession planning is a component that entails strategic implementation of talent management in multiple disciplines such as engineering (Clark, 2015), healthcare (Desir, 2014), academic leadership (Klein & Salk, 2013), and technology (Johnson, 2014). The ability for leaders to develop talent has to change from the structure of yesterday to include future endeavors (Lyons et al., 2014). Toterhi and Recardo (2013) questioned the response of operational and HR leaders in the management of people and capabilities. Tierney (2013) challenged leaders to consider external hires for succession planning. The strategy of succession planning to secure the future of organizations is the perplexity leaders must contemplate, as internal or external candidates for succession planning are only one concept of the strategic initiative of succession management (Lyons et al., 2014; Stock et al., 2014).

Strategies and succession planning. Nasab and Sadeghi (2014) recommended

leaders use succession planning as a strategy of knowledge management because the attainment of transferrable knowledge is of value to companies. Jack Welch led the succession planning strategy of General Electric (GE) leadership as an investment and development of potential and current human capital in response to altering the GE culture, in order, to survive the multiple business and industry changes (Onatolu, 2013). New knowledge is imperative to permit and encourage innovation and paralleled with succession planning could enhance and promote knowledge transference (Nasab & Sadeghi, 2014). Ismail, Adnan, and Bakar (2014) conducted a cross-sectional quantitative study of participants in a Malaysia higher learning institution linking workplace career programs to perceived career development as a predictor of job satisfaction. The combined factors of motivation and knowledge transference of experience and tenured staff can augment the development of others through succession management programs (Chen & Bozeman, 2013; Titzer & Shirey, 2013).

Gelens, Hofmans, Dries, and Pepermans (2014) concluded in a study of Belgium financial employees, considered high potentials, relied on the persuasive perceptions of others related to the high potential employee to enhance job satisfaction. The leader's desire to develop others can occur through the characteristics of commitment and motivation (Chen & Bozeman, 2013). Some leaders are aware of the necessity and value of succession planning as noted in 225 health departments with succession plans attributed a concern for attrition and developed succession plans as a strategy of retention (Darnell & Campbell, 2015). Leaders and employees may have motivation differences resulting in positive outcomes for the participants and the organization yielding the future

of an organization human capital brand (Ariss, Cascio, & Paauwe, 2014).

Succession planning is a historical strategy of the business world but is not a consistent capability enhancement approach for all industries (Amato, 2013). Titzer and Shirey (2013) reported a multitude of organizational leaders lacked succession plans as a strategic component of human resource management. Some leaders contribute the strain of resources and time commitments as reasons for the lack of succession planning (Trepanier & Crenshaw, 2013). Manning, A. Jones, Jones, and Fernandez (2015) proclaimed with the impending nurse leader shortage that managers should prepare now by using succession planning to develop and recruit nurse leaders. The healthcare system is in a labor war among healthcare organizations in lieu of a shortage of many critical professional skilled healthcare workers in addition to limited reimbursements and elevated healthcare costs (Titzer & Shirey, 2013). Trepanier and Crenshaw (2013) concerned with the outcome of the retirement of nursing leaders effect on hospitals advocated for the need of succession planning for future nurse leaders signifying a successful succession management plan will require dedicated time and resources for it to be an effective strategy.

Consumers of healthcare have an expectation of quality and safe care from healthcare providers (Chow, 2013). The healthcare sector warrants nurse leaders to tackle the various healthcare changes, care of the aging population, and maintenance of quality patient care (Trepanier & Crenshaw, 2013). Manning et al. (2015) highlighted nurse leaders are seeking opportunities but require the development of leadership skills and knowledge to obtain success. Current healthcare leaders have to invest in the future of

leaders with strategies for mentorship, coaching, and a functional succession management plan (Trepanier & Crenshaw, 2013). Oladapo (2014) asserted leaders should invest in current employees and build capabilities for the future that will enhance competitiveness and not rely on the *right fit* employee to encounter their presence. Succession planning does require time and resources but could lead to benefits of retained tacit knowledge, experienced workers, increased organizational performance, enhanced employee retention, and an engaged workforce (Trepanier & Crenshaw, 2013). The right fit has to encompass an assessment of the whole person, one who has the skills, knowledge, experience, motivation levels, and character that align with the mission of the organization (Crandell, 2015). Stakeholders have a responsibility to validate the benefits of succession planning strategies for the internal human capital and the organization (Rothwell, 2005; Trepanier & Crenshaw, 2013). Communities are recipients of care and resourced healthcare professionals and leaders can increase the assurance of quality safe care.

Gray (2014) recognized the components of succession planning as (a) successor identification (b) job competencies (c) leverage of capabilities (d) potential talent, and (e) talent development. Titzer and Shirey (2013) believed Gray was correct with the indication of how to strategize for succession by (a) successor identification (b) successor development (c) and evaluation. Some organizational leaders have a desire to develop others but allow current conditions and problems to dictate and disrupt prospective plans that involve succession planning (Amato, 2013). Leaders should have an understanding of the purpose of succession planning not as a replacement process but one of

performance improvement, development, enhance communication, and mission driven (Rothwell, 2005). Noyes, McNally, Tourville, and Robinson (2002) outlined the procedural aspects of succession planning as (a) written plans, (b) goal oriented, (c) accessible, (d) performance monitored, and (e) evaluated. Carriere et al. (2009) believed these elements are valid with the addition of (a) mentorship, (b) coaching, (c) identification of key positions, and (d) resource identification. Formal mentorship programs promote accountability for stakeholders, who can assist with the allocation of resources (Corner, 2014). House (1971) theorized how leaders could encourage or discourage the development, guidance, goal attainment, and motivation of the employee augmenting the alignment with previously mentioned strategies and concepts of Carriere et al. (2009); Gray (2014); Noyes et al. (2002); & Titzer & Shirey (2013).

The management of employees with HR principles to enhance competitive advantage in tandem of the incorporation of fiduciary responsibilities can be a paradigm shift (Caleb, 2015). Ariss et al. (2014) expressed the success of global talent management will rely on the perspectives of strategic alignment, internal consistency, global and local needs balance, organizational culture, branding with diversity and inclusion, and leadership involvement. Succession planning an ignored strategic method without an inclusive stance in most organizations limits diversity and innovation (Marbury, 2012). The strategic component of succession planning is the alignment with strategic goals and link to HR principles of retention and development (Chlebikova, Misankova, & Kramarova, 2015; Pandey & Sharma, 2014). The hospital manager's effort to include succession planning as a long-term strategy requires organizational commitment and will

necessitate the collaborative efforts of mentors, decision-making leaders, employees, and external stakeholders (Rothwell, 2005; Titzer & Shirey, 2013). Succession planning will entail time from participants, financial obligations, transparency, communication, and continuous evaluation (Oladapo, 2014).

The use of strategies to overcome the nurse leader deficit is one that leaders continue to ponder (Titzer & Shirey, 2013). Caleb (2015) formulated from self-experiences as a pharmaceutical HR leader the variables of succession planning and noted the organizational culture role defines the choice and use of internal or external succession planning. There is a need for organizations to plan for the retention of talent to remain competitive in a global market (Pandey & Sharma, 2014). Dill, Chuang, and Morgan (2014) proposed the development and succession of employees is a winning strategy for organizational leaders. Caleb (2015) proposed the identification of key points to consider for effective succession are (a) monthly development meetings, (b) organizational development practices, and (c) frequent succession planning reviews. An assessment with the identification of HR gaps using a capability approach can account for talent, global perspective, and ability to develop succession strategies (Camacho, 2015; Downs & Swailes, 2013). Operational leaders need HR leaders as effective strategic partners in the management of talent to augment succession planning strategies (Caleb, 2015). Collings (2014) indicated the coexistence of the goals of people and the organization should have a form of mutuality. Hospital managers realize the demand for highly skilled nurse leaders is not continuously or readily available to provide services for the healthcare consumer (Titzer et al., 2013).

Succession planning transparency. The knowledge of potential nurse leaders for transitional positions can enhance the motivation and engagement of the employee (Luigi, Oana, Mihai, & Simona, 2013; Titzer & Shirey, 2013). Transparency relates to being open, truthful, and demands accountability (Liedorp, Mosch, van der Crujisen, & de Haan, 2013). The ability to have transparency related to succession planning allows individuals within the organization to gain knowledge of the strategies of the organization (Rothwell, 2011). Mishra, Boynton, and Mishra (2014) found that employees' trust increased with the honesty of leaders. Hernandez, Long, and Sitkin (2014) suggested the employee based the trust relationship on the perceived ability of the leader. Hospital managers can promote transparency with employees with the provision of information promptly to employees (Titzer et al., 2013). There are instances when leaders may withhold information for the good of the organization (Liedorp et al., 2013) and invoke strategic management practices of transparency (Granados & Gupta, 2013). The use of transparency may require additional initiatives inclusive of the preparation of individuals with the use of mentoring and coaching can provide the employee with the sense of investment in the advancement of career, knowledge, and experience (Luigi et al., 2013; Titzer & Shirey, 2013). The ability to learn from experts in the field may serve as an honor and enhance the commitment stance of the stakeholders.

Mentoring. As outlined by Carriere et al. (2009) mentorship is key to succession planning and the use of a mentorship relationship as part of succession planning is an important concept to the success of the chosen person for development. Corner (2014) beckoned leaders to utilize the disregarded strategy of mentorship to develop future

leaders and suggested the use of formal mentorship programs enhances the accountability of leaders and mentors for the success of the program. Sampson et al. (2014) agreed with Corner about the underutilization of mentorship and promoted the use of this strategy for career development. Mentors can help to develop others on a mutual level of leader/subordinate (Roberts, Schwartzstein, & Weinberger, 2014). Carriere et al. (2009) included mentorship as one of the vital strategies in the outline of succession planning. Green and Jackson (2014) challenged the positive aspects of mentorship and proposed there are negative effects of the unethical behaviors of some mentors on the mentee and organization. Muir (2014) proposed mentorship prepared new leaders for leadership roles. The potential benefits of mentoring can become a barrier to the mentee if the mentor withholds knowledge, experience, and information for the success of the mentee and organization (Green & Jackson, 2014). Mentor characteristics, behaviors, and attitudes are as important as the skills, knowledge, and experience (Corner, 2014).

Muir (2014) used a qualitative case study to understand the use of mentorship in a Midwest metropolitan area Roman Catholic diocese and suggested mentorship could help mentees to connect better with self and promote self-identity for leadership development. Corner (2014) expounded on the use of mentorship formally versus informally. The use of mentorship has a positive effect on the professional grooming and preparing of individuals for roles that are new and challenging (Muir, 2014). The accountability enhancement occurs with a formal mentorship program, and organizational leaders have to acknowledge their stakeholder ownership in the opportunity to have a successful mentorship program (Corner, 2014). The role of the leader is important in succession

management and organizational leaders need to understand how as a leader one can affect people, organizations, and communities (Trepanier & Crenshaw, 2013).

Coaching. The opportunities that exist for healthcare leaders to utilize the potential of nurse leader capabilities can help to alleviate some barriers related to costs of providing care, regulatory compliance, and future strategies (Titzer et al., 2014). Darvish and Temelie (2014) promoted the use of coaching as one of the processes of succession planning in addition to mentoring. Fibuch and Van Way (2012) agreed coaching is imperative to the achievement of a succession planning program. Walston (2014) hypothesized in a study of chief executive officers (CEO) the organizational environment can affect the use and availability of coaching and with an expansive span of control leaders are less likely to use coaching because of the coaching time and effort commitment. Carriere et al. (2009) found no reason to oppose the use of coaching as a process of succession planning. McComb (2013) concurred and urged leaders to value employees with the strategic collaboration of development and coaching. The daily operations may deter the use of coaching as a strategy of development (Walston, 2014). Mintz-Binder (2013) suggested the efforts of nurse leadership development and shortages are a national concern from organizational leaders such as the American Organization of Nurse Executives (AONE) and Robert Wood Johnson Foundation (RWJF) who are developing strategies to assist in the forward succession of future nurse leaders. Some hospital managers continue to struggle with the nurse leader shortage and preparation of new and future nurse leaders (Titzer & Shirey, 2013).

Additional theories to support succession planning are human capital theory, signaling theory, and stakeholder theory. To have a clearer understanding of succession planning from the perspective of a leader or employee the exploration of these theories are part of the literature review. Malagon-Maldonado (2014) suggested the mind of the researcher seeks clarity of the unknown with the use of theory. Scully (2014) posited the investment in nurses as human capital, the potential development of a nurse based on the future capabilities assessment, and the need for stakeholders' support warrants the investigation of these additional theories.

Conceptualization of Supporting Theories

The following theories of human capital, signaling, and stakeholders have components that involve talent management, career advancement, and leadership involvement. Using the theory of human capital, signaling, and stakeholder individually is an expectancy of failure to answer the research question: What succession planning strategies do some hospital managers use to reduce the shortage of nurse leaders? Scully (2014) focused on the stakeholder theory as an individual's perspective of goal attainment. The organization's internal and external stakeholders have individual needs in comparison to succession planning which is a dual benefit for incumbent leaders and the organization (Brower & Mahajan, 2013; Titzer et al., 2013).

De Vos and Dries (2013) described human capital theory, as addressing employees' capabilities for organizations to obtain a competitive advantage. Harris, Pattie, and McMahan (2015) concluded the advantage of human capital is typically one-sided from the perspective of the individual or the organization. However, leaders use

succession planning to incorporate human capital, signaling, and stakeholders as a collaborative initiative to engage sponsors and manage talent strategically (Anca-Letitia, 2013). Clark and Martorell (2014) noted employees have an awareness and ownership of capabilities using these dynamic attributes as an advantage for career progression. The concepts of human capital, stakeholder, and signaling adjunctively support succession planning.

Human Capital Theory

The relevance of human capital theory is a focus on the skills, knowledge, and abilities of individuals (De Vos & Dries, 2013). Harris et al. (2015) professed opportunities of career growth and the attainment of education, experience, and skills are an advantage of individuals and leaders to leverage human capital increases with a pool of available candidates who meet the criteria to advance the bench strength and productivity of the organization. Alter (2013) and Trepanier and Crenshaw (2013) found it necessary to prepare career-minded individuals for advancement with information of opportunities through interaction with other individuals within the company. Individual succession planning should align with the organizational strategy and mission (Choi Sang & Perumal, 2014). Ismail et al. (2014) found organizations who invested in employee career advancement and succession planning experienced favorable employee, financial, and productivity outcomes.

Employees define the brand of the organization, and the management of barriers that could alter the success of employees is the pendulum leaders can control using strategic implications of upward management of employees as a branding and

differentiation tool that can separate organizations (Baluch, Salge, & Piening, 2013; Trickel, 2015). Luigi et al. (2013) explored the strategy of promotion and recruitment from within organizations and discussed how the employee represents the organization and displays the mission through work performance. Nejatian and Zarei (2013) expressed leaders have to account for the success factors of people, processes, and strategies to obtain strategic agility. Employees are the brand of the organization and internal marketing as a strategy can alter the motivation and engagement of staff (Luigi et al., 2013). Early interventions can minimize organizational financial losses, decreased productivity, and employee vacancy rates; the key is to define methods to align strategic goals with succession planning (Trickel, 2015).

The optimal strategy for managing and developing talent displays a strategic and social responsible variable to strive for sustainability (Anca-Letitia, 2013). Rowold (2014) promoted the path-goal theory for employee development, and in a quantitative study, a leader with regards for the employee and can lead in the midst of change and turmoil is more suitable to facilitate the daily duties and challenges that organizations and employees encounter in the continuous fluctuating business environment. The ability to manage the business environment with a directive, participative, supportive, and barrier deterrent can motivate employees and sustain organizations (Evans, 1970; House, 1971). Rowold (2014) suggested in changing times an involved approach with expertise and guidance is a positive trait of leaders. The leader's acknowledgment of the need to develop others, promote upward movement with identified talent, and remove internal or external barriers for success is valid for employee development (Trickel, 2015). The

identification of a potential successor candidate has to follow with the willingness of the replacement to participate in the development of new skills, knowledge, and abilities (Evans, 1970).

Signaling Theory

Harris et al. (2015) proposed individuals have career goals and develop plans to become successful within a professional field and will signify through training, education, and enhanced capabilities their value to organizations. Clark and Martorell (2014) speculated researchers capitalized on the two theories of signaling and human capital. Employees are internal stakeholders and desire meaningful guidance in career growth and opportunities (Harris et al., 2015). The employee has an awareness of the value of the capabilities within his or her control and seeks opportunities that acknowledge this value and employee branding can highlight organizational sustainability (Clark & Martorell, 2014). Most organization leaders search for individuals for new career opportunities who desire to advance professionally as human capital is an investment for organizational leaders (Harris et al., 2015). Leaders can establish career paths with clarity to understand the career intentions of employees to enhance succession transparency (Granados & Gupta, 2013; Rothwell, 2005). The leadership responsibility and accountability of hospital managers in succession planning can have an investment in the benefits and outcome of the organization (Titzer et al., 2014).

Stakeholder Theory

The acknowledgment and opportunity of ownership for moving individuals and organizations forward encompass internal and external stakeholders. Brower and

Mahajan (2013) believed organizational leaders are accountable to all stakeholders and the development of employees should align with the mission of the organization and stakeholders should have an understanding of the connection of this strategy to the mission. Calareso (2013) proposed succession planning intertwined with the advancement of individuals with preparation and networking among organizational stakeholders. Corner (2014) advanced the use of mentorship as a succession planning strategy to connect stakeholders. Stakeholders expect organizational leaders to make decisions that benefit the organization (Lewis et al., 2014; Poblador, 2014). The connection of potential future leaders with internal and external stakeholders is paramount to the future of an organization (Corner, 2014). Abdallah and Langley (2014) argued the desire to appease the stakeholder could dismantle a strategy. The commonality of stakeholders and organizational strategies should remain clear and distinct establishing and maintaining sustainability (Bridoux & Stoelhorst, 2014; Doh & Quigley, 2014). Titzer et al. (2013) found hospital managers have competing priorities in parallel to stakeholder concerns and succession planning may not be a precedence in the presence of daily decision-making.

Healthcare Industry

Healthcare industry leaders have struggled to define methods to remain competitive and meet regulatory compliance, obtain customer satisfaction, provide quality care, collaborate financial with legal standards, and maintain strategic initiatives (Zuckerman, 2014). Anjum and Bolon (2013) and Davis, Davis, and Schmelzle (2013) highlighted healthcare leaders face on the rise healthcare challenges with comorbid

patients, legislative initiatives, and reimbursement costs. The aging workforce geared towards retirement will take skills out of industries such as healthcare that are responsible for the effective daily operations of service organizations (Levanon, Cheng, & Pattera, 2014). There are multiple entities that comprise the healthcare industry such as long-term care facilities, academia, hospitals, pharmaceutical companies, health insurance, and durable medical equipment businesses to name a few.

The hospital or acute care setting consists of various professions, skill based workers, and the management of diverse employees can prove to be a challenge (Zuckerman, 2014). The strategic and supportive nature of leadership inclusive of HR leaders can decrease some of the factorial challenges, and healthcare leaders understand the competitor is looking for any availability to gain healthcare consumers (Block, 2013; Caleb, 2015). The need exists to have nurse leaders who have the preparation to deal with the fluctuations and challenges of the healthcare industry (Titzer & Shirey, 2013). The healthcare system exists in a continuously changing business environment, and the ability to remain a strategically agile business is dependent on experienced and knowledgeable leaders (Titzer et al., 2014).

The Affordable Care Act served as a catalyst for the healthcare industry to reconsider value chain activities (Engler et al., 2013). Zuckerman (2014) asserted healthcare leaders have many challenges but still require effectiveness and efficiency in the capacity of a business to formulate strategies to serve internal and external customers. The use of bundled payments to shift the risk of costs from insurance companies, Medicaid/Medicare, and healthcare organizations to the use of payment methods based

on perceived value of care with valued based purchasing (VBP) has a role in the healthcare of today (Helmchen, Encinosa, Chernew, & Hirth, 2013; Rice, 2015).

Technology has a positive and negative factor on the healthcare environment. Consumers want access to personal healthcare information and prolonged life with new and advanced technologies (Chow, 2013; Shah, Anjum, & Shoaib, 2014). Hospital leaders are in search of cost reduction strategies with the capability to continue to provide services to healthcare consumers (Block, 2013). Nurse leaders can be the force to transfer the strategic components into the realities of business with a continued focus on quality care, safe practices, and patient satisfaction as healthcare trends can lead to financial strains on some healthcare organizations (Brunnson, 2015; Titzer et al., 2013).

Titzer and Shirey (2013) proposed the use of succession planning strategies could promote the advancement of new nurse leaders and reduce the repetition of nurse leader turnover. Dotson, Dave, Cazier, and McLeod (2013) and Mintz-Binder (2013) agreed a shortage of nurse leaders is a reality with an increase of 26% of new nurses entering the workforce, but the retention of nurse leaders is another issue that will mitigate the shortage. Lyons et al. (2014) noted strategies of HR management require accustoming the needs of the different generations, and the generational gaps of employees in the workforce can promote diversity and innovation. The promotion and development of nurses to decrease the nurse leader vacancy of hospitals warrants the investment in future nurse leaders (Mintz-Binder, 2013).

Accounting for the vast generations of nurses incorporates diversity and promotes innovation in the realm of nursing and nurse leadership (Dyess et al., 2016).

Corner (2014) urged leaders to consider the mentorship of new leaders to advance the practice and prepare for the vacancy due to the retirement of experienced nurse leaders. The financial aspects to hire and train new nurse leaders can constrain the financial position of an organization, but the burden is to lessen the financial obligation of healthcare institutions and invest in the future of nurse leadership capital (Capuano, 2013). The healthcare industry has to consider the various expenditures that amount on the balance sheet and strategically decipher the benefits versus the risks (Block, 2013).

The use of disruptive innovation is a strategy to realign value chain activities to provide profitability and sustainability (Block, 2013). The value chain activities of providing patient care such as procedures, medication administration, admission processes, discharge processes, and transportation include diverse members of the healthcare team. Healthcare encompasses different point of entries within the healthcare system that rely on knowledgeable and experienced nurse leaders to manage processes and procedures expediently, appropriately, and safely (Hussain et al., 2012). Nurse leaders provide leadership and structure to healthcare settings to monitor and evaluate the effectiveness of safety, customer service, and quality care of patients, a business acumen is just as important (Mintz-Binder, 2013). The healthcare industry may continue to lose valuable knowledge and experience a prolonged shortage of nurse leaders with the lack of preparation for incumbent leaders (Hussain et al., 2012).

Performance Improvement

Mitchell et al. (2013) proposed the advocacy of strategies to enhance human resource practices and development could substantiate organizational performance.

Leaders should understand the use of strategy in a competitive and innovative business environment to enhance organizational performance and a quicker return on investment (ROI) (Neirotti, 2013). The continuous process of reassessment of the strategy is of importance, as the planning and implementation phases (Beinker, Ivanov, Mainik, & Ursachi, 2014). Lack of planning can cause confusion for internal stakeholders and frustration for external stakeholders or shareholders (Neirotti, 2013).

Stakeholders have an expectancy from leaders on the performance of the organization (Bridoux & Stoelhorst, 2014). The investment in succession planning produces a long-term ROI (Neirotti, 2013). The shortage of nursing leaders can affect an organization directly and indirectly with patient outcomes, vacancy rates, and management of staff (Waxman & Delucas, 2014). Matanda and Ndubisi (2013) advised leaders to heed the warnings of the needs of employee advancement and invest in developmental programs. The continued lack of response to the retirement of Baby Boomer nurse leaders will continue to widen the gap of the vacancy rate of nurse leaders in hospitals and healthcare systems (Titzer et al., 2013).

Employee Development

Caleb (2015) noted the organizational leader would have to invest time and resources into strategic planning and employee development as the process is ongoing and succession planning support would need to become a part of the organizational culture. Succession planning transparency is a mechanism to reduce the leadership vacancies with building bench strength with nurse leaders willing to take on a leadership role (Titzer et al., 2013). Waxman and Delucas (2014) proposed leadership shortage

mitigation starts with current leader investment in new leaders. Leaders' investment in the employee development would transcend to the overall needs and strategies of the organization and promote leader stakeholder accountability (Caleb, 2015). The strategy of succession planning is reflective of the acknowledgment that business trends validate the need for vigorous capabilities (Abdallah & Langley, 2014; Lewis et al., 2014). The employees with capabilities that are adaptable to the changing and challenging business environment, customer, and consumer will help organizations maintain sustainability (Wolf, 2013).

Communication Enhancement

The method to develop employees requires a continuous dialogue with employees about capabilities, skills, and knowledge, in addition to, leader communication to employees about career development and transitions into other roles (Trepanier & Crenshaw, 2013). Mensik and Kennedy (2015) reiterated the need for leaders to communicate future development plans for a successor's engagement in succession management. An employee has to understand the availability of resources and developmental programs to prepare for a transition into different roles (Trepanier & Crenshaw, 2013).

New to practice leaders also have to learn how to communicate effectively (Darvish & Temelie, 2014). Waxman and Delucas (2014) identified communication as a priority skill for leaders to develop. Darvish and Temelie (2014) proposed communication skills to understand how to function in a business environment and to relay information to others is a capability that new leaders may not have as part of the

leadership acumen. The development of communication skills aids new leaders to effectively write and discuss visions and make decisions as part of the leadership role (Waxman & Delucas, 2014).

Organization Strategy

The strategical map of how to incorporate talent management as an initiative may be a part of an organization's strategic plan and the need to make business changes in response to the trends and opportunities that exist require processing of information of internal and external barriers and trends (Darvish & Temelie, 2014). Leaders may have knowledge of strategic development, but the important part of the process is the implementation (Zuckerman, 2014). Cervone (2014) outlined the reasons for strategic planning failure as (a) organizational culture, (b) leadership failure, (c) poor execution, (d) lack of integration of other strategies, and (e) poor metrics/goals. Titzer et al. (2013) proposed organizational leaders desire to understand the benefits of a succession planning strategy from a financial and human resource perspective. Leadership responsibility and response to the structure and process of a succession plan align organizational goal to mitigate the risk of unsuccessful strategic plans (Cervone, 2014).

Organizational needs analysis. The strategic plan of an organization is a tool to help organizational leaders determine present and future needs (Zuckerman, 2014). Shen (2011) encouraged the use of an internal labor market as an assessment of capability gaps and promotion for future positions. Organizational leaders have the opportunity to match organizational needs with the capability development and succession planning of internal candidates (Luigi et al., 2013). Sheehan (2014) proposed specific human resource 'best

practices' of recruitment and retention affect company performance. The strategic alignment of a business should encompass costs and future endeavors (Zuckerman, 2014). Caleb (2015) suggested HR leaders have a role as effective strategic partners in the management of talent to augment succession planning strategies. The strategic implications of upward management of employees are a branding and differentiation tool that can separate organizations (Baluch et al., 2013). Future strategic plans can require new skills, knowledge, and abilities that current employees do not possess (Biswas & Suar, 2013). The strategic implementation of succession planning can serve as a solution to this concern (Dyess et al., 2016).

Capability leverage. Healthcare is a service industry and consumers of healthcare expect a service at the time of the encounter. Therefore, healthcare leaders have to transform strategies that help with cost reduction and maintain quality with customer focused care (Baluch et al., 2013). Dongen (2014) noted the benefits from using a cost to benefit analysis of employee development with capabilities that are critical for organizational effectiveness and functionality. Baluch et al. (2013) expressed the augmentation of profitability and cost decreases rely on human capital. Objective service quality does not always equate to the customer's service perceptions, and ineffective customer service can harm the brand of the company and cause the consumer to seek care or services at a competitor (Gijsenberg, Van Heerde, & Verhoef, 2015). The advantage of a talent pool of experienced and knowledgeable workers to care for consumers of healthcare and decrease the financial aspects of cyclical recruiting with retention strategies of succession planning can acculturate branding and employee engagement

(Baluch et al., 2013; Titzer & Shirey, 2013). A strategy operational leaders cannot afford to ignore is to understand and utilize the value of employees to enhance the company brand and employee retention (Biswas & Suar, 2013; Matanda, & Ndubisi, 2013).

Nica (2013) posited engaged employees are critical to organizational performance and patient satisfaction. The survival of an organization is reliant upon the competitive advantage over competitors, and this can occur through the management of human resources (Anca-Ioana, 2013). The management of human capital is a key responsibility of all leaders within organizations (Nica, 2013). Hawkes and Weathington (2014) proposed hiring for capabilities of competence rather than only skills as an organizational strategy to formulate competency based job descriptions to attract employees seeking flexibility and opportunities for career growth and employment stability.

The lack of strategies to promote career growth and succession planning to sustain human capital can increase organizations' human resource costs (Titzer et al., 2013). Organizational leaders have to identify ways to cut costs to increase profits and human resources can be a large percentage of organizational budgets (Davis et al., 2013). Block (2013) and Sherrod and Holland (2013) informed leaders the care of patients should not be a minimization of cost and the cost of nurse replacements can amount to a substantial amount when it is a chronic activity. Hospital leaders must recognize the absence of nursing leadership increases costs, decreases quality initiatives, decreases productivity, and reduces safety measures (Holland, 2015). The healthcare industry receives payment based on quality versus quantity (Block, 2013). The need to retain an experienced and motivated nursing workforce should be a continuous focus for healthcare leaders and

strategic planners (Dyess et al., 2016). Succession planning structures can benefit individual employees, achieve organizational plans, and promote a competitive advantage. Remaining sustainable in the industry requires methods to engage employees who make the brand of the organization (Biswas & Suar, 2013; Corner, 2014).

Succession planning strategies for linking the employee to the organization can enhance the financial outcomes for organizations (Dyess et al., 2016).

Nurse Leader Shortages

The retirement of experienced and knowledgeable nurses along with the continued shortage of nurse leaders is a concern for communities, the healthcare industry, and healthcare leaders (Sherman, Patterson, Avitable, & Dahle, 2014). The ill-prepared hospitals will suffer the most, in addition to the serviced communities, as retiring nurses will take not only experience but also knowledge away from the service areas of healthcare (Titzer et al., 2013). The ability to capture these essential components will depend on the use of strategies of knowledge transference to new and inexperienced incumbents is vital for leadership vacancy minimization, but the urgency to current healthcare leaders is unforeseen (Gothard & Austin, 2013; Holland, 2015; Hussain et al., 2012). The AHA (2015) suggested healthcare leaders have to enact new and innovative strategies now to oppose the future concerns of patient care and nurse shortages. The collaborative act of succession planning and organizational strategies may help with the needed changes for organizations (Titzer & Shirey, 2013). Patients, communities, hospitals, and the healthcare industry can benefit from present strategies that will

transcend to future outcomes. The nursing shortage in some areas is impending and requires attention (AHA, 2015).

Experienced healthcare workers and leaders are in high demand to care for the escalating volume of patients because of an increase of individuals' access to the healthcare system (Denker et al., 2015; Zuckerman, 2014). Healthcare leaders acknowledge the labor war to obtain skilled professionals is not relenting in the realm of other business and healthcare challenges (Titzer & Shirey, 2013). Hancock, Allen, Bosco, McDaniel, and Pierce (2013) implored that employee labor costs can differ and increase due to knowledge and skills as well as location. The impending nurse leader shortage will not only affect regional areas but also extend globally, and leaders are in a dilemma of how to plan to meet the needs of consumers and customers (Titzer et al., 2013). Healthcare leaders management of finances and resources to prepare future nurse leaders maintenance of responsibilities within multiple settings expounding across the industries of informational technology, pharmaceutical, health insurance, law, governmental, travel, medical equipment supply, academia, and medical applications, is imperative (Christensen et al., 2014; Denker et al., 2015).

There are other healthcare professions in which it is difficult to recruit skills facing similar challenges of shortages, but nursing is the largest workforce in healthcare and is the primary connector of care from other healthcare professionals to the patient (Titzer et al., 2013). Montgomery and Oladapo (2014) proposed human capital is a cost in the value chain that is controllable. The replacement cost of one nurse is 125% of the nurse's annual salary (Hansen, 2014). Lartey, Cummings, and Profetto-McGrath (2014)

found the loss of nurses has an effect on patient care and outcomes, organizational financial costs attributed to loss of productivity, and the overall satisfaction of nurses. Nurse leaders considered as the binding factor of any nursing department, and the quality of patient care gatekeeper require the proper skills, knowledge, and refined abilities to be a successful leader (Manning et al., 2015; Rishel, 2013). The nurse leader requires qualities such as fluency in business acumen; conflict management, human resource management, and effective communication are a few skills, knowledge, and abilities of the requirements of nurse leadership (Scully, 2014; Titzer et al., 2013). Alter (2013) attested to the value of succession planning to enhance the business perspective and the human resource talent management.

Succession planning for nurse leaders requires an overhaul. Most nurse leaders acquire a position because there have been evaluations of effective and efficient patient care, employee engagement, and employee motivation (Titzer et al., 2014). This does not transfer into the ability to provide leadership or excel in other positions. A disservice to an employee can occur with exclusion to the appropriate training, education, tools, and knowledge to obtain success in a position (Manning et al., 2015). A lack of motivation for a new position will not amount to success in the presence of any amount of education or resources (Evans, 1970). The leader's use of criteria for successors and well-specified plans to minimize the failure of a successor is part of the strategic efforts of succession planning (Rothwell, 2011).

The application of strategies to minimize and mitigate the nursing shortage by preparing nurses to take on other roles within healthcare is the fiduciary responsibility of

tenured nurse leaders (Titzer et al., 2014). The unavailability of resources or stakeholder misconception from other organization leaders adds to the strain of this effort becoming a reality or effective (Rothwell, 2005). The largest healthcare workforce, nursing, requires stakeholder assistance and the nursing shortage upturn may be without sustainability (Titzer et al., 2013). The preparation of future nurses should begin now and not later as the retirement of the Baby Boomers will occur by 2020 leaving a shortage of many professions (Levanon et al., 2014; Titzer & Shirey, 2013). Many nurse leaders will retire with this group of identified Baby Boomers (Titzer et al., 2013). The shortage of nurse leaders can have detrimental effects on the organization and community (Lartey et al., 2014). The understatement of the successors receiving preparation can have an unrelenting effect on hospitals, communities, and the healthcare industry (Titzer et al., 2013).

Succession planning is not a new concept, but one sparingly utilized and succession planning in healthcare is at a minimum (Trepanier & Crenshaw, 2013). In the realization of the nursing workforce retirement, the momentum has recently surged to use succession planning to develop new nurse leaders (Titzer et al., 2014). Succession planning takes time and is a strategy that requires planning, implementation, and evaluation (Dyess et al., 2016). The selection of succession candidates warrants seriousness and accountability as this is an investment in the individual for the organization (Rothwell, 2005). Sherman et al. (2014) alluded to the concerns of the nurse shortages in specialty areas of nursing, primarily the perioperative services comprised of tenured and experienced nurses would not be able to recover quickly from a nursing

shortage and the retirement of nurses. Levanon et al. (2014) predicted the nursing shortage is a realism and has many facets within the healthcare industry. The concern of the level of leadership and experience required in nursing is a reason for leaders to strategize on meeting community needs by addressing succession management sooner rather than later because the ability to replace the expertise, experience, and knowledge comes with longevity (Sherman et al., 2014).

Conceptualizing Leadership and Succession Planning in the Healthcare Industry

Establishing a foundation of succession requires leaders to design, develop, and implement multiple components, and performance measures for sustainability (Block, 2013; Brower & Mahajan, 2013; Titzer et al., 2013). Stakeholder and leadership acknowledgment of the vital aspect of succession planning for the future of the organization is primary (Titzer & Shirey, 2013). The strategies of mentorship and coaching can have a beneficial effect on the outcomes of succession planning (Carriere et al., 2009). Granados and Gupta (2013) concluded that the provision of transparency of initiatives for new and proposed leaders could promote trust and enhance the employee brand of the organization. Strategic planning as an informative and interactive map of the mission of the organization can serve as a tool for succession management and leaders have to understand their role as strategic planners and stakeholders in succession planning (Trepanier & Crenshaw, 2013). Hospital managers require an understanding of how they can strategize to highlight employee capabilities for current and future business plans to obtain and maintain sustainability (Trepanier & Crenshaw, 2013). Leadership

skills, knowledge, behaviors, and attitudes can devise or augment the use of strategic planning (Uhl-Bien et al., 2014).

The lack of knowledge of understanding the purpose of succession planning in relationship to the mission of the organization can be a waste of resources, time, and increase nurse leader vacancies (Trepanier & Crenshaw, 2013). The healthcare industry has many challenges, and healthcare leaders have a task to manage budgets within a safe, patient focused, and quality driven organization (Block, 2013). The largest healthcare workforce, nurse leaders, can serve as a driver for the pendulum swing of healthcare (Titzer & Shirey, 2013). The lack of proper acknowledgment as valuable human resources the nurse leader profession may continue to dwindle for various reasons (Anca-Ioana, 2013). Succession planning strategies as a tool for advancement and building bench strength can enhance the vitality of healthcare organizations and communities (Trepanier & Crenshaw, 2013). Organizational leaders should consider the parallel work of nursing talent workforce strategies and the organizational strategic plan as an unprepared and shortage of workforce can destroy the organizational brand (Dyess et al., 2016).

Hospitals are businesses and provide a service to customers who have consumer healthcare expectations (Block, 2013). Strickler et al. (2016) asserted the effort to diminish the risk of the inability to care for patients has a profound effect on the mitigation of the nurse leadership shortages. Hospital managers' incorporation of succession management in conjunction with the organization mission can contest and respond to the needs of patients and the community now and in the future (AHA, 2015).

The business aspects of the hospital rely on the human capital effectiveness and efficiency. Succession planning is an ongoing process and requires dedication from all stakeholders, internally and externally (Titzer & Shirey, 2013).

Transition

Section 1 contains the background, nature of the study, central research question, conceptual framework, and significance of the study. Section 1's purpose was to establish the foundation of the study with the review of past and present literature on succession planning. The goal for this study was to explore the succession planning strategies that some hospital managers used to reduce the shortage of nurse leaders within the healthcare industry. The findings from the literature review demonstrated that to achieve this goal leaders' comprehension of the strategic relevance, and support of, succession planning for organizations' sustainability is necessary. Leaders' roles in leading and engaging the workforce, and succession planning initiatives are discussed in this section. Section 2 provides a detailed description of the methods and key design elements of the study. Research is a process, and the process steps for the study required understanding the role of the researcher, study method, design, participants, data collection and analysis, ethical assurances, and assuring the study's reliability and validity.

Section 2: The Project

Identifying and exploring the succession planning strategies leaders used to reduce nurse leader vacancies addressed the foundational purpose to study the phenomenon of succession planning. The explanation of my role as the researcher and participant of the study follows in this section. In this section, I discussed the supporting processes for selecting participants, research methodology, research design, and population sampling utilized to explore the foundation and formulation of succession planning strategies. I discussed the plan to ensure ethical treatment of participants. Furthermore, Section 2 included a description of the data collection, data organization, data analysis methods, and tools to assure my study's dependability, credibility, transferability, and confirmability.

Purpose Statement

The purpose of this qualitative multiple case study was to explore the succession planning strategies that some hospital managers used to reduce the shortage of nurse leaders. The targeted population included six hospital managers within two hospitals in Hampton Roads, Virginia, who had successfully implemented succession planning strategies to reduce nurse leader shortages. The implication for social change was leaders might benefit from an awareness of succession planning strategies and contribute to the welfare of society by improving continuity of healthcare services for patients and communities.

Role of the Researcher

My role for this study was to be the primary researcher and facilitate the participants' full engagement in the discussion of the phenomenon during the open-ended semistructured interviews. The role of a researcher is the principal data collector engaging in the research with observation of the participant, gathering data, and interpretation of the information (Houghton, Casey, Shaw, & Murphy, 2013; Yin, 2014). My research lens reflecting an interpretative worldview enhanced interaction with the research participants and explored the meaning of participants' responses. As a previous hospital manager, my participation in succession planning gave me a perspective of the phenomenon, and I was able to relate to the participants. I informed the participants of my previous role and experience to mitigate bias by using *reflexivity*. Fassinger and Morrow (2013) suggested reflexivity is a method to identify and acknowledge personal bias. I included participants with whom I had a nonworking relationship. I provided the participants with individual consent forms and an email to solicit participation before any data collection to provide and enhance the best interest of the participants and their role as voluntary with the minimization of risks associated with participation in the study. The Walden University IRB approval number for this project was 02-28-17-0522846. I sought access to the participants with a letter of cooperation to the hospital authority representative. My role was to establish a rapport with the participants, maintain a researcher and participant relationship that would not bias the outcome of the study, and adhered to the ethical standards set forth by the National Commission for the Protection of Human Subjects of Biomedical and Behavioral Research (1979) in the Belmont

protocol. The Belmont protocol is reflective of the need to protect human beings from undue and minimal harm, exploitation, and exposure. To follow the Belmont protocol I assured justice, beneficence, and respect for persons. The use of feedback from research colleagues can assist in assuring the maintenance of ethical standards (Yin, 2014). I allowed the research participants to provide information to expand my own knowledge base, eliminate my biases, and encompass the participant's information. Fay and Montague (2015) and Peredaryenko and Krauss (2013) explained a researcher should control his or her own bias with discussion of perceptions or beliefs related to the phenomenon. A researcher's personal biases are imperative to control as the principal data collector of the study (Berger, 2015; Yin, 2014). A researcher has to acknowledge differences of opinion on the topic to manage biases and establish rigor of the study (Fassinger & Morrow, 2013).

I used an interview protocol (Appendix A) as a tool to enhance my skills of data collection. An interview protocol application is a useful tool to manage the collection of data to address the research question, maintain an ethical position, gain participant perspective, and provide the participants with information regarding participation (De Ceunynck, Kusumastuti, Hannes, Janssens, & Wets, 2013; Yin, 2014). Alignment of the research problem and interview questions to gather data is relevant for study rigor (Yap & Webber, 2015). I used open-ended research questions to minimize biases and obtained relevant information from all the participants (Vohra, 2014). Yin (2014) noted that using multiple types of other data increases the rigor of the study. I used available nurse leader

succession planning program information records from each organization to accomplish study rigor.

Participants

One participant criterion was hospital managers with 5 years or more of leadership experience who had successfully used succession planning strategies to mitigate the shortage of nurse leaders. The participants met the additional criteria of (a) working in one of the two participating Hampton Roads, Virginia hospital, (b) had experience, knowledge, and successful use of succession planning strategies, and (c) had participated in succession planning as a leader. The establishment of the correct participants who have the knowledge and experience to answer the research question is important when considering a purposeful or convenience sample (Cleary, Horsfall, & Hayter, 2014; Suri, 2011; Vohra, 2014). The choice of participants can sway the outcome of the study. Van Wijk (2014) found using participants who can add to the body of knowledge to address the research question validates the study.

An email inviting participation (Appendix B) and a letter of cooperation (Appendix C) are the communication tools I used to obtain participant access provided by the hospital authority representative. I had a nonworking relationship with some of the participants. McDermid, Peters, Jackson, and Daly (2014) proposed establishing boundaries and roles when the researcher has a direct relationship with the participants. Participants known to the researcher and meet the criteria may still not be suitable for ethical or other reasons (Brewis, 2014). Doody and Noonan (2013) suggested the researcher develop a trusting relationship with the participants. The assurance of the

anonymity of the participants can establish a trusting relationship between the researcher and participant (Yin, 2014). Researchers must ask the questions that will enable the participants to advance the epistemology (Cleary et al., 2014). An ethical duty to validate all information in a study belongs to the researcher (Noble & Smith, 2015; Houghton et al., 2013). The researcher and participant individually and collectively can guide the outcome of the research.

I reviewed previous research (Cook, 2015; Samantara & Sharma, 2015; & Suri, 2011) to establish the set number of participants appropriate for a case study. Cleary et al. (2014) preferred to use the number of participants as a research barometer and data results reflective of data saturation. The sample size of participants varies for a quantitative versus a qualitative study based on the power requirements for quantitative studies, and for demonstrating data saturation for qualitative studies (Hyat, 2013). The sample size is important to obtain enough participants to answer the research question. The research of Smart Shoup (2015) and Crosby (2016) served as examples of the number of participants to include in this case study to obtain transferability and data saturation. Yin (2014) proposed a researcher's exploration with a multiple case study design should have two to nine cases to develop replication. Hyat (2013) agreed the sample size is an important aspect of the research to obtain data saturation. Suri (2011) suggested the research question in tandem with the research participants who add value to the research are the crux of data saturation. The participants with information about the data collection tools and consent before the collection of any information may increase the participant comfort level (Yap & Webber, 2015). All participants remained

anonymous with the use of an identification system of (P1 through P6) and (H1 or H2) for the participating hospitals. This identification system was a mechanism to promote confidentiality with (P) representing participant and the number signifying which participant known only to the researcher.

Research Method and Design

The alignment of the research question and method enables the researcher to determine the direction in which to inquire about the phenomenon (Baskarada, 2014). The outcome of the research study occurs with the researcher's development of the research question, choice of the research method, and selection of the research design (Hazzan & Nutov, 2014). The central research question of this study: What succession planning strategies do some hospital managers use to reduce the shortage of nurse leaders?

Research Method

I used a qualitative method for this study to identify and explore the strategies hospital managers used to implement succession planning strategies to reduce nurse leader shortages. Quantitative researchers use statistical analysis to examine relationships or differences among variables to define the outcomes of a study (Hoare & Hoe, 2013). Mukhopadhyay and Gupta (2014) noted, in comparison to quantitative researchers, qualitative researchers consider the context of the research information. Long (2014) claimed quantitative researchers conduct research externally by remaining as an *observer* of the research project. Qualitative researchers are inclusive by becoming a *participant* of the research (Long, 2014). Qualitative researchers rely on the personal aspects of

feelings, individualized concepts, and experiences of participants (Gizir, 2014; Hazzan & Nutov, 2014). Wolf (2015) warned researchers to be aware of and prepare to identify and approach individual biases with the use of a particular method. The interpretive concept may be overbearing for a qualitative researcher (Wolf, 2015). Madill (2015) argued both qualitative and quantitative methods use some measure of interpretation. Nonqualitative researchers tend to label qualitative studies as *interpretive*. The participants' opportunity to contribute openly with the use of open-ended questions and researchers using member checking can help address interpretive concerns.

Research Design

I chose a multiple case study design to answer the research question of hospital managers' use of succession planning strategies to reduce the shortage of nurse leaders. The qualitative researcher can choose among multiple designs to answer the research question(s): (a) ethnography, (b) case study, (c) grounded theory, (d) phenomenology, and (e) narrative (Hyett et al., 2014; Vesa & Vaara, 2014; Vohra, 2014; Wolgemuth, 2014). Cronin (2014) explained a researcher could extrapolate information from a case with a thorough exploration of the data. Abma and Stake (2014) and Yin (2014) agreed a researcher's exploration of a case study provides the stakeholders or audience with a tool to understand the underpinnings of a phenomenon and a deeper comprehension at the foundational level of the issue. The researcher can obtain proficiency of information with the use of a case study and multiple data collection tools (Hyett et al., 2014; Scully, Buttigieg, Fullard, Shaw, & Gregson, 2013). The questions *what*, *how*, and *why* receive elaborative answers with the use of a case study design (Yin, 2014). Stake (2013) offered

that using a multiple case study enables gathering more information about the phenomenon in a researcher's search of the commonality of the cases. Researchers use narrative designs to focus on chronologic experiences of participants and would not add value to explore succession planning strategies (Yin, 2014). Campbell-Reed and Scharen (2013) claimed ethnographers seek to explore cultural information of groups with a sense of community. My purpose for this study was the understanding of strategies of succession planning not reliant on a group commonality, but the diverse feedback and achieving data saturation of the phenomenon. The goal was not the establishment of new theories, as a grounded theory design would require (Yin, 2014). I sought not to understand the meanings of lived experiences of the participants about succession planning, but to obtain information on strategies for effective succession planning. My multiple case study design assisted in exploring how other leaders utilized strategies to reduce nursing leader shortages with succession planning strategies.

The ability to utilize multiple data collection tools with the use of a case study can enhance studies' rigor (Yin, 2014). A researcher can identify succession planning strategies from the targeted study population in a review of the presented cases (Abma & Stake, 2014). Using semistructured interviews with open-ended questions enables the participants to expound on succession planning. The ability to interview participants in a natural environment adds to the rigor of the study (Malagon-Maldonado, 2014). A researcher can promote comfort for the participant in familiar surroundings and observe the interaction of the participant for nonverbal information to add to the enrichment of the study (Yin, 2014). The participating organizations provided documents to add relevant

information for addressing the research question of the study. A case study researcher must achieve data saturation through identifying when no new knowledge emanates from the participants (Van Wijk, 2014). I used the participants' information from multiple semistructured interviews and member checking to ensure data saturation (Carlson, 2010; Cleary et al., 2014).

Population and Sampling

The population comprised of two hospitals within the Hampton Roads, Virginia area. The participants included six hospital managers experienced as a leader for 5-years or more, and successful succession planning experience for nurse leaders. The Hampton Roads area is diverse in the aspect of multigenerational because of the military, college, and retirement population. A researcher's use of a purposeful or convenience sample can save resources and defines the research question of *how what*, and *why* of the cases studied (Yin, 2014).

Suri (2011) suggested stakeholders might be the deciding factor on which type of sampling to use and the researcher has to consider what is best for the outcome of the research and participants. The goal of research is to minimize negative outcomes for the participants and maintain an ethical stance. The sampling of a varied group of participants can allow for data saturation and transferability (Yin, 2014). The identification of the research sample is important to gain an understanding of the phenomenon and eliminate participants who will not add value to the research (Cleary et al., 2014).

I explored hospital managers' use of succession planning strategies to reduce nurse leader shortages. The purposeful sample from two hospitals inclusive of three leaders from each organization was to establish data saturation. Vohra (2014) offered the sample size determination comes from the inquiry of the researcher. The effect size helps to determine the number of participants in a quantitative study, but qualitative researchers rely on the repeating themes and demonstrating no new knowledge from the participants (Cleary et al., 2014; Hyat, 2013). The original sample size and member checking are important to establish data saturation for the reliability and validity of findings of the study (Van Wijk, 2014). Including a sufficient number of participants, demonstrating repeating themes, and the absence of any new knowledge corroborate data saturation.

Ethical Research

I performed this study ethically applying what I learned from the National Institutes of Health (NIH) research ethics training. I abided by the principles established by the NIH, and my NIH certificate is located in Appendix D. The protection of human rights during research is the primary goal of the researcher. Brewis (2014) argued the need to refrain from causing undue harm to participants. Haahr, Norlyk, and Hall (2014) posited that researchers use reflexivity and reassure participants of the right to disengage from the research project. Assuring the anonymity of research participants minimizes the risk of undue harm to participants through maintaining confidentiality (Beskow, Check, & Ammarell, 2014).

The participants received an email with an explanation of the focus for the research, a copy of the open-ended interview questions, explaining the permission to

discontinue participation at any time during the research, and my contact information. Haahr et al. (2014) reminded researchers of the ethical ramifications of research and the right of participants to understand the aspects of the research and ability to disengage at any time. The attainment of individual consent before data collection protects the right of the individual(s) and maintains the integrity of the research (Beskow et al., 2014). The participants had access to individual interviews for review and correction. Walden University's IRB approval number for this study is 02-28-17-0522846. Participants received no form of payment and had an opportunity to decline participation at any time during the study. Confidentiality, of participants' remained secure at the time of data collection and throughout the study, inclusive of research publication. Brewis (2014) reflected on the challenge of including participants known to the researcher, and recommended such participants need assurance and maintenance of research confidentiality. The information collected remained secure with me for a period of 5 years.

Data Collection Instruments

I served as the primary data collection instrument. There are multiple data collection tools and most are dependent on the research method. Wright and Ogbuehi (2014) noted researchers' data collection methods could affect the outcome of studies. I used an interview protocol. An interview protocol can serve as a guide adding consistency and rigor to the data collection process and the adherence to the ethical stance of research (Yin, 2014). Carlson (2010) expounded on the benefits from using an interview protocol to conduct member checking for validation and trustworthiness of the

data. I used an interview protocol to keep alignment of the interviews with the research question and to assure the ethics of the research.

I used face-to-face audiotaped semistructured interviews as one source of my data collection for the qualitative multiple case study. I accounted for the nonverbal information during the interview as part of the validation of the verbal information presented by the participant. I considered any feedback by the participants relative to the interview questions as valuable to the topic of discussion. Malagon-Maldonado (2014) and Wright and Ogbuehi (2014) agreed data collection tools vary and the research participants may not react well to the data collection process and the researcher has to adjust accordingly. Yin (2014) encouraged the use of interviews and secondary sources such as archived records, and observations to collect data. Scully et al. (2013) affirmed organizational records as a good source of methodological triangulation for case study research. Organizational documents may not have updated information or be available to the researcher, so the researcher has to account for this as a potential limitation (Malagon-Maldonado, 2014).

Using open-ended questions may encourage and allow the participants to speak freely about the topic. Zuell and Scholz (2015) reported that open-ended questions promote ambiguity and some participants may not be willing to engage in this form of questioning. To gain insight on the strategies leaders use for succession planning, I used open-ended interview questions listed in Appendix E aligned with the research question to make the information valuable and allowed the participant to add to the research.

A researcher devotes multiple hours to data collection in a case study (Stake, 2013). As a method of time management, the researcher utilizes the interview protocol and semistructured interviews to gain significant data and participation from the participants (De Ceunynck et al., 2013). I gained information and knowledge from the literature review as to the historical data of succession planning and the evolvement of the process into the present state. My participation in the case study research provided a deeper understanding and new knowledge of succession planning strategies for hospital leaders. I encouraged the participant(s) to select an interview location to promote comfort and confidentiality. Researchers are to create an environment to promote the openness of the discussion and enhance data collection and additional probing questions may enhance the conversation and data saturation (Mojtahed, Nunes, Martins, & Peng, 2014; Wright & Ogbuehi, 2014; Yin, 2014).

I informed the participants of my current position, and experience with succession planning to minimize personal bias. The management of researcher bias and the use of reflexivity is a research expectation for assuring the integrity of the researcher and the study's findings (Fassinger & Morrow, 2013). Yin (2014) proposed the use of semistructured interviews for data collection to control researcher and participant bias. Lawrence and Tar (2013) encouraged the utilization of coding and theme building to establish data saturation and minimize participant and researcher bias.

I utilized member checking to validate the transcribed semistructured taped interviews. Noble and Smith (2015) proffered the researcher's duty to validate research information prior to publication. Qualitative researchers conduct member checking to

enhance the validation of the study and promote data saturation (Carlson, 2010; Isaacs, 2014; Reilly, 2013). Wright and Ogbuehi (2014) suggested researchers demonstrate understanding and use of the appropriate collection tools inclusive of the benefits and concerns.

Data Collection Technique

A researcher has the responsibility to collect data in a format that is conducive to achieving the purpose of the study. Yin (2014) suggested exploration, organization, and interpretation of data occur in tandem. The participants received an email requesting their consent to participate in the study before any data collection. Hardicre (2014) and Uusitalo and Broers (2015) advanced the need for participants to maintain individuality and be the right choice to add insights to the research. The researcher has to acknowledge the participant has an option and opportunity to consider the benefit versus the risk of participation and maintain an ethical stance on the decision of the individual (Thaker, Figer, Gogtay, & Thatte, 2015).

The participants received a copy of the open-ended interview questions via email prior to the face-to-face interview. Qualitative researchers use interviewing as a primary data collection tool (Peredaryenko & Krauss, 2013; Stake, 2013). I established and verified the interview appointments with the participants. Thomas and Magilvy (2011) and Yin (2014) identified some disadvantages of interviews such as misaligned interview questions, interjection of information to suit the interviewer, researcher bias, and lack of honesty from the participant with the use interviews for data collection. Yilmaz (2013) suggested additional disadvantages of conducting interviews are the interviewer has to

remain cognizant of personal biases and manage interpretative views during both the interviews and analysis of the interview data. Other disadvantages of interviews are the potential for failure of recording devices causing a loss of data (Grossoehme, 2014). Malagon-Maldonado (2014) noted that organizational information is proprietary and researchers are to utilize organization information adhering to ethical research standards. Some potential disadvantages using organizational documents are failure to recognize outdated information, being unable to obtain access to the information, or lack of trustworthiness of the data/information (Erlingsson & Brysiewicz, 2013; Yin, 2014).

I conducted semistructured audiotaped interviews. Yin (2014) concluded that enabling the participant to expound on the questions to guide the interview for an informative interview process increases the opportunity for valuable information. The use of member checking of the data can enhance the value of a study (Isaacs, 2014). The participants received the same interview questions via email and open-ended questions during the interview process to promote reliability and validity of the data.

The interviewees received an assigned identifier in an alphanumeric code only known to the researcher. Assuring participants' confidentiality can have a positive effect on the outcome of the research with the participant comfortable in sharing information (Beskow et al., 2014). Yin (2014) agreed describing processes for participants' information security demonstrates the validity of the research. Wright and Ogbuehi (2014) suggested the participants receive an option of location for the interview to establish comfort and maintain confidentiality. Yin (2014) suggested the use of two or three types of data for qualitative case studies. In addition to the interview data, I utilized

organizational records of nurse leader succession planning programs to validate findings from the information of participants' interviews.

Data Organization Technique

Semistructured interviews are the main data collection technique I used for this study. The secondary source of information was the documentation of nurse leader succession planning programs of the participating hospitals. Yin (2014) suggested the use of a filing or electronic system to organize and store information. Idri (2015) promoted the Zotero application as a method for researchers to track and store information. Beskow et al. (2014) reminded researchers that data organization requires maintaining the confidentiality of participants' information. All taped interviews, organizational records, and field notes remained secure in a safe accessible by only the researcher for 5 years.

Carlson (2010) proclaimed the use of audit trails promotes trustworthiness of the research. My maintenance of confidentiality of all the collected information demonstrates the recognition of the importance to maintain the ethics of research and the participants' confidentiality. The interviewees received an assigned identifier with an alphanumeric code (P1 through P6) and hospitals (H1 and H2) only known to the researcher. The synthesis of the audiotaped recordings of the interviews remained confidential and secured by me. The destruction of these items will occur after the 5-year period from collection by shredding all field notes, copies of related organizational records, and the physical destruction of taped recordings. I will destroy computer information by transferring information to a jump drive and physically destroying the jump drive.

Data Analysis

Data analysis for case studies involves dissection of the case data and reassembling the data for generating detailed information (Yin, 2014). To assure the validity of the interview data, I provided the participants an opportunity to review the transcripts for accuracy and validated the information prior to data triangulation and theme development. I reviewed the organization documents in tandem with the transcription reviews for methodological triangulation. Thomas and Magilvy (2011) recommend the use of data triangulation for qualitative study validity. Dyess et al. (2016) and Isaacs (2014) advocated the use of member checking to enhance validity and credibility of qualitative studies' findings. Carlson (2010) agreed member checking is important for demonstrating qualitative studies' validity, but does not always preclude including responses that are incongruent, but not recognized as such, between the interviewer and interviewee. Member checking has a value to verify no new knowledge is emerging, therefore demonstrating data saturation (Isaacs, 2014). Employing data and methodological triangulation using interviews from multiple participants and other organizational documentation further assures the validity of findings (Houghton et al., 2013; Yin, 2014).

I used version 10 of NVivo™ for Windows to categorize the participants' responses to the interview questions and to develop themes. The utilization of NVivo in other studies validates its acceptance as a data analysis tool (Bergeron et al., 2016; Pigozi & Bartoli, 2016; Sims-Gould, Byrne, Tong, & Martin-Matthews, 2015). The use of NVivo for identifying themes is less time consuming than manually formulating themes

from the disassembly of the transcribed interviews (Erlingsson & Brysiewicz, 2013). To analyze the interview and document data, I categorized the information to identify themes and their possible correlation with Rothwell's (2005) components of succession planning strategies of (a) succession transparency, (b) individual development, (c) stakeholder accountability, (d) assessment of capabilities, and (e) organizational need analysis from the interviews and nurse leader succession planning programs. As suggested by Houghton et al. (2013) I used the nurse leader succession planning programs to validate the data from the participant's interviews. The themes displayed in a data format can assist the reader in achieving a greater understanding of the data and information (Dyess et al., 2016; Vickers, 2013).

Reliability and Validity

Quantitative researchers employ deductive statistical data analysis to demonstrate studies' reliability and validity (Leung, 2015; Thomas & Magilvy, 2011). To demonstrate quantitative studies' reliability, researchers utilize tests for examining statistical and external reliability. To examine quantitative studies' validity researchers utilize tests for construct validity, internal validity, and external validity (Yin, 2014). Grosseohme (2014) recommended that *qualitative* researchers defend the interpretative nature of their studies through providing analogous demonstrations of reliability and validity. Thomas and Magilvy (2011) recommended qualitative researchers demonstrate studies' *trustworthiness* by enabling other researchers to assess reliability through demonstrating *dependability* and, *transferability*, and the assessment of qualitative studies' validity through demonstrating *credibility*.

Reliability

Research entails the gathering and formulation of data to enrich people with information to progress innovation, global knowledge expansion, and improve informative decision-making (Noble & Smith, 2015). The reliability of the findings from data results from the data collection and analysis methods (Yin, 2014). Qualitative researchers expect to achieve similar results from using the same data collection and analysis methods for different participants for achieving dependability (Leung, 2015). Reilly (2013) suggested data coding from interviews warrants member checking of the transcripts to enhance reliability, credibility, and dependability of the information. Quantitative researchers' verify and demonstrate the reliability of instruments, and qualitative researchers use interview protocols and member checking for assuring reliability and dependability respectively (Onwuegbuzie & Frels, 2013).

A researcher is responsible for providing a study with a foundation of information and data that is valid and reliable (Noble & Smith, 2015). The coding of themes can facilitate achieving and demonstrating data saturation in tandem with member checking (Isaacs, 2014). McPhail, Nomhle, Abler, and Ranganathan (2016) acknowledged the reliability of coders has a part in the validity of a qualitative study. Houghton et al. (2013) and Yin (2014) suggested enabling case study replication can assure the reliability, dependability, and confirmability of the study. I used the same interview questions for all participants to ensure credibility and dependability of the data. Qualitative researchers utilize multiple data sources and types of data to enable data and methodological triangulation (Thomas & Magilvy, 2011; Yin, 2014). I used multiple participants'

responses to interview questions and the organization's succession planning program information as sources for conducting data and methodological triangulation respectively. I provided excerpts of the participants' responses in tandem with information from the literature review for demonstrating credibility.

Validity

Reliability and validity are collaborative concepts to assure research rigor. Yap and Webber (2015) cautioned the lack of validity could amount to the absence of the considered study as valuable to research. Quantitative researchers examine internal validity when the intent of measurement is part of the outcome as a validation of the instrument or construct (Onwuegbuzie & Frels, 2013; Thomas & Magilvy, 2011). I established credibility with the development of themes from similar participants' responses and related documentation. For qualitative studies, the use and availability of interview transcripts, for identifying similarities of responses provide assurance for assuring validity and demonstrating credibility respectively (Leung, 2015). The interpretive aspect of the qualitative researcher receives validation by using the data from multiple resources and types (Houghton et al., 2013).

The external validity of a quantitative study results from examining the generalizability of the study's results to other populations (Thomas & Magilvy, 2011). The qualitative researcher demonstrates external validity through enabling others to determine the transferability of a study to other populations (Houghton et al., 2013). Noble and Smith (2015) reiterated the responsibility of the researcher to the audience is to provide valuable, valid, and reliable information. I have included and described my

intent to use an interview protocol to enable other researchers to replicate the study for other populations.

The use of the same data collection method as in other studies is a mechanism for the researcher to demonstrate confirmability and accuracy of the findings (Yin, 2014). Erlingsson and Brysiewicz (2013) posited the qualitative researcher relies on the emergence of data from multiple participants to enhance confirmability. I enabled the participants to expound on the interview questions to ensure both data saturation and confirmability. Providing rich descriptions of research methods and processes enabling independent replication facilitates determinations of confirmability of a qualitative study (Leung, 2015). An audit trail is a tool for assuring and demonstrating credibility and confirmability for the qualitative researcher to establish study validity and reliability (Houghton et al., 2013).

Transition and Summary

The purpose of this qualitative multiple case study was to explore the succession planning strategies that some hospital managers used to reduce the shortage of nurse leaders. Section 2 consisted of the role as the researcher, participants, research methods, research designs, and ethical standards; data collection tools, organization, and analysis, reliability and validity. Section 3 contains a presentation of the findings, applications for professional practice, implications for social change, recommendations for action, recommendations for further research, reflections, summary, and my overall conclusions from the study.

Section 3: Application to Professional Practice and Implications for Change

Section 3 provides the findings of the study. The headings in Section 3 include the applications to professional practices, implications for social change, recommendations for action and further research, reflections, and a conclusion of the study. The study findings are in the presentation of four themes.

Introduction

The purpose of this qualitative multiple case study was to explore the succession planning strategies some hospital managers used to reduce the shortage of nurse leaders. The data for this study came from the semistructured interviews of the hospital managers, field notes, and the organizations' succession planning programs or leadership development information of two hospitals in Hampton Roads, Virginia. The hospital managers identified strategies personally used to reduce nurse leader shortages within their organizations. The four major themes that emerged from analyzing the data were (a) organization needs, (b) opportunities, (c) leader identification, and (d) leadership preparation.

Presentation of the Findings

Data collected for this study comprised of field notes, semistructured interviews of the hospital managers, and the organizations' succession planning programs or leadership development information. The six hospital manager participants responded with individual expertise to the interview questions to answer the research question: What succession planning strategies do some hospital managers use to reduce the shortage of nurse leaders? The comparison of the information from the succession programs and

Prepared leaders	6	100%
Healthcare challenges	6	100%
Organization future	5	83%
Delivery of care	4	66%

Healthcare challenges and barriers can serve as the deciding factor that organizational leaders use to determine organization needs (Titzer et al., 2014). The preparation of future nurses with succession planning should be ongoing, as the retirement of the Baby Boomers will occur by 2020 (Gray, 2014; Levanon et al., 2014; Titzer & Shirey, 2013). Patidar, Gupta, Azbik, and Weech-Maldonado (2016) suggested succession planning is a strategy in itself that healthcare leaders realize can affect competitive advantage. The study participants identified that the needs and continued success of the organization rely on the succession planning of nurse leaders.

P1: "Succession planning is to help us grow people within our organization that have been exposed to the same values and the same ethical approach which is how we deliver care to our patients." P5: "I think it is important because you have to look forward to the future." Healthcare leaders must manage healthcare challenges of caring for comorbid patients with reimbursable costs attributed to the quality of care and maintain legislative initiatives with the reduction of organizational costs (Anjum & Bolon, 2013; Davis et al., 2013). In conjunction with the healthcare challenges the aging and retiring workforce skills will diminish from the healthcare industry that are responsible for the effective daily operations of service organizations (Levanon, Cheng, & Pattera, 2014). P3: "I think for me being a Baby Boomer to inform the organization that I am thinking

about retiring within the next 1-2 years.” P4: “You really want to make sure that you address the attrition within a hospital environment that you set yourself up and have positive history along the way and able to groom emergent leaders for care, service, and or leadership.” P1: “Those who are in the leadership positions can help to establish the structure and maintain that structure so that the organization can continue to develop those positions.”

The participants’ responses predominantly identified the organization has needs to retain prepared leaders for the complexities of many of the healthcare challenges that the healthcare industry has to currently manage. Healthcare leaders acknowledge the labor competition and challenges to obtain skilled professionals is not relenting in the realm of other business and healthcare challenges (Titzer & Shirey, 2013). The strategies that healthcare leaders utilize to retain tacit knowledge and prepared nurse leaders can have a negative or positive effect for the organization and communities served.

The ability to care for patients and communities is reflective on the future of the organization, which can be a financial need of the healthcare organization. The theme elements pertaining to retained and prepared leaders considered in tandem with healthcare challenges and care delivery can affect healthcare sustainability (Engler et al., 2013; Zuckerman, 2014). Healthcare leaders manage hospitals as a business. Soewignyo and Soewignyo (2015) suggested business leaders’ utilization of revenue-generating strategies must also consider talent management for human capital financial and productivity returns. Healthcare leaders should consider the retention of prepared nurse leaders to manage healthcare challenges and maintain the future of the organization as a

continuous effective strategy of safe and quality care delivery to communities and patients (Block, 2013;Titzer & Shirey, 2013). Table 2 displays the participants’ responses to the questions of succession planning strategies of the types of opportunities for emerging leaders. The IQs 2, 3, 4, and 7 drove the emergence of the opportunities theme.

Theme 2: Opportunities

Table 2 contains a summary of the participants’ responses to the questions of succession planning strategies of the types of opportunities for emerging nursing leaders. The participants were forthcoming with the various opportunities offered to emerging leaders in the participating hospitals. The IQs of 2, 3, 4, and 7 drove the emergence of Theme 2, opportunities.

Table 2

Responses Related to Theme 2: Opportunities

Opportunities	Number of participants reporting	Percentage
Identify areas for professional growth	6	100%
Mentoring	6	100%
Exposure to others in the organization	6	100%
Stakeholders	4	66%
Networking	4	66%

I reviewed the documents of the leadership programs of both participating organizations inclusive of the topics included in the programs for leadership development. The topics of the H1 leadership development included human resource management, organizational safety, quality initiatives, leadership personality tests, talent

management, business acumen, customer service, leadership, and finance. The topics of H2 leadership development included the same topics as H1. H2 also had a program that exposed individuals to other leaders in the organization through interaction of panel interviews, presentations, and projects. H1 and H2 leaders provided individuals the opportunity to set goals throughout the year and review the goals with their immediate supervisors or leaders in a formal setting of succession planning. Boyal and Hewison (2015) suggested nurse leaders should have preparation on the topics of quality initiatives, regulatory standards, business acumen, and human resource management. Mintz-Binder (2013) agreed with the need for a business acumen but included leadership to monitor and evaluate the effectiveness of safety, customer service, and quality care of patients. Nurse leaders require the correct tools, knowledge, and experience to function effectively as leaders (Waxman & Delucas, 2014).

Leaders' capitalization on employee capabilities as a strategy of future planning preparation may minimize financial losses for organizations (De Vos & Dries, 2013; Marbury & Mayer, 2013). The transparency of leadership opportunities and advancements encourages potential leader retention (Rothwell, 2005; Titzer et al., 2013). The participants highlighted the provision of opportunities using different strategies is necessary. P1: "Give them the opportunity to grow and exposure to new ideas, new situations, and new challenges." P5: "If you do not have the opportunity, they find it elsewhere." P2 referenced meeting with new hires to gain an understanding of what goals and plans the individual may have for the future.

What the leader can implement to help the individual such as leadership classes, change of work area or specialty, or just the exposure to leadership activities if that is the plan or goal for the individual are some strategies. What I do, well especially with my new hires, for retention I meet with them formally at 3 months, 6 months, and then annually. I think in light of the nursing shortage the administration leaders' eyes are open to retention and succession planning because of the young generation.

The participants mentioned informal meetings to discuss goals was as important as the formal meetings. The exposure to other leaders within the organization is a current strategy of both H1 and H2 according to both organizations' documents of the leadership programs and the participants' interviews. The participants promoted the use of mentorship as a valuable strategy for preparing future leaders.

Succession planning can occur through implementing strategies of mentorship, coaching, position classification, and resource identification (Carriere et al., 2009; Trepanier & Crenshaw, 2013). P5 and P6 in response to IQs 2, 3, and 4, utilized grooming and mentoring to provide exposure to other leaders, projects, and leadership opportunities to emerging leaders. Both participants reported the success of the emerging leaders' progression into leadership roles from the implementations of grooming and mentoring. P6: "Groom them for the role so maybe having someone as their mentor for a little while especially the manager." P5: "I love to mentor. One of the things I pride myself on is identifying people with leadership talent and encouraging those by getting them graduated type of opportunities." P6: "She has already taken the (program name),

and she is the charge nurse, so she takes all those duties. I think that is helping her out pointing her in the right direction.” P4: “For leaders any time you retain talent and promote from within orientation time decreases, and familiarity with the system, leadership structure, policies, procedures, and the patient flow is helpful for orientation efficiency.”

The participants’ responses to IQ7 did not provide a monetary value to the effectiveness of the strategies on the hospital’s costs and revenues and there were no financials provided to expound on this question. Titzer and Shirey (2013) warned healthcare leaders of the costs for nurse leader shortages could result in increased costs of \$200-500 thousand per year for each hospital. P5: “I am sure there are studies that show leadership retention over time would save money I could not say for sure if it does or does not but I truly believe in it.” P1: “When you have helped people grow and expand their horizons within your organization, then you are inevitably saving the money and I do not have a monetary value to put on this.” By the year 2020, the failure to have succession planning will amount to organizational financial costs of \$21 billion on human resource expenditures (Marbury & Mayer, 2013).

The hospital managers’ efforts to include succession planning as a long-term strategy requires organizational commitment and the collaboration of mentors, decision-making leaders, employees, and external stakeholders (Rothwell, 2005; Titzer & Shirey, 2013). Carriere et al. (2009) and Noyes et al. (2002) claimed succession planning requires components of mentorship, assessment, identification, goal performance, and resources.

Theme 3: Leader Identification

The emergence of theme 3 supports the claims of Carriere et al. (2009) and Noyes et al. (2002). Table 3 displays other strategies the participant leaders utilized for succession planning to identify potential leaders. The IQs of 2, 3, 4, 5, and 6 drove the emergence of Theme 3, elements related to leader identification.

Table 3

Elements Related to Theme 3: Leader Identification

Leader Identification	Number of participants reporting	Percentage
Mentoring	6	100%
Open communication	5	83%
Identified goals and plans	5	83%
Assessment for potential candidates	5	83%
Motivation	3	50%

The leader has a duty to consider potential organizational leaders and implementation of strategies that would benefit the future of the organization, stakeholders, and emergent leaders (Pyszka & Gajda, 2015). Rothwell (2005) agreed internal stakeholders should have accountability for the development and succession of leaders. Titzer and Shirey (2013) provided further research with the indication of how to strategize for succession planning with (a) successor identification (b) successor

development (c) and evaluation. The participants expressed how they identified leaders with their responses to IQs 2, 3, 4, 5, and 6.

P3: My previous director she always said to me “that a good leader will always have a succession plan so that they will always leave the organization in a better shape than the way that they came in.” P1: “The person who may be leaving the organization has comfort knowing the successor receives a thorough handoff, reviews and coordinates the challenges, the positives, possibilities of actions completed differently or repeated.” P3: “My first implementation was to determine her 3-5 year goals as short-term those are my operational definitions and where did she see herself anywhere from 5-10 years for long term.” The method to develop employees requires a continuous dialogue with employees about capabilities, skills, and knowledge, in addition to, leader communication to employees about career development and transitions into other roles (Trepanier & Crenshaw, 2013). Leaders can utilize key roles and capabilities in the progression analysis of an organization to determine the best strategies for succession planning (Sherrod & Holland, 2013). Gray (2014) recognized the components of succession planning as (a) successor identification (b) job competencies (c) leverage of capabilities (d) potential talent, and (e) talent development. The participants expressed their desire to continue to provide strategies of succession planning and mentoring.

P2: “Right now, I am grooming one of my nurses. We had a mentorship program for a year, but we had to stop it because of staffing issues.” In response to IQs 5 and 6, the barrier of staffing was a disruption to the mentorship program of H1 but P2 continued to groom potential leaders with an informal process. The responses of P3, P4, and P5

aligned with Rothwell's (2005) and (2011) suggestions of communication enhancement, development of individuals, organization desired capabilities, and meeting organizational needs. P3: "Said that she thought that she would like to be able to be a manager." P4: "If a leader had a pool of career oriented people and given the opportunity to pick from that pool some of the leg work is truly done."

P5: I think it is important because you have to look forward to the future.

If not, we find ourselves in a position where we are scrambling to put somebody in a leadership position that's not ready, and then it takes even longer for that person to be successful and maybe even before they get to that point become frustrated and decide this is not for them.

The loss of nurse leader experience and knowledge is a concern for communities, the healthcare industry, and healthcare leaders as retiring nurses leave the healthcare industry (Sherman et al., 2014; Titzer et al., 2013). The provision of adequate succession planning may serve as an opportunity for healthcare leaders to diminish the potential of unprepared leaders. P4: "It is really about looking at the team and evaluating their aspirations."

Theme 4: Leadership Preparation

Individuals may need help in realizing career aspirations and through the mutual collaboration of a mentor or leader; the individual may obtain new skills and knowledge (Heslin, & Turban, 2016). Gelens et al. (2014) highlighted in a study of high potential candidates of the desire to have leaders identify the individual as a candidate for leadership. Malik (2013) encouraged leaders to have an awareness of how leadership

style can help individuals to develop. The participants explained how through their individual leadership styles they assisted in the development of emerging leaders. Table 4 is a display of succession planning strategy implementation elements the participants' utilized with some potential leaders to prepare the nurse leaders for a new role. The IQs of 2 and 3 drove the emergence of theme 4.

Table 4

Interview Response Items Relating to Theme 4: Leadership Preparation

Leadership Preparation	Number of participants reporting	Percentage
Mentoring	6	100%
Leadership programs	6	100%
Classes (budget, employee relations, etc.)	6	100%
Support from leaders	6	100%
Project involvement	3	50%

Leadership development initiatives incorporating business trends and for addressing barriers are important for leaders to make strategic decisions that benefit the organization (Mensik & Kennedy, 2015). Leadership role reviews may require the need to include leadership capabilities, adding to the complexity of understanding the leadership phenomenon (Boykins et al., 2013). Nurse leaders have to comprehend how the quality of care, safety, and patient satisfaction are components of their leadership responsibilities (Waxman & Delucas, 2014). Some of the participants mentioned the ability to prepare potential nurse leaders to take on the role is an essential component of

leadership. Some strategies include the use of the leadership classes that are available in both H1 and H2 and also validated by the participants' interviews and the organizations' documentation of leadership class topics. Healthcare leaders' desire for profitable gains proffers effective leadership and stakeholder awareness to support succession planning (Marbury & Mayer, 2013; Trepanier & Crenshaw, 2013).

P5: "It is a different mindset sometimes from a rank and file staff person to a leader whose thinking bigger ... about the overall success of the facility or the organization and how to give the best experiences and outcomes." P4: "The potential skill set that takes a lot of time and energy in being a nurse manager." P6: "Being able to see what it is that a manager actually does on a daily basis." Just being able to see a day in the life of a manager and see actually the fact that you need things to be successful. Nurse leaders require skills and knowledge about quality initiatives, regulatory standards, financial aspects, and human resource management (Boyal & Hewison, 2015).

The method to develop employees requires a continuous dialogue with employees about capabilities, skills, and knowledge, in addition to, leader communication to employees about career development and transitions into other roles (Trepanier & Crenshaw, 2013). Calareso (2013) proposed the advancement of individuals with preparation and networking with organizational stakeholders as part of succession planning. The participants discussed techniques personally utilized to prepare future nurse leaders.

The strategic implementation of succession planning requires organizational commitment and collaboration of mentors, decision-making leaders, employees, and

external stakeholders (Rothwell, 2005; Titzer & Shirey, 2013). P3: “I began to develop a plan and looked for a mentor.” P4: “Emerging leader classes, and several classes throughout the market on PowerPoint presentations, Excel learning, financials, courses like that so no matter the role individuals have an opportunity to learn.”

Organizational leaders’ maintenance of individual accountability to balance the expectations of internal and external stakeholders can leverage the development of emerging leaders as an enhancement for organization sustainability (Bridoux & Stoelhurst, 2014; Corner, 2014). P3: “Individuals wanting to be in a leadership position makes it easier to mentor that individual.” P4: “I try to pull them into the key positions.” P6: “Definitely encourage them to complete the (program name), and we have another program (name of program) something that prepares them to go into leadership.”

Titzer et al. (2013) found hospital managers have competing priorities in parallel to stakeholder concerns and succession planning may not be a precedence in the presence of daily decision-making. Pyszka and Gajda (2015) encouraged leaders to manage talent through a stakeholder process and develop strategies of retention. P3: “We will do this for a trial ...and so 2 ½ years went by and when I received a promotion I interviewed her, and she transitioned very easily because she literally mentored imitation.” P1: “I need to make a plan for that person, and when the timing is right then we would intervene.” P5: “We have had three in my career here so far that have received mentoring and given opportunities.” P1: “What makes me most proud is I see where some people under me have ended up and... I know I helped communicate for them to see available options.”

Comparison of Findings With the Conceptual Framework

The findings of the study support Rothwell's conceptual framework. Rothwell (2005) recommended that leaders include (a) succession transparency, (b) individual development, (c) stakeholder accountability, (d) assessment of capabilities, and (e) organizational need analysis as components of succession planning. Rothwell encouraged leaders to make leadership prospects known to emergent leaders with open communication and provide opportunities of growth with development at individual levels that would prepare the incumbent for the next role. The emerging themes included the strategies of the communication of goals, plans, and potential opportunities with perspective nurse leaders and aligned with the components of the conceptual framework. Pyszka and Gajda (2015) supported Rothwell and encouraged leaders to adopt the stakeholder role in succession planning to meet organizational needs. Alter (2013) and Trepanier and Crenshaw (2013) encouraged the use of networking to promote exposure of emergent leaders to other organizational leaders. The participants' responses led to themes to support the preparation and identification of nurse leaders and stakeholder accountability creating an alignment with the succession planning conceptual framework. The retention of tacit knowledge, prepared leaders, leadership, increased organizational performance, enhanced employee retention, and an engaged workforce can be beneficial for organizations (Trepanier & Crenshaw, 2013).

The understanding of succession planning strategies that will continue to motivate, support, and develop others into future leaders and decrease leadership shortages with the retention of knowledge and experience is necessary for a dynamic

environment (De Vos & Dries, 2013; Titzer et al., 2013). The bench strength and productivity of the organization can occur with career growth opportunities, a pool of prepared candidates with the required organizational skills, knowledge, and abilities (Harris et al., 2015). The identification of a potential successor candidate has to follow with the willingness of the replacement to participate in the development of new skills, knowledge, and abilities (Evans, 1970). Trepanier and Crenshaw (2013) encouraged hospital leaders to prepare for the impending nurse leader retirements with a succession management plan and acknowledged the need for dedicated time and resources for succession planning to be an effective strategy.

Marbury (2012) encouraged current leaders to advocate for succession planning. Strategic planning without the inclusion of succession planning could be a disadvantage to organizations (Patidar et al., 2016). Succession planning is an opportunity of growth, but individuals require grooming and time to develop in new roles (Johnson, 2016). The emerging theme of organization needs aligns with the succession planning conceptual framework. Rothwell (2005) encouraged organizational leaders to conduct an organizational needs analysis. The participants' expounded on the need to consider how emerging leaders could advance the organization with leadership development to take on leadership roles, mentorship from knowledgeable and experienced leaders, and a connection to the organization's mission. Employees are the *brand* of the organization and internal marketing as a strategy can alter the motivation and engagement of staff (Luigi et al., 2013). Leaders have an opportunity to encourage and offer emerging leaders to seize the opportunity for advancement to reduce nurse leader vacancies and to retain

nurse leader skills, knowledge, and abilities. According to Sugiyama, Cavanagh, van Esch, Bilimoria, and Brown (2016), by recognizing the key challenges of organizations a leader's acknowledgment and strategies for responding to the need for leadership development and preparation through leadership programs can provide a solid return of investment.

Applications to Professional Practice

Through the participants' interviews, organizational documents, and field notes the emergence of four themes related to organization needs, opportunities, leader identification, and leadership preparation can provide hospital managers with succession planning strategies to reduce nurse leader vacancies. Healthcare leaders' adoption of strategies to reduce nurse leader vacancies in response to current and future business trends and barriers can serve as a tool for obtaining a competitive advantage (Brunnson, 2015; Trepanier, & Crenshaw, 2013). Health care leaders can strategically plan for the future of the organization with human resource management planning using succession planning.

Value added human resource management activities of talent management could address organizational strategies and needs to achieve sustainability (Pyszka & Gajda, 2015). In theme one the participants expressed the importance of strategies for the retention of value-laden leaders, maintenance of the structure of the organization, the basis of preparing for the future, and accounting for internal talent. Hospital leaders could utilize strategies to retain talent and strategic planning to align future endeavors with

internal capabilities or identify, and plan for addressing, required capabilities to enhance sustainability.

In theme two, the participants expressed the need to provide emerging leaders with opportunities, exposure to what current nurse leaders do in their daily work, involvement in projects, mentorship, and goal development and planning. Providing emerging leaders with opportunities to learn new skills, ask questions, and understand processes reduces the anxiety of the newness of the position (Johnson, 2016).

Opportunities and exposures to different operational duties of the organization was a strategy suggested by the study participants. Hospital managers could use leadership and information opportunities and exposures as strategies to advance nurse retention, diversity, and innovation.

Johnson (2016) introduced the concept of gradually transitioning emerging leaders into new positions as an opportunity to transition with success. The identification of potential leaders is a part of the formal or informal process of succession planning. Leaders' lack of succession planning strategies may lead to an increase of nurse leader vacancies. Hospital leaders with a focus on the impact of nurse leader vacancies correlate the lack of succession planning with possible reductions in productivity, poor patient quality outcomes, and malfunctioning nursing departments (Johnson, 2016). In theme three, the participants discussed the need to identify potential leaders through succession planning. Some hospital managers used strategies inclusive of setting goals and planning with the emerging leader, departing leaders' preparation, or handoff to successors, mentorship, and suggested the development of prepared leader pools. Hospital managers

could use the stated succession planning strategies for achieving a status of continued readiness and minimizing the potential for productivity losses due to nurse leader departures.

In the fourth theme, the participants advised of the need to prepare emerging and new leaders for the role of leadership. Leaders can use the strategy of leader preparation to enhance the capabilities of nurse leaders and increase nurse leader retention. The exposure of the incumbent leader into the nurse leader role should include a period with the outgoing leader (Johnson, 2016). Nurse leader development and preparation enable nurse leaders to transfer skills and knowledge to other potential leaders (Ennis, Happell, & Reid, 2015). Bish, Kenny, and Nay (2015) suggested with the various internal and external healthcare barriers, trends, and challenges that nurse leaders have to understand the nurse leadership role for effectively managing internal and external issues.

Implications for Social Change

Some healthcare organizations are facing multiple changes that can affect the financial and competitive aspect of the company (Brunnson, 2015). The competitiveness of vying for the customer or patient has a financial connection to patient satisfaction and quality of care (Block, 2013; Smart Shoup, 2015). The inability to meet such metrics can lead to hospital closures and cause a detriment to the communities served. The leadership from nurse leaders can serve as the fulcrum that can provide organizations with a competitive advantage. Poor quality outcomes can lead to lower financial performance that can affect human capital (Baluch et al., 2013; Block, 2013). Organization sustainability is achievable with leaders' use of strategies and human resource practices

to enhance organizational performance (Mitchell et al., 2013). The emerging themes of strategizing organizational needs with the use of succession planning strategies for leader identification, leadership opportunities, and leader preparation can enhance the competitive advantage of hospitals. Hospital managers' use of the succession planning strategies that emerged in this study could reduce the risk of nursing leadership shortages and develop future leaders to benefit the continuity of healthcare services for patients, families, and communities.

Recommendations for Action

Senior hospital leaders, human resource, and nursing leaders should evaluate their current organization strategies and talent management initiatives against the identified themes and succession planning strategies. Hospital managers are responsible for controlling costs and the incorporation of strategies to reduce nurse leader vacancies may serve as a short and long-term strategic benefit of cost savings. The underutilization of succession planning strategies and the lack of succession planning transparency may lead to an increase in nurse leader vacancies (Titzer et al., 2013; Trepanier & Crenshaw, 2013). I identified and based four recommendations to reduce nurse leader vacancies on the findings from the study. The first recommendation is for hospital leaders to keep potential and emerging leaders aware of possible opportunities and provide leadership exposure opportunities, or risk that the potential leaders seek outside opportunities. The second recommendation is for hospital managers to include professional developmental goals for nurse leaders and a leadership preparation and goal review on a quarterly basis. The third recommendation is to develop a formal succession plan for identified mentors

and protégés. The fourth suggestion is to incorporate developmental courses and classes that prepare nurse leaders for the challenges, trends, and barriers of healthcare. I will share the findings of this study with the participants, other healthcare professionals, and industries through nursing associations, and healthcare and research journals.

Recommendations for Further Research

The future study of nurse leader succession planning from a quantitative research perspective may enable business leaders to correlate and forecast the effects of using succession planning as a human resource strategy to increase productivity, manage intellectual property, and enhance sustainability. I addressed four limitations of this study. The first limitation pertained to accuracy of the information from the participants and data. The second and third limitations were the possibility of lack of participants' dialogue and participation during the interview process. The fourth limitation was the potential unavailability or inaccessibility to participants for the interview process, which proved to be the most challenging of the limitations. I addressed this by providing a follow-up email to possible participants for a response of voluntary participation.

The attainment of participants from a hospital leadership association may provide a more diverse and convenient participant pool to provide other strategies to address the research question of what succession planning strategies do some hospital managers use to reduce the shortage of nurse leaders. The association participant pool may provide a wider range of issues that can affect the use of strategies in one type of hospital setting versus another. Recommendations for future research are to extend the hospital population to small and rural hospitals with fewer resources who have successfully

implemented succession planning strategies. Future research for this size and type of hospital can heighten the awareness of hospital leaders of the importance of nurse leaders in more diverse patient care venues.

A wider geographical range may also provide more information about the use of succession planning strategies for the reduction of nurse leader shortages. Further query of the succession planning strategies for specific generations may provide a robust compilation of strategies for the varied generational nurse leaders. Strategies of HR management require acknowledging the generational gaps and the promotion of diversity and innovation in nursing and nurse leadership (Dyess et al., 2016; Lyons et al., 2014). I further suggest the research of formal versus informal succession planning programs from a cost perspective as the data from this study reflect that unfortunately informal succession planning is prevalent.

Reflections

The process of academic writing did not come with ease to me as a new scholar. I am grateful for the opportunity to grow professionally and personally, with the pursuit of this doctoral degree, and writing of this doctoral study that could make a difference in nursing and other professions. I started this journey with knowledge of succession planning and kept an open mind throughout the study to gain further knowledge on succession planning. The use of a journal during the interview process allowed me to focus on participants' responses rather than personal biases.

The findings of this study had a personal and professional effect on me as a new scholar and experienced nurse leader. I received an introduction of additional succession

planning strategies to include in my own work and future endeavors. I am now more concerned with the lack of formal succession planning programs for nurse leaders, yet have some hope as the participating hospitals have multiple programs to develop leaders and provide learning opportunities.

Summary and Study Conclusions

The management and development of nurse leaders is a typical area lacking focus from hospital leaders (Mensik & Kennedy, 2015). Trepanier and Crenshaw (2013) posited that 70% of the healthcare industry leaders reported a lack of succession planning practice. Hospital leaders taking the opportunity to plan for and address the continued nurse leader vacancy with succession planning strategies can provide both significant returns on investment for the organization and benefits for communities. Hospital managers can learn from other colleagues' successful use of nurse leader succession planning strategies of acknowledging organization needs, providing emerging leaders with opportunities, identifying emerging leaders, and preparing new leaders to reduce nurse leader vacancies. In conclusion, the findings from this study adequately sufficed to answer the central research question and can be useful for obtaining benefits to hospitals, employees, patients, and communities.

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Appendix A: Interview Protocol

1. Before the interview begins, participants received appreciation for participating and then I asked for permission to record the interview, and reiterated the nature of the study.
2. Obtaining verification of the receipt of written consent and confirmation of participant consent occurred through digital recording. I restated to the participant that participation is voluntary. Included in the recording are statements to the participants' withdrawal as acceptable at any time, with the exception of my submission of the information for approval of the study and confirming the participant's identity and of the organizations, remain confidential.
3. The questions asked of the participants were from the open-ended interview questions listed in Appendix E.
4. After the interview was complete, I employed member checking by going back to the participants for review of the interview summaries and data saturation. The participants had the ability to verify the information with a review of the transcript and the context of the statements. I made changes and resubmitted to the participants as needed.

Appendix B: Participant Invitation Email

Dear < leader>,

I have a request for your consideration. I have been pursuing a Doctorate of Business Administration in Human Resources from Walden University over the past couple of years. My proposal to conduct the study is pending approval and I hope to finish by the end of May 2017.

My research study includes hospital leaders and strategies of succession planning of their organizations. You, as a key leader of succession planning and 5 years or more of leadership experience are an ideal candidate for this research. My study needs to include hospitals where the key leaders have established succession plans. The leaders must have a current role in organizations located in Hampton Roads, Virginia. By learning about organizations that are proactively implementing succession strategies, I am hoping that this study will inspire many more healthcare organizations to engage in formal succession planning so their good works will continue effectively after their key leaders step down.

The time commitment would involve a short interview (1 hour or less) with you and the opportunity to review any relevant company documents such as codified succession plans, employee handbooks, bylaws, and records of leadership development activities. I would be obligated to keep all of this information confidential and would supply consent forms and other information to that effect. An agreement would not be binding, so withdrawal can be done at any point. I would like to schedule an appointment with you during the month of March, 2017. I can be available at your convenience to meet at your facility or a location of your choice. Thank you for your consideration.

Sincerely,

Venecia Holmes
Walden DBA student

Appendix C: Letter of Cooperation

Name of Corporation
Corporation Contact Information

Date

Dear Venecia Holmes,

Based on my review of your research proposal, I give permission for you to conduct the study entitled *Achieving Hospital Sustainability Through Strategies for Nursing Leader Succession Planning* within the (Name of Corporation). As part of this study, I authorize you to select and interview six participants based on the criteria of the research proposal. Interviews may be audio recorded as long as all parties remain confidential in the research study and research data is used only for research purposes. I further authorize you to communicate with selected participants throughout the duration of the research study for research purposes only. The results of the research study must be provided at the completion of the research study for our benefit. Individuals' participation will be voluntary and at their own discretion.

The student will be responsible for complying with our site's research policies and requirements, including: Maintaining confidentiality, ethical research practices, secured storage of any company information, disclosure of any research breeches and the review any relevant company documents such as codified succession plans, employee handbooks, bylaws, and records of leadership development activities.

We understand that our organization's responsibilities include: a safe and suitable interview room and remote faculty to supervise the interview and research process. We reserve the right to withdraw from the study at any time if our circumstances change.

I confirm that I am authorized to approve research in this setting. I understand that the data collected will remain entirely confidential and may not be provided to anyone outside of the research team without permission from the Walden University IRB.

Sincerely,
Authorization Official
Contact Information

Walden University policy on electronic signatures: An electronic signature is just as valid as a written signature as long as both parties have agreed to conduct the transaction electronically. Electronic signatures are regulated by the Uniform Electronic Transactions Act. Electronic signatures are only valid when the signer is either (a) the sender of the

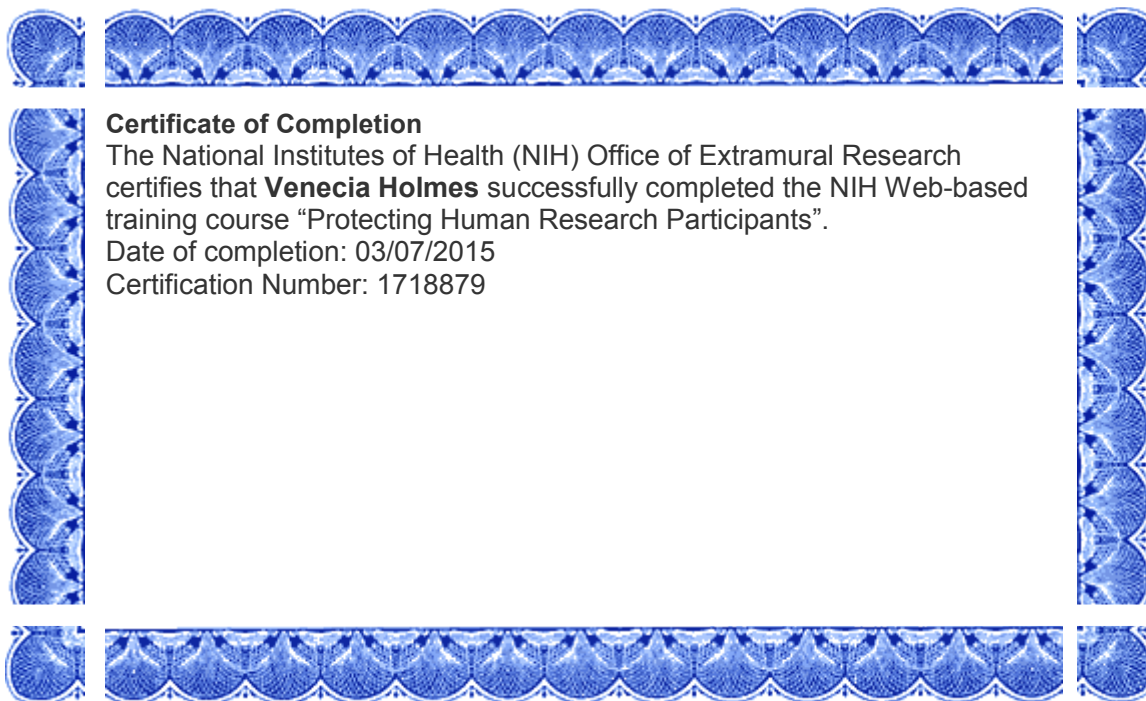
email, or (b) copied on the email containing the signed document. Legally an "electronic signature" can be the person's typed name, their email address, or any other identifying marker. Walden University staff verify any electronic signatures that do not originate from a password-protected source (i.e., an email address officially on file with Walden).

Appendix D: NIH Certification

Protecting Human Subject Research Participants

Saturday, March 7, 2015

2:11 PM

Inserted from <<https://phrp.nihtraining.com/users/cert.php?c=1717879>>

Appendix E: Interview Questions

1. Why is nurse leader succession planning important to your organization?
2. What succession planning strategies did you use to reduce nurse leader shortage?
3. How did you implement these strategies?
4. What identified successes have come from the use of these succession planning strategies?
5. What have been some barriers to nurse leader succession planning implementation?
6. How have you addressed the barriers to implementing the strategies?
7. How have you assessed the effectiveness of your strategies for your hospital costs and revenues?
8. What other information would you like to add that we have not already discussed?